

2013 Community Health Assessment Report



WASHINGTON COUNTY



Contributors

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PREPARED BY



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Disclaimer

While statistics and data for the indicators were, to the best of the author's knowledge, current as the Community Health Improvement Plan Report 2013 was drafted, there may be subsequent data and developments, including recent legislative actions, that could alter the information provided herein.

This report does not include statistical tests for significance and does not constitute medical advice. Individuals with health problems should consult an appropriate health care provider. This report does not constitute legal advice.

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Table of Contents

- INTRODUCTION 7**
 - Data Sources 8
 - Methods 9
 - Social Determinants of Health Framework 9
 - Process & Engagement of Community Health Partners 9
 - Quantitative Data 10
 - Qualitative Data 10
 - Limitations 10
- WASHINGTON COUNTY COMMUNITY HEALTH STATUS REPORT 14**
 - Introduction 16**
 - Washington County Overview 17**
 - Geography 17
 - Demographics 18
 - Education 19
 - Income and Poverty 20
 - Employment 21
 - Housing and Cost of Living 22
 - Access to Healthcare 23**
 - Primary Care 23
 - Oral Health 27
 - Mental Health 28
 - Health Insurance 29
 - Health Outcomes 31**
 - Chronic Diseases 31
 - Preventative Services 31
 - Maternal and Child Health 32
 - Mental Health 32
 - Substance Abuse 33
 - Health Disparities 34**
 - Geographic Disparities 34
 - Vulnerable Populations 35
 - Low Income Individuals 35
 - Uninsured Adults 35
 - Adults with Limited Education 36
 - Non-English Speakers 36
 - The Disabled 36
 - The Elderly 37
 - Special Populations 37
 - Migrant and Seasonal Farmworkers 37
 - The Homeless 38
 - Residents of Public Housing 38
 - Results of Focus Group and Interviews with Key Informants 39**

Recommendations	44
FORCES OF CHANGE	47
Background.....	49
Methods.....	49
Summary/Key Findings.....	51
Identification of Forces.....	54
LOCAL PUBLIC HEALTH SYSTEM ASSESSMENT	61
COMMUNITY THEMES AND STRENGTHS	65
Introduction.....	67
Methods.....	67
COMMUNITY HEALTH STRATEGIC PLANNING	81
Summary from MAPP Assessments.....	83
Health Issues & Distribution -Health Disparities, Health Equity or High Health Risk Populations.....	87
Health Assets & Resources.....	93
Health Insurance Coverage.....	93
Coverage for Children.....	97
Primary Care.....	98
Healthcare Facilities.....	102
Acute Care.....	102
Emergency Room.....	106
Long-Term Care.....	108
Mental Health and Substance Abuse.....	109
Dental Care.....	109
Washington County Physical Assets.....	110
Health Policies.....	112
APPENDICES	121
Appendix 1 – Washington County Needs Assessment	123
A. List of Key Informants and Focus Groups.....	123
B. Key Informant Interview Questions.....	124
C. Focus Group Questions.....	125
D. Table of Providers.....	126
Appendix 2 – Forces of Change Survey	137
A. Survey Instrument.....	137
B. Verbatim Responses.....	145



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INTRODUCTION

This Community Health Assessment (CHA) provides a snapshot in time of the community strengths, needs, and priorities. Guided by the Mobilization for Action through Planning and Partnerships (MAPP) process, this report is the result of a collaborative and participatory approach to community health planning and improvement.

A Community Health Assessment is a collaborative process involving community partners to identify strengths, capacity, and opportunity to better address the many determinants of health. Improving the health of the community is critical to enhancing Washington County residents' quality of life and supporting its future prosperity and well-being.

The Washington County Community Health Assessment serves to inform the community decision making, the prioritization of health problems, and the development, implementation, and evaluation of community health improvement plans. The overarching goals of this report include:

- Examination of the current health status across Washington County as compared to Florida.
- Identification of the current health concerns among Washington County residents within the social and economic context of their community.
- Documentation of community strengths, resources, forces of change, and opportunities for health service provision to inform funding and programming priorities of Washington County.

Four broad focus areas were used in the CHA process:

1. Community Health Status Profile
2. Local Public Health System Assessment
3. Forces of Change
4. Community Strengths and Themes



DATA SOURCES

Behavioral Risk Factor Surveillance System (BRFSS)

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

This state-based telephone surveillance system is designed to collect data on individual risk behaviors and preventive health practices related to the leading causes of morbidity and mortality.

County Health Rankings <http://www.countyhealthrankings.org/#app/florida/2012>

The County Health Rankings rate the health of nearly every county in the nation. The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to provide this database.

Florida Cancer Registry

http://www.doh.state.fl.us/disease_ctrl/epi/cancer/Background.htm

The Florida Cancer Data System (FCDS) is Florida's legislatively mandated, population-based, statewide cancer registry. The FCDS is a joint project of the Florida Department of Health and the University of Miami Miller School of Medicine.

Florida CHARTS <http://www.floridacharts.com>

The Florida Department of Health, Office of Statistics and Assessment maintains the Community Health Assessment Resource Tool Set (CHARTS) is commonly used to conduct community health assessments, prioritize health issues at the state and local level, and monitor changes in health indicators over time.

Florida HealthFinder, Florida Agency for Health Care Administration (AHCA)

<http://www.floridahealthfinder.gov/QueryTool/Results.aspx>

The Inpatient Data Query provides performance and outcome data and information on selected medical conditions and procedures in Florida health care facilities.

Florida Youth Tobacco Survey (FYTS)

http://www.doh.state.fl.us/disease_ctrl/epi/Chronic_Disease/FYTS/Intro.htm

The FYTS tracks indicators of tobacco use and exposure to second-hand smoke among Florida public middle and high school students, and provides data for monitoring and evaluating tobacco use among youth in the Florida Tobacco Prevention and Control Program.

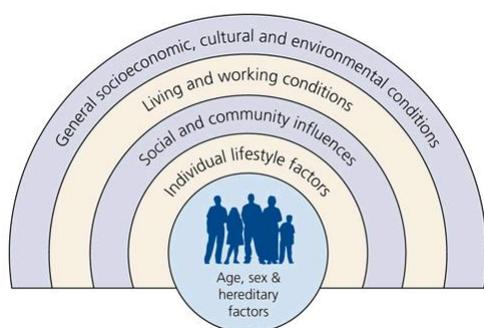
United States Census Bureau <http://quickfacts.census.gov/qfd/states/12000.html>

The U.S. Census Bureau collects detailed information on population demographics including age, sex, race, education, employment, income, and poverty.

METHODS

The Community Health Assessment followed the MAPP process to examine the community health status of Washington County. Factors at multiple levels were analyzed – from lifestyle behaviors (e.g., diet and exercise) to clinical care (e.g., access to health care services) to social and economic factors (e.g., employment opportunities) to the physical environment (e.g., rural community aspects). Each factor in conjunction with all the others impacts the health of Washington County residents. A social determinant of health perspective was adopted to guide the CHA process.

Social Determinants of Health Framework



It is recognized that health is influenced by a number of factors in the dynamic relationship between people and their environments. The social determinant of health framework addresses the distribution of wellness and illness within a population. The communities in Washington County, represented by the data within this report, live and work within an

economic, social, and political context that is enabled and constrained by the rich network constructed by its multitude of relationships. Individual lifestyle factors are influenced by and influence health outcomes throughout the Washington County community. The social determinant of health framework focuses attention on the factors which most impact health within the larger social and economic context.

Process and Engagement of Community Health Partners

The Community Health Assessment relied on a participatory, collaborative approach guided by the Mobilization for Action through Planning and Partnerships (MAPP) process. The Washington Health Department worked with a number of community health partners and community residents from 2011 to 2013. Meetings and workshops were held to identify and assess perceptions, health concerns, strengths, weaknesses, and other related issues about the health programs and services available within Washington County. Individual members are identified throughout this report. The Forces of Change

online survey occurred in March-April 2013 and included 26 community health partners. The Community Themes and Strengths focus groups and interviews were held in 2012, with a total of 38 community health partners and residents participating.

Quantitative Data

Data for this report was drawn from county, state, and national sources in order to develop a social, economic and health snapshot in time of Washington County. Sources of data included, but were not limited to, the U.S. Census, County Health Rankings, and Florida Department of Health. Types of data included self-report of health behaviors using the Behavioral Risk Factor Surveillance System (BRFSS), public health surveillance data from Florida Department of Health's Community Health Assessment Resource Tool Set (CHARTS), as well as vital statistics based on birth and death records.

Qualitative Data

During 2011 to 2013, meetings and workshops were conducted with Washington County residents and members of the health community to assess their perceptions of the community, their health concerns, and the programs, services, and/or initiatives which would best address those concerns.

Limitations

Several limitations related to this assessment's research methods should be acknowledged. As a snapshot in time, the data may not represent the "current" population within Washington County and should not be interpreted as definitive. While the most current BRFSS and CHARTS data was used, this data is at least one year old due to the nature of the reporting systems used. In some cases, data from CHARTS is aggregated across multiple years to increase sample size (e.g., rolling three-year rates). In other cases, CHARTS and BRFSS data could not provide information stratified by race/ethnicity, gender, or age due to small sample sizes.

Self-report data, such as BRFSS, should be interpreted with caution. While the Florida Department of Health, who conducts the telephone interviews for BRFSS, strives to eliminate sampling bias, respondents may not accurately report behaviors and illnesses based on fear of social stigma or misunderstanding the question being asked. Recall bias

may also limit the risk factor or health outcome data.

Finally, the results of the forums and workshops should not be generalized as being representative of the larger Washington County community due to the non-random recruiting techniques and small sample size. Recruitment for these events was conducted with community health partners, and participants may have already been involved and/or interested in community health issues.

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Community Health Status Report



Washington County Health Department conducted a Community Health Status Profile in 2012. The goal of the report was to define the current health status of Washington County residents, and can be used as a tool for local planners to develop strategies for meeting the health care needs of Washington County residents.

Washington County Florida Community Health Status Profile



Prepared by
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Introduction

This report summarizes the health care status, health care needs, and health care resources available to residents of Washington County, FL. Information contained in this report was obtained from various sources: both official government statistics, and information and opinions gathered from community partners, residents, and institutions.

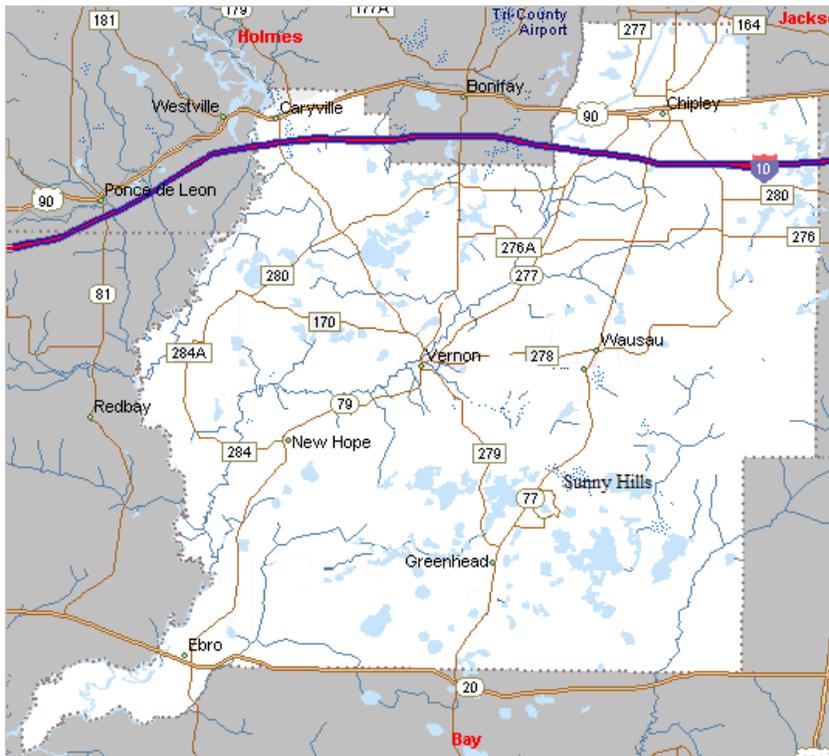
The Florida Association of Community Health Centers (FACHC) interviewed residents from the business, government, and social services business and institutions within the county with the objective of garnering local opinion on healthcare needs, barriers, to care, and the improvements that residents thought would improve healthcare and health status. Focus groups were held in Chipley (the county seat), Wausau, and Ebro.

The Washington County Health Department (WCHD) Staff held community meetings in Vernon, Pine Log State Park, Chipley, Wausau, and Ebro (twice). The WCHD staff also gathered health statistics from Florida Charts, the Department of Health's County Snapshot, and the FL Department of Health's (DOH) Health Management System (HMS), the local critical access hospital, and epidemiological data. The CHD staff canvassed and assessed access to health and dental care, barriers, and the numbers and offices of health and dental providers. The CHD staff also held focus groups and met with local organizations and knowledgeable individuals. Focus groups were held in Chipley, Vernon, Wausau, and Ebro from May to September 2011.

The following report is a compilation and narrative of the efforts of the two organizations. The format and much of the narrative is that of the report provided to the WCHD by Erin Sologaistoa of the FACHC. The report is augmented and updated with information gathered by the Washington CHD staff.

The resident input was more or less evenly split between male and female. Compared to the general population of Washington County, the input received from the Afro-American community and the Hispanic community was disproportionately high. The youngest members to respond were middle and high school students; the oldest participants were in their eighties.

Washington County Florida Overview



Geography

Washington County is a rural area encompassing 616 square miles in the heart of Florida's panhandle. With a population of 3,779 people, the county seat, Chipley, is the largest town within a 20 mile radius. Marianna, 20 miles to the east, has a population of 6,280.

The urban areas nearest Chipley are: Panama City, 50 miles to the south (population of 36,644); Dothan, Alabama 32 miles to the north (population of 66,500); Tallahassee, 80 miles to the East (population of 171,992); and Pensacola, 102 miles to the west (population of 53,820). These cities may be an additional 30 miles from other Washington County municipalities. For example, it is approximately 39 miles from Chipley (in the far Northeast corner of the county) to Ebro (in the far Southwest). It is approximately 20 miles from Vernon (the geographic center of the county) to the four other incorporated towns: Chipley, Caryville, Ebro, and Wausau.

Demographics

The most recent population estimate for Washington County is 24,779. There were 8,432 households in the 2006-2008 American Community Survey (ACS). Roughly eighty percent (80.2%) of the population is Anglo American, fifteen and a half percent (15.5%) are African American and three and a half percent (3.4%) are Latino. The remaining less than one percent (.9%) are represented by individuals classified as “other races or ethnicities”. Washington County has a foreign born population of 458 people, of which 197 are naturalized citizens and 261 are non-citizens.

Race and Ethnicity: Washington County, Florida and U.S.

Race of Ethnicity	Washington County	Florida	United States
Anglo American	80.2%	60.3%	65.6%
African American	15.6%	15.9%	12.8%
Hispanic	3.4%	21.0%	15.4%
Other	0.8%	2.8%	6.2%

Source: American Community Survey (U.S. Census) 2006-2008

Washington County has less ethnic diversity than either Florida or the United States, as a whole. Ninety-five percent (95%) of the population is classified as either Anglo or African American, while Hispanics account for only three and a half percent (3.4%). However, the Hispanic population more than doubled between 1990 and 2000.

The median age in Washington County is 39.0, as compared with 40.1 in Florida and 36.7 nationally. More than one quarter (26.3%) of Washington County residents are under nineteen years of age. Another quarter (26.9%) are between the ages of forty-five and sixty-four. The following table provides a more detailed breakdown by age.

Age Breakdown: Washington County, Florida and the U.S.

Age	Washington County	Florida	United States
19 or Below	26.3%	24.5%	27.5%
20-34	18.6%	18.7%	20.2%
35-44	13.8%	13.9%	14.3%
45-54	14.8%	14.2%	14.6%
55-64	12.1%	11.5%	10.8%
65-74	7.8%	8.2%	6.5%
75 and Above	6.6%	8.9%	6.1%

Source: American Community Survey (U.S. Census) 2006-2008

Washington County has a younger population than Florida or the U.S. and a higher percentage of people between the ages of 55 and 64. The latter is significant because this age group is old enough to experience higher rates of chronic health problems, but too young to qualify for Medicare.

The county is projected to grow by seventeen percent (17%) to 29,610 people between the years 2010 and 2020 (Florida Demographic Estimating Conference, February 2009 and the Florida Demographic Database, August 2009).

Education

There are six public schools in the county (two elementary, two middle and two high schools). All are designated under the federal Title I program, meaning they have a large percentage of low income students.

Nearly twenty five (24.8%) percent of Washington County residents over the age of 25 have less than a twelfth grade education with eight and a half percent (8.4%) having less than a ninth grade education. The table below demonstrates Washington County's significantly lower levels of education in relation to Florida and the U.S.

Education Levels: Washington County, Florida and U.S.

	Washington County	Florida	United States
Less than 12 th Grade Level	24.8%	15.1%	15.5%
Less than 9 th Grade Level	8.4%	5.7%	6.4%

Source: American Community Survey (U.S. Census) 2006-2008

Income and Poverty

Washington County and its individual townships have significantly lower median incomes and higher poverty rates than Florida and the U.S., as a whole. The poverty rate is double that of the state and the nation in almost all cases. The county is in the fourth quartile (lowest quarter) statewide for the percentage of residents that live at or below the federal poverty level, which is currently \$10,830 for an individual and \$22,050 for a family of four (4) (Florida DOH, 2007). The following table shows a breakdown of population, income and poverty statistics by township. Significantly, data indicates that seventy-five percent (75%) of the population in Washington County lives in rural, unincorporated areas outside of these townships.

Washington County Poverty and Income by Town

	U.S.	State	County	Chipley	Wausau	Ebro	Vernon	Caryville
Total Population	300M	18.8M	24,779	3,639	443	245	744	367
Median Income	\$50,233	\$47,778	\$35,235	\$26,417	\$29,181	\$39,951	\$29,426	\$31,266
Population Below Poverty	13.2%	12.6%	24.3%	27.7%	29.2%	21.0%	28.5%	37.3%
Population Below 200% of Poverty*	31.5%	31.9%	40.6%	46.4%	48.9%	40.1%	57.4%	61.6%

Source: U.S. Census Bureau, the University of Florida Bureau of Economic and Business Research (BEBR) and the Florida Association of Community Health Centers (FACHC) 2010

Those families most likely to be living in poverty are families (particularly those headed by females where there is no husband present). Ninety percent (90%) of such families are living at or below poverty. The table below indicates which residents in the county are most economically vulnerable. Nearly forty percent (38.1%) of families (of four) in the county live on less than \$35,000 per year, which is slightly over 150% of the federal poverty level. Twenty-eight percent (28%) of children live in poverty, compared with 17% in Florida overall (Robert Wood Johnson Foundation, 2007).

Washington County Families in Poverty

Type of Family	Percentage in Poverty
All Families with Children Under 18	29.2%
Female Headed Households with Children Under 18	65.1%
All families with Children Under 5	26.3%
Female Headed Households with Children Under 5	89.6%

Source: American Community Survey (U.S. Census) 2006-2008

Employment

There are 10,050 people in the civilian labor force, of which 9,035 are employed and 1,015 are unemployed. The unemployment rate is currently ten percent (10.1%), up from an average of six percent (6.1%) in 2008 (Bureau of Labor Statistics, 2010). While Washington County is very rural, agriculture does not play an important role in the economy, employing less than 2% of the civilian labor force (including forestry).

The industries employing the greatest numbers are retail (19.5%); education, healthcare and social services (18%); public administration (15%); and construction (13%). These categories account for over sixty-five percent (65%) of people employed in the county. Eight and a half percent (8.5%) of people are employed in arts, entertainment, recreation, accommodation or food services, while manufacturing accounts for six percent (6%). The remainder of the labor force is employed in other industries (ACS 2006-2008). It is estimated that between twenty and thirty percent (20-30%) of people who are employed in the private sector (Farm and Nonfarm) are self-employed (Rural Policy Research Institute, 2006).

Washington County is one of seventeen (17) counties in the state whose incomes rely heavily on “Transfer Payments” such as disability payments, social security benefits, and public assistance etc., which account for over 30% of the total personal income in the county (Bureau of Economic Analysis, Regional Economic Information System prepared by RUPRI 2005).

Housing and Cost of Living

Seventy-five percent (75%) of Washington County’s 8,400 occupied housing units were occupied by owners and twenty-five percent (25%) were occupied by renters. The median monthly housing costs for owners with a mortgage were \$934. The monthly cost for owners without a mortgage is \$283. The median monthly housing cost for renters was \$569.

Housing costs are a significant portion of household income, especially for renters. Sixty nine percent (69%) of renters spend thirty percent (30%) or more of their household income on housing, compared with thirty-two percent (32%) of owners with mortgages and fourteen percent (14%) of owners without mortgages (ACS 2006-2008).

Recent trends in public assistance programs indicate a growing financial burden on families in Washington County. The number of children eligible for free and reduced lunches is up to sixty-six percent (66%) from fifty-five percent (55%) in 2006, an increase of twenty percent (20%). Since January of 2009, there has been a twenty-five and a half percent (25.5%) increase in the number of households on food stamps and an eight and a half percent (8.6%) increase in the number of people on Medicaid (Florida Department of Education, 2010 and Florida Department of Children and Families, 2010).

Access to Healthcare

Washington County is designated as a Medically Underserved Area (MUA) for the low income population. This is a measure of medical under-service, as defined by the U.S. Department of Health and Human Services, and is based on a combination of variables that include: the percent of the population below 100 percent of the Federal Poverty Level, the percent of the population over age 65, the infant mortality rate, and the population-to-physician ratio. This designation indicates a need for more healthcare services in the county, particularly for low income people. The Florida Department of Health Estimates there are nine thousand one hundred and forty nine (9,149) medically underserved individuals in Washington County.

The county is also designated as a Health Professional Shortage Area (HPSA) for primary care, dental and mental healthcare services. This designation documents a shortage of health care providers in these areas, as well as the existence of barriers to accessing care that include: lack of public transportation, travel time, and distance to the next source of medical care for under- and uninsured. To be eligible for designation, a geographic area or a population must have a person-to-physician ratio greater than three thousand to one (3,000:1).

Of note, access to health care for those residents in the southern portions of the county may improve. Both a local Chipley medical practice and a Bonifay physician's office have announced plans to open family practice medical offices in Vernon, which is centrally located within the county. Staffing and hours of operation are still to be determined.

Primary Care

Washington County is in the fourth quartile (bottom quarter) in Florida for the percentage of adults who could not see a doctor at least once in the past year due to cost. Twenty-one percent (21%) of those surveyed fell into this category. The county also came in last for the percentage of adults who had a medical checkup in the past year, with thirty-three percent (33%) reporting they had not (Behavioral Risk Factors Surveillance Telephone Survey 2007).

The county has a low primary care provider rate of fifty-seven providers per one hundred thousand persons (57:100,000), compared with Florida as a whole, which has a rate of one hundred providers per one hundred thousand persons (100:100,000). A related indicator, preventable hospital stays, is much higher in the county with a rate of ninety-

one (91) compared with Florida as a whole, which has a rate of sixty-nine (69). Preventable hospital stays are measured as the hospital discharge rate for ambulatory care-sensitive conditions per thousand Medicare enrollees. These are hospitalizations for diagnosis that are more appropriately treated in outpatient settings. A high rate on this indicator suggests that the access to (or quality of) care provided in outpatient settings is less than ideal (Robert Wood Johnson Foundation County Health Rankings, 2006).

Between 2005 and 2008, eighty four percent (84%) of visits to hospital emergency rooms by Washington County residents (to all hospitals) were for conditions classified as either “Non emergent,” “Emergent but primary care treatable,” or “Emergent but preventable or avoidable.” These are conditions that could have been addressed in a primary care setting. This represents over \$10.1 million in charges over the four (4) year period, an average of \$2.5 million dollars a year going toward emergency care that could more effectively and affordably be treated in a primary care setting (Broward Hospital Inpatient and Emergency Department Analytical System, based on Florida Hospital Discharge Data and The New York University Emergency Department Algorithm for Emergency Department Classification).

Primary care includes general practitioners, family practice doctors, internists, pediatricians and OBGYNs. A good rule of thumb in determining the number of physicians needed in a community is one physician for every 1,200-1,500 patients. Using 1,400, which is the average number of patients for family doctors and internists at Florida Federally Qualified Health Centers (FQHCs) and assuming an eight-five percent (85%) utilization rate (meaning 85% of the population uses the services) we can estimate that Washington County needs around fifteen (15) full time equivalent (FTE) primary care physicians. This does not take into account future population growth.

Notably, Washington County currently has no pediatrician and no Obstetrician or Gynecologist.

Nationally, the average number of office visits to pediatricians is 1.79 visits for all children under the age of fifteen (15). If we multiply this rate (1.79) by 4,200, the estimated number of children under the age of fifteen (15) in the county, we arrive at 7,518 potential visits. Assuming eighty-five percent (85%) utilization brings this figure down to 6,390 visits. On average pediatricians at Florida FQHCs have 4,452 visits per year. Based on these figures, Washington County could support one and a half (1.5) FTE pediatricians to meet the needs of children in the community. (Population figures are from U.S. census, BEBR and FACHC; Visit data is from National Ambulatory Medical Care Survey 2006;

FQHC data is from HHS Uniform Data System 2007).

Nationally, the average number of office visits to OBGYNs is 0.57 visits for all females fifteen (15) and older. If we multiply this rate (.57) by 9,734, the estimated number of females in this age range in the county, we arrive at 5,548 potential visits. Assuming eighty five percent (85%) utilization brings this figure down to 4,716 visits. On average OBGYNs at Florida FQHCs have 3,644 visits per year which is in line with OBGYN practices in general. Based on these figures Washington County could support 1.3 FTE OBGYNs to meet the needs of women in the county. (Population figures are from U.S. census, BEBR and FACHC; Visit data is from National Ambulatory Medical Care Survey 2006; FQHC data is from HHS Uniform Data System 2007).

The 1.5 FTE pediatrician and 1.3 FTE OBGYN are included in the estimated fifteen (15) FTE primary care physicians needed to meet the needs of the community. Advanced Registered Nurse Practitioners (ARNP) and Physician's Assistants are also primary care providers that play an important role in meeting healthcare needs, working under the supervision of a physician. It is estimate that ARNPs at Florida's Federally Qualified Health Centers (FQHCs) see on average 950 patients per year.

A brief telephone survey was conducted to learn more about the availability of primary care resources in the county in terms of cost, availability of services on a sliding fee scale and acceptance of Medicaid. A more in depth local survey would be required to learn more specifics about how many direct hours each physician provides in direct patient care (excluding hospital visits, administrative time, lunch hours etc.) This would provide a clearer picture of local need vs. current capacity.

There are currently eleven (11) practicing family doctors or internists in the county and ten (10) midlevel providers (advanced registered nurse practitioners (ARNPs or Physician's Assistants). Of these twenty one (21), only ten (10) are accepting new Medicaid adults. Only two of the physicians have a sliding fee scale, which bases payment on income level. The minimum payment for a routine visit at both is \$35, with the initial visit being higher. It takes between two weeks and one month to get an appointment with either of them.

Eight of the ten midlevel providers see patients on a sliding fee basis, with minimum payments averaging \$35 - \$40. This group includes the county health department clinic, which has a sliding fee schedule that goes down to \$0. It takes between two weeks and one month to get an appointment with seven out of eight of these mid-level providers. A more detailed list of providers in the county can be found at the end of this document

Northwest Florida Community Hospital, located in Chipley, is a fifty-nine (59) bed healthcare facility that includes a twenty-five (25) bed Critical Access hospital, a thirty-four (34) bed Long Term Care Facility and a Home Health Agency.

Oral Health

Washington County ranks fifty-ninth (59th) in the state in access to dental care by low income persons (Florida DOH, 2006-2008). Adults have the most difficulty getting services, since Medicaid does not cover their services except in cases of emergency. Children's dental is covered by Medicaid.

Nationally the average number of office visits per patient for dental care at FQHCs is 2.3 visits annually. If we multiply this number by 22,000 the estimated number of people five (5) years of age and older, we arrive at 50,600 potential visits. Assuming an eighty five percent (85%) utilization rate brings the potential number of dental visits down to 43,010 visits. On average, dentists at Florida FQHCs have three thousand and twenty four (3,024) visits per year. Based on these figures Washington County could support 14.2 FTE dentists to meet the needs of the population. (Population figures are from ACS; Visit data is from HHS Uniform Data System 2007).

Our brief survey revealed that there are eight (8) dentists actively practicing either in Washington County or neighboring Bonifay. One only does extractions three nights a week. The remainder is closed on Fridays.

The cost of oral healthcare is out of reach for many residents in the county, particularly adults. For example, extractions at six (6) out of eight (8) dentist offices cost \$130 - \$190. Fillings cost \$87 - \$172. At this rate, one extraction can cost about half the weekly income for a family living at the federal poverty level.

Access to care for children is somewhat better. Three of the eight private dentists, plus the county health department accept Medicaid to cover dental care for children.

Mental Health

The National Institutes on Mental Health estimate that twenty five percent (25%) or one (1) in four (4) adults over eighteen (18) suffer from a diagnosable mental disorder in any given year. Six percent (6%) of adults, or one (1) in seventeen (17) suffer from severe and persistent mental illnesses such as schizophrenia. Based on these figures and the population of Washington County, we can assume there are at least four thousand five hundred sixty five (4,565) adults in the county who need mental health services.

When determining the percentage of children needing public mental health services, the Florida Department of Children and Families uses a rate of about eight percent (7.8%). Some critics have argued that this is low and have advocated for a percentage closer to thirteen (13%). Even using the lower figure, we can estimate there are at least five hundred eight (508) children in the county that need mental health services.

Using these figures (4,565 adults and 508 children) we can estimate that there are five thousand seventy three (5,073) people in need of mental health services in Washington County. On average, mental health patients generate 5.3 visits per year. Multiplying this figure by the number of people estimated to need services, we arrive at 26,886 potential visits. Assuming an eighty five percent (85%) utilization rate reduces the number to 22,853 visits. On average mental health providers at Florida FQHCs have 1,548 visits per year. Based on these figures Washington County could support 14.7 FTE mental health providers to meet the needs of the community. (Population figures are from U.S. census, BEBR and FACHC; Visit data is from Bureau of Primary Health Care; FQHC data is from HHS Uniform Data System 2007).

Life Management Center (LMC), the community mental health center based in Panama City has offices in Marianna, Blountstown, St. Joe, and Bonifay. They provide emergencies, assessments, psychiatry, case management, counseling, supported employment and in-patient hospitalization. LMC in Bonifay employs approximately 6 FTE mental health providers including 0.2 FTE psychiatrist, 1 FTE psychiatric ARNP, 4.5 FTE counselors plus support staff. They served 1,000 unduplicated users from Washington County between February 2009 and April 2010.

Due to changes implemented in 2009, the process for becoming a LMC patient has become more cumbersome and expensive, except in emergency cases. There is state funding to cover costs for the severe and persistently mentally ill. All others must go through a lengthy three step process before receiving ongoing care. First, these individuals show up for a brief assessment with a social worker, which costs \$30. If the

social worker deems it appropriate, the next step is a more in depth assessment with a psychologist – another \$30. If they are deemed to need the services, each individual counseling appointment thereafter costs \$35. This process typically takes months and is very cumbersome, especially for someone with mental health issues and those who do not have reliable transportation. A number of informants reported that it has become more difficult to get an appointment.

In Addition to LMC, Florida Therapy Services provides community based counseling in Washington County out of their office in Marianna. They take patients with Medicaid or Medicare, as well as children over the age of four and adults. They do not have a sliding fee scale and self-pay visits cost \$150 for the initial visit and \$100 thereafter.

Health Insurance

Increasing numbers of adults in Washington County are going without health insurance coverage. The 2004 Florida Health Insurance Study estimated that twenty-one percent (20.7%) of Washington County residents under the age of 65 years old did not have health insurance, up from nineteen percent (18.9%) in 2000. The 2007 Behavioral Risk Factors Surveillance Survey indicated that twenty-one and a half percent (21.5%) of adults reported not having any type of health care coverage, a fourteen percent (14%) increase between 2000 and 2007.

Washington County Uninsured Rates

Washington County	2000 FHIS	2004 FHIS	2010 BRFSS
Uninsured Adults Under 65	18.9%	20.7%	25.7%

Source: Florida Health Insurance Study 2004 and BRFSS 2007

The percentage of uninsured adults in Washington County increased over 4% from 2007 to 2010. Anecdotal evidence from the county health department and the local hospital ER suggest that the uninsured rate continues to rise with the degraded national and state economies.

Children in Washington County fare better than adults. The county ranks tenth (10th) in the percentage of children under the age of five who are enrolled in KidCare, the state-run children’s health insurance program. Also, the county has among the highest

immunization levels in the state at nearly ninety-nine percent (98.8%) (Florida DOH, 2008).

All geographic areas of the county have similar rates of uninsured individuals. The table below breaks down the number of uninsured by zip code and associated township.

Washington County Uninsured by Zip Code

Zip Code	Town	Population in 2000	Number of Uninsured	Percent Uninsured
32427	Caryville	2,487	488	19.6
32428	Chipley	12,235	2,477	20.2
32437	Ebro	579	118	20.4
32462	Vernon	2,494	485	19.4

Source: Florida Health Insurance Study 2004

Health Outcomes

According to the Robert Wood Johnson Foundation's County Health Rankings (2011), Washington County Ranks fifty-ninth (59th) out of sixty-seven (67) counties in Florida for health outcomes, while ranking fifty-second (52nd) in mortality (incidence of premature death) and sixty-fourth (64th) in morbidity (rate of incidence of disease). The latter is based on the percentage of people reporting poor or fair health, high numbers of poor mental health and/or physical health days and the percentage of low birth weight babies born in the county.

The average person in Washington County is expected to die approximately three to five (3-5) years earlier than their counterparts in the state and nation, as a whole. The average life expectancy in Washington County is about seventy-five years (74.8) compared with seventy-nine (79.4) in Florida and seventy-eight (78.1) nationally (Florida DOH, 2008 and HHS Community Health Status Indicators, 2006).

Chronic Diseases

Washington County is in the fourth (4th) quartile in Florida for deaths from heart disease, heart failure, lung cancer, breast cancer, skin cancer, chronic lower respiratory disease (chronic lower respiratory disease) and diabetes. It is in the second (2nd) quartile for the percentage of adults diagnosed with diabetes, indicating a deadly gap between the diagnosis and treatment for this disease. The county is also in the fourth (4th) quartile for percentage of adults diagnosed with hypertension, asthma or arthritis and for adults who have had a stroke or heart attack or who have coronary heart disease (Behavioral Risk Factor Surveillance Survey, 2007). The county is ranked last (67th) for diabetes hospitalizations for children between the ages of five and eleven (5-11) and twelve and eighteen (12-18) (Florida DOH, 2006-2008).

Preventative Services

Screening and preventative care appear to be lacking in the county, which ranks in the fourth (4th) quartile statewide in: percentage of adults who have not had their cholesterol checked in the past five years; percentage of diabetic adults who have had an annual eye exam or who have had two A1C tests in the past year; percentage of adults with hypertension who engage in blood pressure control measures; and percentage of adults over fifty (50) who received recommended cancer screenings (such as blood stool, sigmoidoscopy or colonoscopy). It is also in the fourth (4th) quartile for percentage of adults (all adults, including elders) who have ever received a pneumonia vaccine or who

have received a flu shot in the last year and adults under sixty-five (65) years old who have received an HIV test (ever or in the past twelve (12) months). The county did somewhat better in the percentage of women over eighteen (18) receiving a pap smear and women over forty (40) receiving a mammogram in the past year, landing in the third (3rd) quartile on these two measures (Behavioral Risk Factor Surveillance Survey 2007).

Maternal and Child Health

In the area of maternal and child health, Washington County ranks in the fourth (4th) quartile statewide for the percentage of births with late or no prenatal care (for all races). When data are broken down by race, additional problems emerge. Among whites, the county ranks at the bottom for percent of low birth weight babies (below 2,500 grams); teen births among African Americans; and infant deaths among Hispanics. The county is in the fourth (4th) quartile for repeat births to teen mothers in all age categories (Florida DOH, 06-08).

Mental Health

Mental health is a serious concern. Nationally, it is estimated that twenty six percent (26%) of Americans eighteen (18) and over, about one in four (1:4) adults, suffer from a diagnosable mental disorder in any given year. Six percent (6%) of Americans suffer from serious mental illnesses. Mental disorders are the leading cause of disability in both the U.S. and Canada for those between the ages of 15-44 (National Institute for Mental Health 2008).

Washington County has the sixth (6th) highest age-adjusted suicide rate out of sixty-seven (67) counties in Florida and is in the fourth (4th) quartile for percentage of adults who reported having poor mental health on fourteen (14) or more of the past thirty (30) days. Fourteen percent (14%) of those interviewed fell into this category. In other words, relative to other counties, Washington has some of the highest numbers of adults reporting poor mental health (Behavioral Risk Factor Surveillance Survey, 2007).

Washington County is ranked third (3rd) out of sixty-seven (67) counties in the number of children between the ages of one (1) and five (5) that are receiving mental health treatment services. In other words, the county has very high numbers of children with mental health problems. Interestingly, Holmes County (adjacent to the northwest) ranks first (1st) with forty-seven percent (47%) of children in this category getting treatment. This is striking, considering that the median in the state is near fifteen percent (15%) and

the statewide average is fourteen percent (14.1%) of children in this age group receiving mental health treatment (Florida DOH, 06-08 and BRFSS, 2007). A recent change in school board policy has resulted in a twenty-five percent (25%) increase in the number of school children who were “Baker Acted” (involuntarily committed to an inpatient mental health treatment facility) within the past year. When determining the percentage of children needing public mental health services, the Florida Department of Children and Families uses a rate of about eight percent (7.8%). Some critics have argued that this is low and have advocated for a percentage closer to thirteen (13%). Either rate is far below the percentage of children in this age group in Washington County who are receiving these services.

The county ranks in the fourth (4th) quartile for the percentage of children between the ages of five and eleven (5-11) experiencing child abuse or sexual violence (DOH, 2006-2008).

Substance Abuse

Washington County ranks in the second (2nd) quartile statewide for percentage of adults who engage in heavy or binge drinking. It ranks in the fourth (4th) quartile statewide for percentage of middle school students who reported using alcohol in the past thirty (30) days and the percentage of middle school students who reported binge drinking, as well as the percentages of middle school students and high school students, respectively, who reported using marijuana or hashish within the past thirty (30) days (Florida DOH 2008). If the number of arrests made for the production of methamphetamines is any indication, substance abuse in the county is on the rise. Since 2006, there has been a fivefold increase in the number of “meth labs” seized by law enforcement. Between 2006 and 2008, there were a total of four (4) labs seized. This number rose to six (6) arrests in 2009 alone. By March of calendar year (2010), there were ten meth labs seized in only a three month span of time. Sixteen (16) of the twenty-one (21) labs seized since 2006 were located in Chipley (FDLE 2010).

Health Disparities

Health disparities refer to gaps in the quality of healthcare across racial, ethnic or socioeconomic groups. The Health Resources Services Administration (HRSA) refers to health disparities as "population-specific differences in the presence of disease, health outcomes, or access to health care". Examining the health outcomes data for Washington County reveals some disparities in health outcomes. The table that follows compares rates of death between Anglo Americans and African Americans for some of the major causes of death in the county.

Washington County Age Adjusted Death Rate for Major Causes of Death

	Anglo Non-Hispanic	Non Anglo Non-Hispanic	Difference in Rate of Death: African vs. Anglo American
Diabetes	50.9	95.6	87%
Lung Cancer	82.9	51.6	-62%
Breast Cancer	28.3	45.2	59%
Heart Disease	209.3	253.3	21%
Heart Failure	15.5	30.9	99%
Respiratory Disease	69.8	12.5	-558%
Stroke	23.4	59.6	254%
Cardiovascular Disease	254.7	224.3	-13%

3 year age adjusted death rates per 100,000 from 2006-2008 Florida DOH (*Data on Hispanics was unavailable)

This data indicates, for example, that African Americans are 254% (or roughly two and a half times) more likely to die from stroke than Anglo-Americans and that Anglo Americans are 558% (or roughly five and a half times) more likely to die from respiratory disease than African Americans.

Geographic Disparities

Almost one-hundred percent (100%) of the primary care providers and other medical resources in Washington County are located in Chipley, at the far Northeast corner of the county. However, only fifteen percent (15%) of the county's total population lives there. Focus groups and key informant interviews indicated a need for services to be more accessible to other parts of the county.

As noted earlier in this report, two different physician offices are planning to open branch medical offices in Vernon, located in the center of the county. Staffing and hours have yet

to be announced. These offices, if opened, such greatly improve access to care for residents in the center and southern parts of the county, particularly Vernon and Ebro.

Vulnerable Populations

A number of categories of people in the county are more vulnerable to poor health outcomes and limited access to healthcare than the population as a whole. Many of these categories overlap.

Low Income Individuals

Vulnerable populations include the more than ten thousand (10,000) people in the county living at or below two hundred percent (200%) of the federal poverty level. Families in this category live on less than \$44,100 a year and individuals on less than \$21,660 annually. Particularly challenged are the six thousand (6,000) individuals that live below the poverty line, which is currently \$10,800 for one (1) person and \$22,000 for a family of four (4).

Children and families are the most likely to live in poverty, particularly households headed by single females. Thirty-eight percent (38%) of children and forty-four percent (44%) of female headed households live in poverty compared with eighteen percent (18%) of all families and fifteen percent (15%) of people sixty-five (65) and older.

Uninsured Adults

It is estimated that six thousand, two hundred and fifty (6,250) adults in the county under the age of sixty-five (65) are uninsured. This population has difficulty affording healthcare services. Florida data can be used as a guide in determining who the uninsured are.

Statewide, those most likely to be uninsured are the unemployed (of which forty-eight percent (48%) are uninsured), the self-employed (of which thirty-two percent (32%) are uninsured) and people who work in firms with fewer than ten (10) employees (of which thirty-three percent (33%) are uninsured).

Hispanics have the highest rate of non insurance among ethnic groups with thirty-two percent (32%) being uninsured (Florida Health Insurance Study, 2004).

According to a key informant that works with the elderly, the older uninsured (those between the ages of fifty-five and sixty-five (55-65) are particularly vulnerable, since they do not yet qualify for Medicare, but have reached the age where health problems are increasing. Local agencies have seen an increase in the number of requests for assistance from this age group.

Medicaid is a public health insurance program. The following categories of people are eligible for Medicaid in Florida:

- Low income families with children;
- Children only;
- Pregnant women;
- Non-citizens with medical emergencies;
- Aged or disabled individuals not currently receiving supplemental security income

Anyone that falls outside of these criteria will have difficulty qualifying for Medicaid, including families with moderate incomes, men, and women who do not have children under the age of eighteen (18). Adults “fortunate” enough to have Medicaid often have difficulty finding doctors who will accept them as patients due to the program’s low reimbursement rates.

Sixty-eight percent (68.4%) of children under five (5) in Washington County are enrolled in Kid Care, the state’s children’s health insurance (Medicaid) program, putting the county in the first (1st) quartile statewide for this indicator.

Adults with Limited Education

It is estimated that there are forty-two hundred (4,200) adults in the county over the age of twenty-five (25) who have less than a twelfth (12th) grade education and fourteen hundred (1400) with less than an eighth (8th) grade education. Low education is associated with poor health, as it creates challenges for patients in communicating with doctors, understanding instructions and reading prescriptions, among other things.

Non-English Speakers

Non-English speakers face cultural and communication barriers to getting the healthcare they need. There are an estimated seven hundred and fifty (750) Hispanics living in Washington County. While they make up only three percent (3%) of the total population, their numbers more than doubled between 1990 and 2000. We do not know how many of the Hispanics living in Washington County are non-English speakers.

The Disabled

Nearly a quarter of Washington County residents are disabled (25.3%), ranking it in the fourth (4th) quartile statewide for the percentage of adults who are limited in any way in any activities because of physical, mental or emotional problems. The county also ranks in the bottom quarter, having the highest percentage of adults who use special equipment because of a health problem (Behavioral Risk Factor Surveillance Survey, 2007). It is one of seventeen (17) counties in the state whose incomes rely heavily on “transfer payments” such as disability payments, social security benefits, public assistance, etc.

which account for over thirty percent (30%) of the total personal income in the county (Bureau of Economic Analysis, Regional Economic Information System prepared by RUPRI, 2005).

The Elderly

A key informant at the Council on Aging indicated an increase in requests for their services over the past two to three (2-3) years among the sixty to sixty-five (60-65) age group. Numerous focus group participants also expressed concern for this population.

There are two nursing home facilities in the county, both in Chipley. The Washington County Rehabilitation and Nursing Facility houses between one hundred and forty and one hundred and fifty (140-150) people and the Northwest Florida Community Hospital Long Term Care Facility houses thirty-five (35). Some elders reside in assisted living facilities, which house a total of one hundred and thirty-one (131) people, many of whom have mental health diagnoses. The rest of the elder population is assumed to live in private homes or public housing facilities. Fourteen percent (14%) of households in the county (totaling twelve hundred and four (1,204)), are classified as “Non family” and house someone sixty-five (65) years or older (American Community Survey 2006-2008).

Most people over the age of sixty-five (65) qualify for Medicare benefits, which typically cover eighty percent (80%) of the cost for most health services. Affording the cost of purchasing a supplement to cover the other twenty percent (20%) can be a challenge for a large number of elders, many of whom live on very limited incomes.

Special populations (As defined by HRSA)

The Health Resources and Services Administration (HRSA) has designated several categories of “Special populations” which are recognized as being particularly vulnerable to poor health due to their occupation or life circumstance. Brief mention will be made on each of these as they relate to Washington County.

Migrant and Seasonal Farmworkers

There is not a significant farmworker population in Washington County. Agriculture and forestry account for less than two percent (2%) of the jobs in the civilian labor force, employing less than two hundred (200) people (American Community Survey 06-08). According to a key informant at the County Agricultural Extension Office, there are approximately twelve (12) acres of tomatoes, eighty (80) acres of melons, three hundred (300) acres of peanuts and forty (40) acres of vegetables grown in the county. These crops are mainly grown in the area South of Chipley. Peak season lasts for two to three (2-3) months during the summer. It is estimated that there are less than one hundred (100) farmworkers in the area, even at the peak of the growing season. There are

approximately two hundred and ninety thousand (290,000) acres of pine trees from which pine straw is harvested. It is estimated that there are less than twenty (20) workers in this industry (Washington County Agricultural Extension, 2010).

The Homeless

The 2009 Report of Homeless Conditions in Florida estimates between three and six (3-6) homeless persons in Washington County. However these numbers are based on a snapshot count taken on a single day and could easily miss homeless people. Key informant interviews revealed anecdotal accounts of homeless individuals living off River Road or Creek Road near Vernon.

The HRSA definition of “Homeless” includes “Doubling up”, wherein family members or others may be staying in someone else’s home. By this definition, there are undoubtedly more homeless people in the county than Florida’s count revealed, however at this time we do not have any other data to go on.

The school system is beginning to count homeless children this year (2010) and a key informant at the school system reports a trend of increasing numbers of children moving between different homes in different parts of the county.

Residents of Public Housing

According to the Chipley Housing Authority, there are currently one hundred and fifty-three (153) people living in eighty-eight (88) public housing units in Chipley. In addition, there are four (4) apartment buildings that offer USDA subsidized housing for low income residents. Fox Meadow I and II, in Chipley, provide twenty-four and twenty (24, 20) subsidized units, respectively, Sherwood Apartments on highway 280 with thirty-three (33) subsidized units, Summer Brook on Orange Hill Road with twenty-five (25) subsidized units and Mandy Lee in Vernon with eight (8) subsidized units).

In addition to the HUD and USDA subsidized housing units, according to the Tri-County Community Council, there are one hundred and fifty-five (155) units in Washington County subsidized under HUD’s Section 8 voucher program. All of these combined total four hundred and eighteen (418) units of subsidized or public housing in the county. A conservative estimate that at least half of these units house families of four (4) people (assuming all the units are occupied) would mean that approximately one thousand and forty-five (1,045) people, or about five percent (5%) of the county’s population, currently lives in public or subsidized housing.

Results of Focus Groups and Interviews with Key Informants

Focus groups and key informant interviews were conducted with the goal of learning more about the perceived healthcare needs, barriers to care and desires of the community as they relate to the delivery of healthcare services in Washington County. Copies of the questions used in key informant interview and focus groups can be found at the end of this document.

FACHC interviewed sixteen (16) people from the business, government and social service communities and conducted five (5) focus groups with a total of thirty eight (38) participants in three (3) different parts of the county (Ebro, Wassau and Chipley).

Demographics of these individuals included:

- Forty-five percent (45%) of focus group participants were female
- Fifty-five percent (55%) were male
- Forty-seven percent (47%) of participants were African American
- Thirty-nine percent (39%) were Anglo American
- Fourteen percent (14%) were Hispanic
- The youngest participant was twenty (20)
- The oldest participant was eighty-three (83)
- The median age of participants was fifty seven (57)
- Sixty percent (60%) of participants had some kind of health insurance

The Washington CHD staff conducted six community meetings between May and September. Population statistics were not collected. The following issues (listed in alphabetical order) were raised during our key informant interviews and focus groups.

Concerns Expressed by Focus Group Participants and Key Community Informants

- Cost of Care
- Laboratory and X-Ray Services
- Language Barriers/Culture Barriers
- Nutrition Education
- Oral Health
- Pediatrics
- Pharmaceuticals
- Quality of Care
- Specialty Care
- Transportation
- Women's Health

Cost of Care

Background: A lack of financial resource was frequently cited by focus group participants as the main reason they do not get the healthcare services they need. Participants expressed more difficulty now than ever making ends meet. Lack of insurance was also cited as a reason for not getting the care they need.

The minimum price for a doctor's visit in Washington County varies from \$35 to \$75 for a routine visit, with initial visits being higher.

Of the ten (10) primary care doctors in the county, only two (2) have a sliding fee scale. The minimum charge for a visit at their offices is \$35 and \$40, respectively. It takes between two (2) weeks and one (1) month to get an appointment with either. Not all primary care doctors with offices in the county practice full-time in the county. Some have offices in several counties and primarily staff their Washington County office with a Nurse Practitioner.

Eight (8) of the ten (10) ARNPs in the county work in offices that have a sliding fee scale, with the minimum charge being \$35-\$40. Other than the services offered by ARNPs at the health department, it takes between two (2) weeks to one (1) month to get an appointment with them.

Laboratory and X-Ray Services

Access to affordable lab and X-Ray services came up repeatedly in focus group discussions. Participants expressed frustration with the fact that, even if they get the money together to see a doctor, often they will be sent elsewhere to get lab work done. If they are uninsured they have to pay for this out of pocket, but the cost makes it inaccessible for most uninsured people. The additional transportation is also an issue for many.

Language and Cultural Barriers

Background: There are estimated to be roughly seven hundred (700) Hispanics living in Washington County. Growth of this population is a relatively new phenomenon. The population doubled between 1990 and 2000. Focus group participants report that Hispanics mainly work on farms and dairies and in the construction and carpentry trades and that most of them reside in the vicinity of Chipley. This population faces some unique challenges including language barriers.

Nutrition Education

Background: Key informants and focus group participants frequently indicated a need for education related to diet and nutrition. Specific diseases mentioned in association with this were diabetes and hypertension. The county ranks near the bottom in the state in deaths from these diseases and for screenings and preventative care to reduce them.

Oral Health

Background: Oral health was perhaps the most frequently mentioned need among focus group participants who indicated that affording dental care was a major challenge. Medicaid in Florida does not cover oral health services for adults, except for emergencies. Therefore, even those who participate in this program do not have access to oral healthcare. A vice principal of one of the middle schools described a young parent who had a tooth pulled because he didn't have the money to fix it and the pain had become unbearable. This principal pointed out that many of the children in this school have never been to the dentist.

Pediatrics

Background: There is not a single pediatrician in Washington County. The population below nineteen (19) years of age is estimated to be approximately sixty-four hundred (6,400) people. One school board employee indicated that their middle school nurse sees between thirty and sixty (30-60) children per day. This topic was not brought up by focus group participants, but was discussed by several key informants whose programs serve children and families.

Pharmaceuticals

Difficulty affording needed medications was mentioned by several key informants and focus group participants. Elderly participants expressed concern about the cost of paying for Medicare supplements that enable them to get their medications.

One key informant shared that there are significant barriers to getting needed medications for residents with mental health problems. Those who enroll in Medicare Advantage plans in order to benefit from services for other conditions find that their mental healthcare needs are not covered. Medicare Part D does not include coverage for most mental health pharmaceuticals. Health maintenance organizations (HMOs) are now requiring prior authorization for medications they previously paid for automatically. Their formularies change frequently, making it difficult for mental health patients to consistently get the medications they need. People with mental health issues often don't have the capacity to deal with these obstacles and their health suffers as a result of the

challenges. Patient assistance programs help fill some of the gaps, but onerous requirements mean that many patients do not get the help they need.

The Washington CHD operates a grant-funded program outreach program for uninsured residents that include a prescription assistance program component. Over the previous two years, the program has assisted residents in obtaining over \$1 million dollars' worth of prescription medications at no cost to the patients.

Quality of Care

Background: Quality of care issues were mentioned frequently in the focus groups. A recurring theme was related to poor treatment at local medical offices and facilities. Distrust led some people to seek care in Panama City because they wanted their doctors to refer them to the hospital there. There was a common feeling that people on Medicaid receive inferior treatment to those on private insurance.

Participants expressed a desire to be treated with respect and to feel that their doctor genuinely knows and cares for them. Included in this is the desire to not have to wait excessive lengths of time to see the doctor and to have a variety of healthcare services available in one, convenient location.

Specialty Care

Key informants interviewed, including several clinicians, indicated the need for referral arrangements for specialty services including ENT, dermatology, neurology, orthopedics and gastroenterology. Clinicians currently refer people to Panama City; however, many doctors there will not take Medicaid patients from outside of Bay County. These patients often have to go to Pensacola or Tallahassee, or sometimes as far away as Jacksonville.

Transportation

Background: Washington County is geographically spread out with a total land area of over six hundred (600) square miles. Driving from Chipley, in the far Northeast corner to Ebro, in the far Southwest corner takes approximately thirty to forty (30-40) minutes, making for at least an hour long round trip. Many people we spoke to in the county go to Panama City for their healthcare service, which is fifty (50) miles from Chipley, making for a round trip of approximately two (2) hours. Not surprisingly, the issue of transportation was a recurring theme, especially in the focus groups. Many people, particularly in the groups held outside of Chipley, expressed the desire to have healthcare services available to them in their local communities.

Tri-County Community Council is a nonprofit organization that provides transportation for residents of Washington and surrounding counties to and from doctor appointments. If they have traditional Medicaid, the cost is fully covered; however, if they have a Medicaid cost share, they must meet their monthly deductible before being eligible for free transportation. Those without Medicaid must pay out of pocket. The cost ranges from \$3.00 roundtrip to points within Chipley to \$10 roundtrip to and from Chipley and Vernon or Ebro and \$15 to Panama City or Marianna.

While this is a valuable service, aside from the cost issue, there are restrictions that create additional challenges for residents to get needed services. For example appointments must be scheduled between the hours of 10 am and 2 pm. Patients often spend hours waiting to be picked up after their appointment is over, turning doctor's visits into an all day proposition. In addition, the service only goes to some locations on certain days. For example, this service travels to Marianna only on Mondays, Wednesdays and Fridays. These limitations on hours and days reduces the number of appointments that are available to people.

Women's Health

Background: There are no OB/Gyns in Washington County and no doctors in the county who will see women throughout the full length of their pregnancy. There is one doctor, Dr. Bailey, in Bonifay (in the next county) who will follow women throughout their pregnancy. She delivers babies twenty (20) miles away in Marianna, where there are two (2) OB/GYNs that back her up. Dr. Bailey accepts Medicaid; however, she is limited in the number of pregnant women she can care for, since she is not an OB/GYN specialist.

On average there are two hundred and seventy-nine (279) births to Washington County residents per year (Florida DOH, 2006-2008).

Several key informants discussed the lack of prenatal care in the county. One physician expressed a "Desperate need for prenatal care."

Numerous focus group participants and key informants indicated going to Tallahassee or Pensacola for their annual mammograms and pap smears.

Recommendations

Explore options for increasing primary care services offered on a sliding fee based on income, making services more accessible for the uninsured. Ensure that new providers accept Medicaid.

Explore options for increasing the availability and affordability of oral health services (particularly for adults) offered on a sliding fee basis.

Note: While the county health department currently provides some services on a sliding fee basis, there is the perception in the community that if you make too much money, you can't go to the health department.

Ensure the provision of primary care and oral healthcare services in a centrally located part of the county where they will be accessible to the greatest number of people. Consider the possibility of having some services offered in multiple locations. This could be accomplished with a mobile unit or by clinical teams visiting various parts of the county on a regular schedule.

Explore options for providing transportation or transportation vouchers for patients who have no way of getting to needed healthcare services.

Healthcare resources should be targeted to address the major causes of morbidity and mortality in the county including diabetes, heart disease, respiratory disease and specific cancers. This should include significant education for patients on nutrition.

Healthcare resources should be targeted to the populations that need them the most including the poor, the uninsured, the disabled, the geographically isolated and residents of public housing. Further details on which people are most likely to fall into these categories can be found in the overview section of this document. Outreach efforts should be developed which target these populations.

Develop a plan to ensure that women get the healthcare services they need including recommended screenings and exams and prenatal care starting in the first trimester of pregnancy.

Create a mechanism to ensure that publicly funded services are of high quality and culturally competent and that users of these services feel they are consistently treated with dignity and respect.

Create or strengthen linkages with local mental health agencies that reduce barriers to care and ensure that residents suffering from mental health problems receive the care they need in a timely fashion.

Examine possible reasons for the high number of children ages 1-5 and school age children receiving mental health treatment.

Strengthen linkages between primary care providers and key specialists including ENT, dermatology, neurology, orthopedics and gastroenterology.

Consider applying for federal funding to open a federally qualified health center (FQHC) in Washington County. Requirements of the program are designed to address a number of the previous recommendations including offering services on a sliding scale, acceptance of Medicaid, accountability to the community, emphasis on chronic disease and participation in the 340B drug program.

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2013 Forces of Change



As part of the Washington County Community Health Improvement Project, the “Mobilizing for Action through Planning and Partnerships” (MAPP) Forces of Change online survey was conducted March to April 2013. Twenty-six community health partners participated in the Forces of Change online survey and identified six community health themes for Washington County.

EVALUATING THE HEALTH OF WASHINGTON COUNTY

BACKGROUND

The Forces of Change (FOC) Assessment was conducted from March 15 to April 5, 2013 with the Washington County community health partners. This assessment was designed to answer the questions:

- "What is occurring or might occur that affects the health of our community or the local public health system?"
- "What specific threats or opportunities are generated by these occurrences?"

The FOC Assessment was developed in collaboration with the Washington County Health Department, constructed as an online web-based survey, and disseminated via an email link. Washington County community health partners were given 3 weeks to complete the online survey. Three follow-up emails were sent to community health partners as a reminder to complete the FOC Assessment. A total of 26 members began the instrument, with 21 people completing the online assessment. The survey instrument is presented in Appendix 2.

METHODS

The FOC Assessment asked community health partners to think about issues that affect the local public health system or community in six categories:

- Economic Forces
- Environmental Forces
- Political Forces
- Health Forces
- Social Forces
- Technological Forces

For each category or Force of Change, Task Force members were to identify Forces (broad all-encompassing category that includes trends, events, and factors), Events (one-

time occurrences, such as a hospital closure, a natural disaster, or the passage of new legislation), and Factors (discrete elements, such as a community's large ethnic population, an urban setting, or a jurisdiction's proximity to a major waterway).

FOC Assessment responses were placed in themes for each of the six categories.

These categories were then collapsed and summarized across all responses. There were six forces identified across all categories:

1. Development Force
2. Economic Force
3. Environment Force
4. Health Force
5. Political Force
6. Social Force

A total of 361 individual comments/responses were received. Appendix 2 contains the condensed themes and associated responses. Verbatim responses were not corrected for spelling, grammar, or context errors.

KEY FINDINGS

This descriptive report presents the results from the Forces of Change Assessment. These results will be used to identify Community Health Priorities in the next step of the Washington County Community Health Improvement Project 2013.

Force 1: Economic Force

Nearly two-thirds of the comments (65%) focused on *Unemployment* and *Funding Opportunities* in Washington County. Comments focused on:

- Unemployment based on lack of manufacturing and agricultural jobs.
- Lack of high quality jobs.
- Decreasing state and federal funding.
- Very slow economic recovery for small businesses compared to other areas of the state and nation.
- High unemployment.

Force 2: Environmental Force

Over one-third of the comments (36%) focused on *Public Transportation* as a key priority area for Washington County. Comments focused on:

- Lack of public transportation.
- Public transportation or transportation for the elderly and disadvantaged.
- Most families have limited transportation and aren't able to find jobs within walking or biking distance.

Force 3: Health Force

Over half of the comments (56.5%) of respondents identified *Substance Abuse* as a Health Force impacting the overall health of the community. Factors cited as contributing to this force were:

- Smoking
- Chronic disease
- Access/cost of healthcare
- Healthy food choices/Dietary
- Funding

Force 4: Political

Over two-thirds of the comments (69.5%) focused on lack of trust with the governmental infrastructure within Washington County and at the state and national level. Responses included:

- I'm not sure if anybody trusts the government.
- There is a lack of trust in government, uncertainty and fear on a national level that is reflected at a local level.
- State and Local political changes always impact the local community.

Force 5: Social

Over three-quarters of the comments (76%) focused on community attitudes and values as the Social Force impacting health in Washington County. These comments focused on:

- Only a few people willing to work on issues it the same people most of the time. Most residents don't get involved.
- Attitudes of residents, cultural beliefs/attitudes
- Attitudes within the school board and education system influence the lack of education awareness and availability of services to prevent teen pregnancy, and STD's

Force 6: Technological

Computers and Access to Technology were the most frequently cited (80.9%)

Technological issues cited by respondents. Comments included:

- Being a rural County is the biggest setback to furthering technology. Vast land space with few residents inhibits all but satellite based technologies, at this time.
- Most residents do not have access to fast internet and that is a deterrent.
- Lack of technological training for students needed to meet the needs of today's workforce.

Overall, there were 423 responses on the Forces of Change assessment. The most common theme associated with these responses was *Economic - Lack of Funding* accounting for nearly one-quarter (23.6%) of the total responses. The overall issues of *Education* (12%) and *Government* (12%) were the next most frequently cited issues. According to the MAPP assessment criteria, these represent the larger force of *Infrastructure* and must be addressed first in order to impact the overall health of Washington County residents (see <http://www.naccho.org/topics/infrastructure/mapp/framework/phase3foc.cfm> for more information).

The Themes, Threats, and Opportunities are presented in summary on the following pages. The specific responses can be found in Appendix 2.

IDENTIFICATION OF FORCES

Force	Threat (Weaknesses)	Opportunities (Strengths)
<p>Economic</p> <ul style="list-style-type: none"> • Unemployment • Funding • Industries 	<p><u>Funding</u></p> <ul style="list-style-type: none"> • Lack of funding • Low income levels • Closure of local businesses <p><u>Employment</u></p> <ul style="list-style-type: none"> • Lack of jobs that attract the young people back to our county • Training and education that would build a workforce to attract businesses to our county <p><u>Government</u></p> <ul style="list-style-type: none"> • Members of local government not wanting change that would bring in larger industries or restaurants • The biggest threat is the State Legislator and the Washington County Commission imposing more regulations <p><u>Rural Settings</u></p> <ul style="list-style-type: none"> • Lack of infrastructure <p><u>Industries</u></p> <ul style="list-style-type: none"> • Lack of and closures of industries <p><u>Medical</u></p> <ul style="list-style-type: none"> • Large percentage of population have no insurance or Medicaid <p><u>Transportation</u></p> <ul style="list-style-type: none"> • Many without transportation who live away from stores, etc. 	<p><u>Government</u></p> <ul style="list-style-type: none"> • County has a strong workforce, non-restrictive zoning, open areas, good environmental regulatory community • County Commissioners <p><u>Unemployment</u></p> <ul style="list-style-type: none"> • People that are willing to work if jobs were available • Chamber of Commerce • Dedication of plant manager and work ethic of local work force <p><u>Transportation</u></p> <ul style="list-style-type: none"> • Close proximity to Port of Panama City and new airport in Bay County • Two four lane projects • Proximity to interstate travel <p><u>Land</u></p> <ul style="list-style-type: none"> • Large expanses of available land • Rural community <p><u>Medical</u></p> <p><u>Education</u></p>

Force	Threat (Weaknesses)	Opportunities (Strengths)
<p>Environmental</p> <ul style="list-style-type: none"> • Transportation • Land • Water • Environment 	<p><u>Transportation</u></p> <ul style="list-style-type: none"> • Transportation would need to extend beyond the normal 8 - 5 day. The current J-Trans or Tri-County transportation only covers medical appointments. <p><u>Funding</u></p> <ul style="list-style-type: none"> • Lack of recreational activities for local youth • Limited income of residents <p><u>Water</u></p> <ul style="list-style-type: none"> • Water will continue to be a problem due to population growth • Prohibit the Northwest Florida Water Management District from diverting water to other parts of the <p><u>Land</u></p> <ul style="list-style-type: none"> • Small farmers being forced out or to quit <p><u>Government (3)</u></p> <ul style="list-style-type: none"> • Government restrictions • Control of the local government <p><u>Population</u></p> <ul style="list-style-type: none"> • Aging population. <p><u>New business</u></p>	<p><u>Transportation</u></p> <ol style="list-style-type: none"> 1. We have Tri-County Community Council transportation 2. Coordinated transportation that provides Medicaid participants and individuals that require <p><u>Land</u></p> <ul style="list-style-type: none"> • Controlled growth • Lot of fertile land with trees, nice river and streams <p><u>Government</u></p> <p><u>Environment issues</u></p> <ul style="list-style-type: none"> • Plenty of water and woods • Clean air and water <p><u>Workers</u></p>

Force	Threat (Weaknesses)	Opportunities (Strengths)
<p>Health</p> <ul style="list-style-type: none"> • Smoking • Chronic disease • Access/cost of healthcare • Healthy food choices/Dietary • Funding 	<p><u>Money/Funding</u></p> <ul style="list-style-type: none"> • Lack of funds, programs being cut back or taken away • Increases in the cost of healthcare <p><u>Heath/Medical</u></p> <ul style="list-style-type: none"> • Dental Providers willing to work these clinics • Obesity relates to low economic status of many citizens, lack of good paying jobs and educational levels <p><u>Education</u></p> <ul style="list-style-type: none"> • Poor education • Limited education regarding good health choices • Lack of healthy role models <p><u>Community/Issues</u></p> <ul style="list-style-type: none"> • Adults lack of participation in their children’s lives and setting a risk free example • Fast food restaurants and all-you-can-eat buffets <p><u>Government</u></p>	<p><u>Medical/Health</u></p> <ul style="list-style-type: none"> • Educational programs provide in our public schools with resources from Washington County Health Department, WE CAN! Program, educational resources provided by Northwest Florida Community Hospital • Organizations for the elderly <p><u>Community/Issues</u></p> <ul style="list-style-type: none"> • Risk issues • Food banks <p><u>Education</u></p> <ul style="list-style-type: none"> • Chemical Addiction Recovery Effort, School Health, Tobacco Program • Life Management Center provides outpatient mental health services

Force	Threat (Weaknesses)	Opportunities (Strengths)
<p>Political</p> <ul style="list-style-type: none"> • Government • Community • Education 	<p><u>Government</u></p> <ul style="list-style-type: none"> • Need new ideas and someone to really care for the people and our county • Those political forces that do not see or make plans for the future • People that are uneducated on issues but are community leaders • The good old boys still have a lot of power <p><u>Community Issues</u></p> <ul style="list-style-type: none"> • Drug culture • Time, things move slowly <p><u>Funding/Money</u></p> <ul style="list-style-type: none"> • Funding • Low income <p><u>Unemployment</u></p> <ul style="list-style-type: none"> • High unemployment and insurance coverage. 	<p><u>Government</u></p> <ul style="list-style-type: none"> • Local leadership • Washington County has political leaders who assist the community in contacting the state and help with addressing issues. • Only real strength is the Economic Development Council <p><u>Community Issues</u></p> <ul style="list-style-type: none"> • Small community • We are building a strong healthcare community with the hospital and the health department, along with primary care and specialists <p><u>Education</u></p> <ul style="list-style-type: none"> • Knowledgeable staff • Interest of local citizens and local school board

Force	Threat (Weaknesses)	Opportunities (Strengths)
<p>Social</p> <ul style="list-style-type: none"> • Attitudes/values • Income 	<p><u>Community/Issues</u></p> <ul style="list-style-type: none"> • Many single parent and low-income families • Apathy within the community • Judgmental mind sets about race, religion, political views • Cultural influences <p><u>Education</u></p> <ul style="list-style-type: none"> • Lack of education, computer literacy • No infrastructure. <p><u>Funding</u></p> <ul style="list-style-type: none"> • Local support (financial). <p><u>Unemployment</u></p> <ul style="list-style-type: none"> • Lack of job opportunities. • Uneducated students and parents 	<p><u>Medical/Health</u></p> <ul style="list-style-type: none"> • Good health care system • Strong clinic staff & counseling • Public Health department <p><u>Education</u></p> <ul style="list-style-type: none"> • Dedicated school and health professionals • Good school board • Washington-Holmes Technical Center. Schools. <p><u>Business</u></p> <ul style="list-style-type: none"> • Increase revenue to the County <p><u>Unemployment</u></p> <ul style="list-style-type: none"> • Population wanting to work
<p>Technological</p> <ul style="list-style-type: none"> • Computers (Access) • Education • Healthcare 	<p><u>Technical issues</u></p> <ul style="list-style-type: none"> • No high-tech industry • Lack of development and forecast planning of • Attitudes towards the use of technology <p><u>Education</u></p> <ul style="list-style-type: none"> • Educational abilities (reading & writing) • Negative mind sets • Need for distance learning application <p><u>Funding</u></p> <ul style="list-style-type: none"> • Lack of funds <p><u>Community/Issues</u></p> <ul style="list-style-type: none"> • Transportation • Apathy on the part of some 	<p><u>Education</u></p> <ul style="list-style-type: none"> • The ability to train the youth of the county • Council on aging senior's center • GOODWILL Industries basic computer skill classes <p><u>Computer/Internet</u></p> <ul style="list-style-type: none"> • Usage of computers in businesses, training in the workforce, usage of Nooks in public schools • Telemedicine brings better, quicker local diagnoses • The Florida Rural Broadband Alliance, LLC (FRBA) collaboration <p><u>Funding</u></p>

LOCAL PUBLIC HEALTH SYSTEM ASSESSMENT



The NPHPSP is a partnership effort with all community, public and medical health agencies to improve the practice of public health and the performance of public health systems within a community. The NPHPSP assessment instruments guide local jurisdictions in evaluating their current performance against a set of nationally established standards.

LOCAL PUBLIC HEALTH SYSTEM PERFORMANCE ASSESSMENT

The Local Public Health Performance Standards Program (LPHPSP) was conducted in September 2011. The *10 Essential Public Health Services* provides the framework for the NPHPSP instrument, and is divided into ten sections (one for each Essential Service). The 10 Essential Services are:

1. **Monitor** health status to identify community health problems.
2. **Diagnose and investigate** health problems and health hazards in the community.
3. **Inform, educate, and empower** people about health issues.
4. **Mobilize** community partnerships to identify and solve health problems.
5. **Develop policies and plans** that support individual and community health efforts.
6. **Enforce** laws and regulations that protect health and ensure safety.
7. **Link** people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. **Assure** a component of public and personal health care workforce.
9. **Evaluate** effectiveness, accessibility and quality of personal and population-based health services.
10. **Research** for new insights and innovative solutions to health problems.

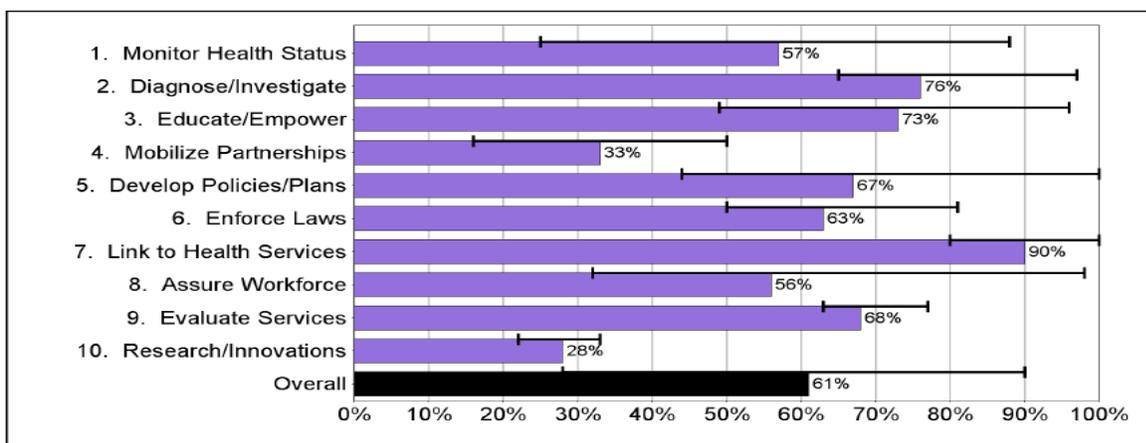
The scoring methodology for the LPHPSP is based on a quartile scoring system for each area. Community health partners in Washington reviewed the areas within each Essential Service and reached consensus regarding the level of activity (or performance) within that area. Members were given rating cards (No Activity, Minimal Activity, Moderate Activity, Significant Activity, and Optimal Activity) and evaluated Washington County's public health system's level of response for each of the 10 Essential Services. In addition, the members also identified the agency/organization which was primarily responsible for addressing each service.

The 2011 LPHPSP report indicated the Washington County community health programs and services contributed to the provision of the 10 Essential Public Health Services, with an overall score of 61%. This score represents the average performance level across all 10 Essential Services, and indicates that there is significant activity in these areas.

The chart below provides a quick overview of the Washington County's health system's performance in each of the 10 Essential Public Health Services (EPHS). Each EPHS score is a composite value determined by the scores given to those activities that contribute to each Essential Service. These scores range from a minimum value of 0% (no activity is performed pursuant to the standards) to a maximum of 100% (all activities associated with the standards are performed at optimal levels).

The Essential Service area that had the lowest performance score was *Research/Innovations* (28%) and the highest performance score was in the area of *Link to Health Services* (90%).

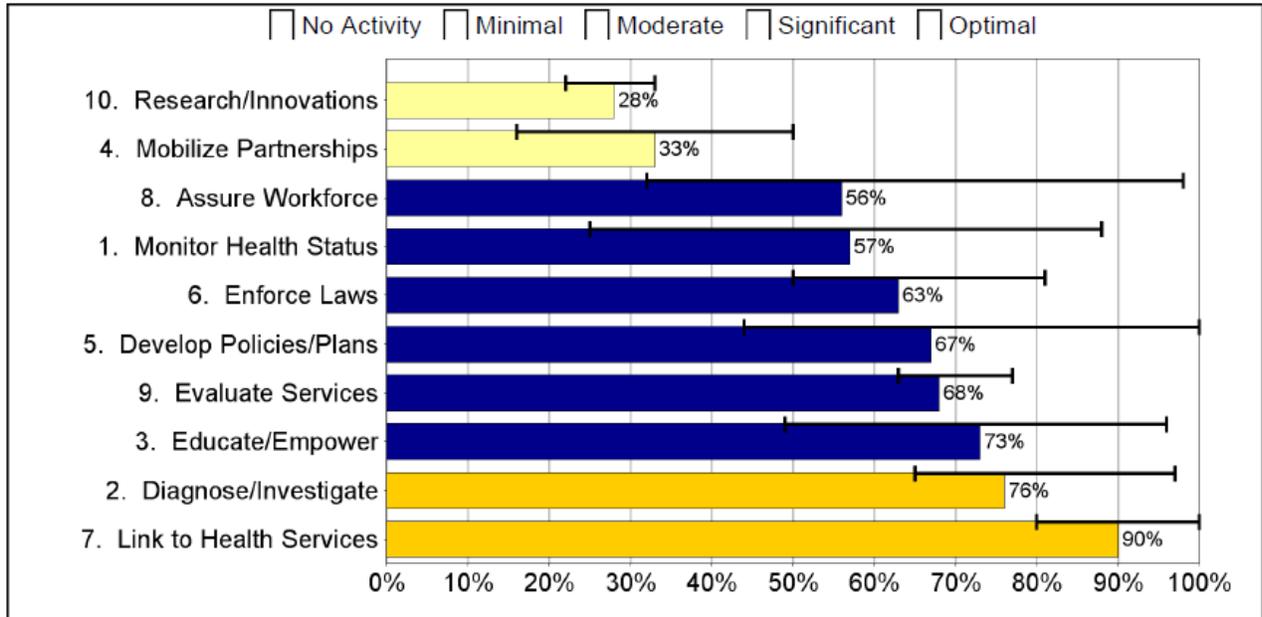
Summary of 2012 LPHPSP Performance and Overall Scores



Source: 2011 Washington County NPHPSP Report

The graph below provides a composite picture of Local Public Health Assessment for Washington County. The range lines show the range of responses within an Essential Service. The color coded bars identify which of the Essential Services fall in the five categories of performance activity (i.e., no activity, minimal activity, moderate activity, significant activity, and optimal activity). Washington County has two Essential Service area which had *Moderate* activity (the light yellow bars), six areas with *Significant* activity (the blue bars), and two Essential Service areas with *Optimal* activity (the bright yellow bars).

Range of Activity for 2012 LPHPSP Essential Services Overall Scores



Source: 2011 Washington County NPHPSP Report

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COMMUNITY THEMES & STRENGTHS



Community perceptions of the health care system are a critical part of the MAPP process. Experiences with and knowledge of the public health system provided information for identifying health priorities.

INTRODUCTION

The staff of the Washington County Health Department undertook a study to determine both the factual evidence and the perceptions of the residents concerning the strengths, weaknesses, concerns, and recommendations of areas in the life of the community. While the focus was not solely upon health and health care, health and health care were the areas of primary concern.

This report will detail the methodology used in the investigation, key findings and perceptions, and a summarized list of findings and themes that emerged from the study.

METHODS

The staff of the Washington County Health Department relied upon a variety of sources for the data, perceptions, and opinions contained in this document. These sources include:

- Data obtained from CHARTS and Census Data
- The results of focus groups of residents in various parts of the county
- Interviews with key stakeholders within the community.
- Perceptions gleaned from discussions and questions with community partner organizations.

CHARTS and Census Data: Self-explanatory

Focus Groups were held with the following groups:

- Ebro Family and Community Outreach Committee (13 participants)
- Wausau: Shepard's Gate Church (6 participants – the church operates a large food pantry)
- Washington Council on Aging (8 participants)
- Cancun Mexican Restaurant (5 Hispanic participants/employees)
- Chipley Workforce Center (6 participants)

The following page contains a list of questions and open-ended statements that were utilized in the focus groups.

Questions

1. What are the main factors that influence your decision about whether or not to seek healthcare services for you or your family?
2. Describe a time when you or someone in your family had a hard time getting healthcare services they needed. This may include a time when you or they decided to put it off, or not seek care at all.
3. Washington County has a lot of deaths from cancer, diabetes, respiratory disease and heart disease. Why do you think so many people in Washington County suffer from these diseases?
4. How has your family's ability to get healthcare services in Washington County changed, either for the better or for the worse, over the past 1-5 years?
5. In an ideal world, what features, qualities or services would you like to see a community health center in Washington County to have?
6. How does transportation or lack of public transportation affect your ability to get healthcare services for you and your family?
7. Describe your experience with getting and keeping health insurance for you and your family. This may include Medicaid, KidCare or other public insurance programs.
8. How has the current economic crisis affected you or your family's ability to get healthcare services?
9. Please finish each of the following sentences:
 - The greatest barrier or challenge to getting good, basic healthcare for me and my family is....
 - What I like most about my family doctor and his office is...
 - What I like least about family doctor and his office is...
 - The most frustrating thing about using healthcare services in Washington County is....
 - The thing that would make healthcare in Washington County better and easier to use is....

Interviews were held with informants/members of the following organizations:

- Board of County Commissioners
- Ebro Community Outreach Project
- Healthy Families
- Healthy Start
- Life Management Center

- Northwest Florida Community Hospital
- Panhandle Area Education Consortium
- Shepherd's Gate Church
- Vernon Middle School
- Washington County Chamber of Commerce
- Washington County Council on Aging
- Washington County School District
- Washington/Holmes Technical Center
- Washington County School Board
- Westpoint Home Company

The following contains the questions asked of most of the key informants:

1. Which populations have the greatest difficulty accessing affordable primary healthcare services, oral healthcare services and mental healthcare services? (These can be described in terms of age, ethnicity, socio-economic level or other status).
2. What are the factors contributing to this?
3. What geographic area of the county has the most difficulty accessing services?
4. What are the factors contributing to this?
5. What are the greatest barriers or challenges facing each of these populations? (These can be described in terms of cultural or linguistic barriers, geographic barriers, insurance status, income level etc.)
6. Where do these populations currently go for their primary, oral and mental healthcare services?
7. What about the current healthcare system is working well for these populations? What is not working so well? How could the current system be improved?
8. Have there recently been any significant changes or trends in the area or that may be impacting these populations level of need for services, their health outcomes or their access to affordable healthcare?
9. It is estimated there may be around 1000 Hispanics living in the county. Where are do they reside and congregate? Do they have any special or unique needs? Where do they currently go for healthcare services?
10. How large is the homeless population in the county? Are there any services available to them?
11. Which specific services are in shortest supply (oral, mental health, OB)?
12. What transportation resources exist in the county? Which areas of the county face the greatest transportation barriers?

The demographics of the participants in the focus groups and key stakeholders follow:

- Forty-five percent (45%) of focus group participants were female
- Fifty-five percent (55%) were male
- Forty-seven percent (47%) of participants were African American
- Thirty-nine percent (39%) were Anglo American
- Fourteen percent (14%) were Hispanic
- The youngest participant was twenty (20)
- The oldest participant was eighty-three (83)
- The median age of participants was fifty seven (57)
- Sixty percent (60%) of participants had some kind of health insurance

Discussions with partner organizations were very open ended and included staff taking notes of partner organizations discussing items of interest to those organizations' missions, and not directly related to health or health care.

The following is a summary of the findings and perceptions, beginning with the objective data from CHARTS and census data and then summarizing the perceptions and themes from the residents.

Geography:

The entire county is a designated rural county of 616 square miles located in the panhandle of Florida.

The nearest cities are Tallahassee, 80 miles, Panama City, 50 miles, and Dothan, Alabama, 32 miles. Pensacola is 102 miles.

Demographic:

The county population is slightly over 25,000.

The county is less ethnically diverse than most Florida counties and the U.S. as a whole. Washington County is 80% Anglo-American, 16% African American, 3.5% Hispanic, and less than 1% other.

Washington County is slightly younger than Florida or the U.S. but has a higher percentage of adults between ages 55 and 64.

Education:

There are six public schools, two elementary, two middle, and two high schools located in Vernon and Chipley.

All of the public schools are designated under federal Title 1, meaning they have a large percentage of low income students

8 ½ % have less than a 9th grade education.

25% of the Washington County residents over the age of 25 have less than a 12th grade education.

Income and Employment:

Unemployment in the county is above 10%.

All Families with children under 18 years living in poverty = 30%

Households headed by a female with children living in poverty = 65%

Median Income in the county = \$35,235

Median Income in the state / U.S. = \$47,778 and \$50,233

Washington County is one of seventeen counties in FL whose incomes rely heavily on “Transfer Payments” such as disability, social security, and public assistance.

Access to Health Care:

The entire county is designated as a Medically Underserved Area for low income populations. It is also designated as a Health Professional Shortage Area (HPSA) for mental, dental, and health care.

Washington County ranked in the fourth quartile for percentage of residents who could not see a medical provider at least once during the past year due to costs.

Health Status:

Washington County was ranked 64 out of 67 counties for poor health outcomes by the Robert Woods Johnson Foundation for 2012.

Selected morbidity and mortality data from Charts will be included at the end of this report.

Oral Health:

Washington County ranked 59th in the state for access to dental care by low income persons.

Dental care is especially difficult for adults because Medicaid does not provide for dental care.

Dental Care for children is somewhat better. Some dentists and the local county health department provide dental care for Medicaid children.

Mental Health:

The Florida Association of Community Health Centers estimates that there are 5,073 residents of Washington County in need of mental health services.

Life Management Center is a community based mental health provider with offices in Panama City, Blountstown, Port St. Joe, Marianna, and Bonifay. Bonifay is the closest location for most of Washington County.

Local media have declared Washington County to be the “meth capital” of Florida.

The county has the sixth highest age adjusted suicide rate in the state.

Health Insurance:

The percentage of residents without health insurance is above 25%.

Cost of Health Care:

A lack of financial resources was frequently cited by focus group participants as the main reason they do not receive the health care services they need. Lack of Insurance was also cited as a primary reason for not getting needed care.

Laboratory and Radiography Services was mentioned frequently. There is frustration that even if a patient sees a provider, they will often be sent elsewhere for diagnostic testing. If uninsured, they must pay out of pocket but costs make these tests inaccessible for most uninsured. Transportation difficulties add to the difficulty and frustration.

Dental Care:

Access to dental care, especially for adults, was the most frequently mentioned need among the focus group participants. In Florida, Medicaid does not provide for dental care for adults. Even if an adult has Medicaid, most dental practices will not accept Medicaid patients due to the low reimbursement rates.

Pharmaceuticals:

Difficulty affording needed medications was mentioned by several key informants and focus group participants. Elderly participants expressed concern about the cost of paying for Medicare supplements that enable them to get their medications.

One key informant shared that there are significant barriers to getting needed medications for residents with mental health problems. Those who enroll in Medicare Advantage plans in order to benefit from services for other conditions find that their mental healthcare needs are not covered. Medicare Part D does not include coverage for most mental health pharmaceuticals. Health maintenance organizations (HMOs) are now requiring prior authorization for medications they previously paid for automatically. Their formularies change frequently, making it difficult for mental health patients to consistently get the medications they need. People with mental health issues often don't have the capacity to deal with these obstacles and their health suffers as a result of the challenges. Patient assistance programs help fill some of the gaps, but onerous requirements mean that many patients do not get the help they need.

The Washington CHD operates a grant-funded program outreach program for uninsured residents which include a prescription assistance program component. Over the previous three years, the program has assisted residents in obtaining over \$1.9 million dollars worth of prescription medications at no cost to the patients. ***Unfortunately the grant funding that made this program possible ended in April, 2012 and many of these patients are now having difficulty obtaining their medications.***

There are no pediatricians in Washington County.

There are no OB/GYNs in Washington County.

Transportation:

Washington County is geographically spread out with a total land area of over six hundred (600) square miles. Driving from Chipley, in the far Northeast corner to Ebro, in the far Southwest corner takes approximately thirty to forty (30-40) minutes, making for at least an hour long round trip. Many people we spoke to in the county go to Panama City for their healthcare service, which is fifty (50) miles from Chipley, making for a round trip of approximately two (2) hours. Not surprisingly, the issue of transportation was a recurring theme, especially in the focus groups. Many people, particularly in the groups held outside of Chipley, expressed the desire to have healthcare services available to them in their local communities.

Tri-County Community Council is a nonprofit organization that provides transportation for residents of Washington and surrounding counties to and from doctor appointments. If they have traditional Medicaid, the cost is fully covered; however, if they have a Medicaid cost share, they must meet their monthly deductible before being eligible for free transportation. Those without Medicaid must pay out of pocket. The cost ranges from \$3.00 roundtrip to points within Chipley to \$10 roundtrip to and from Chipley and Vernon or Ebro and \$15 to Panama City or Marianna.

While this is a valuable service, aside from the cost issue, there are restrictions that create additional challenges for residents to get needed services. For example appointments must be scheduled between the hours of 10 am and 2 pm. Patients often spend hours waiting to be picked up after their appointment is over, turning doctors visits into an all day proposition. In addition, the service only goes to some locations on certain days. For example, this service travels to Marianna only on Mondays, Wednesdays and Fridays. These limitations on hours and days reduces the number of appointments that are available to people.

Teen Pregnancy:

The central panhandle region of Florida has a higher rate of teen pregnancy than either the state or the U.S.

Washington County has the highest rate of teen pregnancy of any county within the region.

Key stakeholders, community partners, and “good” citizens all agreed that Washington County is a close-knit community. Residents work will together for the common good. The more economically deprived and disenfranchised residents were not as optimistic.

The local critical access hospital has greatly improved services and capacity. Most civic leaders feel the hospital has made tremendous positive strides in the past few years. Again, the lower on the economic ladder a resident is, the less likely he or she is to feel this way.

The public school system is decent for a rural area. Most schools rate a B on the Florida rating system.

Forces of Change

The economy:

Washington County has one of the higher unemployment rates in the state of Florida. Florida has one of the highest unemployment rates in the U.S.

In Florida, local government is funded primarily through ad Valorem and sales taxes. Florida has no state income tax. Until the economy and housing improve, state and local revenues will remain depressed. The lack of state revenues puts pressure on social services and funding for education.

There are no HMOs or Managed Care organizations in Washington County or in its neighboring counties. As the state shifts policy to force Medicaid recipients into HMOs, all medical practices in the area will need to adjust. The effect on local medical practices and patient care is unknown, but coming.

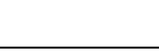
The Affordable Care Act is politically very unpopular in Washington County. Few residents fully understand it but are opposed to it as growth of the federal government and because of antipathy for the current President. (The county voted 80% for Senator McCain in the last presidential election.) The outcome of the upcoming presidential and congressional elections will greatly effect the future funding, direction, and policies in the health care arena.

Sequestration, should Congress and the President be unable to pass a new budget, will certainly devastate much of the social network funding now in place.

This report was prepared by the staff of the Washington County Health Department. The Florida Association of Community Health Centers provided a facilitator for the community focus groups, compiled much of the information gleaned from them, and composed some of the narrative of this report.

The following pages contain some selected health information from the Washington CHD 20120 Snapshot.

Washington County, Florida Year: 2012 County Performance Snapshot

Measure	Year(s)	Rate Type	County Quartile 1=most favorable 4=least favorable	County Rate	State Rate	County Trend (click to view)	DOH Target	Meets or Exceeds Target
1 Product and Service Outcomes								
1a Monitor health status and understand health issues facing the community								
(1a.1) Heart Disease Deaths	2010	Age-adjusted death rate		234.8	147.7	Better ↓	155	
(1a.2) Cancer Deaths	2010	Age-adjusted death rate		235.4	159.2	No Trend ↔	158.7	
(1a.3) Chronic Lower Respiratory Disease (CLRD) Deaths	2010	Age-adjusted death rate		41.6	37.6	No Trend ↔	34.8	
(1a.4) Unintentional Injury Deaths	2010	Age-adjusted death rate		64.1	41.3	No Trend ↔	45	
(1a.5) Stroke Deaths	2010	Age-adjusted death rate		40.8	29.8	Better ↓	39	
(1a.6) Unintentional injury death rate for children ages 14 and under	2010	Rate per 100,000 children ages 14 and under		24.6	8.4	No Trend ↔	7.3	
(1a.7) Enteric Diseases Total	2010	Rate per 100,000 population		63.7	61.7	Worse ↑	28.474	
(1a.8) New AIDS Cases	2010	Rate per 100,000 population		0.0	18.4	No Trend ↔	26.5	
(1a.9) Bacterial STD rate in 15 - 24 year old	2010	Rate per 100,000 population		1841.0	2771.4	Worse ↑	2628	
(1a.10) Tuberculosis (TB) Cases	2010	Rate per 100,000		0.0	4.4	No Trend ↔	3.5	

		population							
(1a.11) Active TB patients completing therapy within 12 months of initiation of treatment	2009	Percent						90%	
(1a.12) 2-year-old CHD clients fully immunized	2012	Percent			94.0%	Better ↑		90%	
(1a.13) Adults aged 65 and older that have had a flu shot in the last year	2010	Percent		61.6%	65.3%			75%	
(1a.14) Total Infant Mortality	2010	Rate per 1,000 total live births		4.1	6.5	No Trend ↔		7	
(1a.15) Births to mothers ages 15-19, rate per 1,000 females	2010	Rate per 1,000 females 15-19		45.3	32.8	No Trend ↔		39.7	
(1a.16) Repeat births to mothers ages 15-19	2010	Percent		17.1%	17.8%	No Trend ↔		16.5	
(1a.17) WIC infants who are initially breastfed	FFY 2010-11	Percent		62.5%	74.8%	Worse ↓		75%	
(1a.18) Adolescents that are overweight	CY 2010	Percent		19.7%	11.6%			5%	
(1a.19) Adults who are overweight or obese: BMI >= 25	2010	Percent		70.0%	65.0%			37%	
(1a.20) Middle and high school students who report using tobacco in the past 30 days	CY 2010	Percent		23.8%	16.3%			16%	
(1a.21) Adults who smoke	2010	Percent		29.3%	17.1%			12%	
1 Product and Service Outcomes									
1b Help people receive health services									
(1b.1) Adults who were unable to get medical care in the last 12 months due to cost	2010	Percent		22.3%	17.3%			7%	
(1b.2) Low income persons with access to dental care	2010	Percent		34.9%	36.4%	Better ↑		35%	
(1b.3) Target population of low income persons reached by CHD for dental care	2010	Percent		80.0%	23.4%	Better ↑		15%	

Community Health Strategic Planning



The Community Health Assessment defines the health of a community using a Social Determinants of Health model which recognizes numerous factors at multiple levels impact a community's health. This report serves as the foundation in the final step in the Community Health Improvement efforts – the Action Plan.

SUMMARY FROM MAPP ASSESSMENTS

Health is affected by a number of factors such as, where and how we live, work, play, and learn. The Community Health Assessment (CHA) attempts to identify these factors and create an understanding about how they influence the health of the community. The CHA recognizes lifestyle behaviors, physical environment, clinical care, and social and economic factors all have an impact on community residents' health. Efforts to improve the health of Washington County need to address those factors through a comprehensive plan for action which includes working collaboratively with community health partners.

The key findings from each of the four MAPP assessments were used to identify the strategic issues for addressing community health issues. The Community Health Status Profile, Local Public Health System Assessment, Forces of Change, and Community Strengths and Themes all serve to inform Washington County public health partners and residents about the best ways to use existing resources wisely, consider unique local conditions and needs, and form effective partnerships for action. The key issues from each assessment displayed on the following page.

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<p>Community Health Status Profile</p> <ul style="list-style-type: none"> ○ Washington County has less ethnic diversity than either Florida or the United States, as a whole. ○ 26.3% of Washington County residents are under nineteen years of age. ○ 24.8% of Washington County residents over the age of 25 have less than a twelfth grade education. ○ The poverty rate is double that of the state and the nation, with 28% of children living in poverty. ○ 66% of children are eligible for free and reduced lunches. ○ Washington County is designated as a Medically Underserved Area (MUA) for the low income population. ○ The county has a low primary care provider rate of fifty-seven providers per one hundred thousand persons. ○ Washington County currently has no pediatrician and no Obstetrician/Gynecologist. ○ The average person in Washington County is expected to die approximately three to five (3-5) years earlier than their counterparts in the state and nation, as a whole. ○ African Americans are 254% (or roughly two and a half times) more likely to die from stroke than Anglo-Americans and that Anglo Americans are 558% (or roughly five and a half times) more likely to die from respiratory disease than African Americans. 	<p>Community Themes & Strengths Assessment</p> <ul style="list-style-type: none"> ○ All Families with children under 18 years living in poverty = 30%. ○ Households headed by a female with children living in poverty = 65%. ○ Washington County ranked in the fourth quartile for percentage of residents who could not see a medical provider at least once during the past year due to costs. ○ Dental care is especially difficult for adults because Medicaid does not provide for dental care. ○ The percentage of residents without health insurance is above 25%. ○ Washington County has the highest rate of teen pregnancy of any county within the region.
<p>Local Public Health System Assessment</p> <ul style="list-style-type: none"> ○ ES #10: Research for new insights and innovative solutions to health problems. ○ ES #4: Mobilize Community Partnerships to Identify and Solve Health Problems ○ ES #8: Assure a component of public and personal health care workforce ○ ES #1: Monitor health status to identify community health problems. 	<p>Forces of Change Assessment</p> <ul style="list-style-type: none"> ○ Economic ○ Environmental ○ Health ○ Political ○ Social ○ Technological

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Health Issues & Distribution - Health Disparities, Equity, or High-Risk Populations

Health disparities exist when one group of people becomes sick or dies more often than another group. Understanding health disparities as they contribute to Washington health issues is important because health disparities lead to increased healthcare costs, increased incidence of disease, and increased mortality. In addition, it is important to monitor health disparities in order to reduce the disease burden by identifying high-risk groups, formulating appropriate health care policy, and evaluating progress in eliminating health disparities.

According to the *Institute of Medicine Report: Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care* health disparities may persist because of differences in access to medical care for racial and ethnic groups and differences in the quality of care received by racial and ethnic groups.

The Office of Minority Health at the Florida Department of Health reports that health disparities can occur due to:

- Lack of Health Insurance
- Lack of Routine Care
- Health Literacy and Language Barriers
- Provider Prejudices and Stereotyping
- Patient Mistrust and Refusal of Services
- Medically Underserved Communities
- Lack of Participation of Minorities in the Health Professions

Source: Florida Department of Health, Office of Minority Health

When available, health disparities will be identified for each of the Strategic Issues identified in the Community Health Improvement process. It should be noted that data only exists on health disparities for White and Black-African American and Male and Female populations within Washington County.

STRATEGIC ISSUES

Diabetes Injuries & Violence

Maternal & Child Health

Washington County community health partners reviewed the data associated reported in the Community Health Assessment and determined there were three critical health issues which impact the health of residents within the county.

STRATEGIC ISSUE 1: Diabetes

Based on the data review and assessments associated with this report, women (14.2%) in Washington County reported having been diagnosed with diabetes more frequently than men (12.3%). Differences for Hispanic residents were not available nor were specific information for Black men and women. The table below from the 2010 BFRSS summarizes these differences.

2010 Florida BRFSS Data Report							Washington	
Diabetes								
Percentage of adults with diagnosed diabetes								
		2010 County			2010 State			2007 County
		Measure	95% CI		Measure	95% CI		Measure
ALL	Overall	13.1	9.8	16.5	10.4	9.8	11.1	8.8
SEX	Men	12.3	7.4	17.2	11.7	10.6	12.7	6.2
	Women	14.2	9.9	18.6	9.2	8.4	10.0	11.8
RACE/ETHNICITY	Non-Hisp. White	13.6	9.7	17.6	10.1	9.4	10.7	7.9
	Non-Hisp. Black	13.3	1.7	24.9	13.1	10.7	15.5	17.6
	Hispanic				9.6	7.2	12.1	
SEX BY RACE/ETHNICITY	Non-Hisp. White Men	13.9	7.8	20.1	12.0	10.9	13.2	5.2
	Non-Hisp. White Women	13.3	8.6	18.1	8.2	7.5	8.9	10.7
	Non-Hisp. Black Men				12.6	8.6	16.5	
	Non-Hisp. Black Women				13.5	10.6	16.4	15.6
	Hispanic Men				9.5	5.9	13.1	
	Hispanic Women				9.8	6.5	13.0	
AGE GROUP	18-44	4.4	0.8	8.0	3.6	2.8	4.5	4.7
	45-64	19.8	13.1	26.4	11.6*	10.4	12.7	9.0
	65 & Older	25.3	18.3	32.3	19.2	17.9	20.5	18.7
EDUCATION LEVEL	<High School	24.6	12.8	36.5	15.4	12.8	18.1	16.2
	H.S. / GED	14.0	8.6	19.3	11.7	10.5	13.0	9.2
	>High School	9.1	4.8	13.4	9.3	8.5	10.1	5.8
ANNUAL INCOME	<\$25,000	14.4	9.1	19.7	14.8	13.3	16.2	17.5
	\$25,000-\$49,999	18.1	9.4	26.8	11.2	9.7	12.7	6.3
	\$50,000 or More	7.4	2.7	12.1	7.3	6.4	8.3	4.3
MARITAL STATUS	Married/Couple	12.9	8.6	17.2	9.8	9.0	10.6	7.5
	Not Married/Couple	13.8	8.4	19.1	11.6	10.5	12.6	11.3

STRATEGIC ISSUE 2: Injuries & Violence

This issue emerged as critical in Washington County because *Aggravated Assault* went up 325% from 2010 to 2011 based on data from the Florida Department of Law Enforcement. In addition, the Florida Department of Health's CHARTS data indicates the age-adjusted death rate for unintentional injuries is higher than the state rate (61.9 per 100,000 versus 41.6 per 100,000).

 Washington County, Florida County Health Status Summary					
Indicator	Year(s)	Rate Type	County Quartile ^A 1=most favorable 4=least favorable	County Rate	State Rate
Unintentional Injuries					
Unintentional injuries age-adjusted death rate ⁷	2009-11	Per 100,000	4	61.9	41.6
Motor vehicle crash age-adjusted death rate ⁷	2009-11	Per 100,000	3	22.8	12.9
Social and Physical Environment					
Criminal homicide ¹²	2009-11	Per 100,000	4	6.7	5.3
Domestic violence offenses ¹²	2009-11	Per 100,000	2	472.8	605.0

Male residents of Washington County have had more Unintentional Injury deaths as compared to Female residents. In addition, White residents accounted for most of the Unintentional Injury deaths due to *Firearms Discharge*, *Suicide*, *Unintentional Poisoning*, and *Motor Vehicle Crashes* in 2010 to 2012 as display in the chart below. Data by gender/race and for Hispanic residents was not available.

Florida CHARTS - Single Year Counts - Washington County												
	Firearms Discharge			Suicide			Unintentional Poisoning			Motor Vehicle Crashes		
	2010	2011	2012	2010	2011	2012	2010	2011	2012	2010	2011	2012
White	5	8	6	3	9	6	5	1	2	5	2	5
Black	0	0	0	0	0	0	0	0	0	0	1	0
Men	4	5	3	3	7	3	5	0	1	3	2	3
Women	1	3	3	0	2	3	0	1	1	2	1	2

In children ages 1 to 5 years, non-fatal unintentional poisonings is double the state rate (804.2 versus 402.8). In addition, child passengers ages 1-5 injured or killed in motor vehicle crashes is nearly double the state rate (603.2 versus 323.4). This data, from Florida CHARTS, is displayed below. This data is not segmented by race or gender.

Measure	Rate Type	Year (s)	County Quartile 1=most favorable 4=least favorable	County Number	County Rate	State Comparison
Injuries and Injury-related Deaths						
Unintentional injury deaths ages 1-5	Per 100,000 population 1-5	2009-11	1	<2	0.0(u)	11.1
Hospitalizations ages 1-5 for all non fatal unintentional injuries	Per 100,000 population 1-5	2008-10	1	2	175.9	230.2
...Near drownings	Per 100,000 population 1-5	2008-10	1	<2	0.0(u)	16.5
...Traumatic brain injuries	Per 100,000 population 1-5	2008-10	1	<2	25.1(u)	43.3
Hospital/ER treated non fatal unintentional poisonings ages 1-5 ⁸	Per 100,000 population 1-5	2008-10	4	11	804.2	402.8
...Unintentional falls	Per 100,000 population 1-5	2008-10	3	66	5001.3	4329.4
...Motor vehicle related injuries	Per 100,000 population 1-5	2008-10	4	8	603.2	407.3
Child passengers ages 1-5 injured or killed in motor vehicle crashes ⁹	Per 100,000 population 1-5	2008-10	4	8	603.2	323.4

STRATEGIC ISSUE 3: Maternal & Child Health

Community health partners identified Maternal and Child Health as the third issue impacting the health of residents in Washington County. According to the Florida Department of Health, there were 229 births to Washington County residents in 2012. The majority of births in 2012 were to White women between the ages of 20 to 29. Births to White teens (ages 15-19) accounted for 12.6% of all births, while births to Non-white teens represented 4% of all births.

**Births(Count) by Mother's Age by County of Residence (Mother) by Race
Year of Birth=2012**

		Births									
		0-14	15-44							Total	Total
			15-19	20-24	25-29	30-34	35-39	40-44			
Washington	White	0	29	58	59	28	13	0	187	187	
	Black & Other	0	9	13	12	6	1	1	42	42	
	Total	0	38	71	71	34	14	1	229	229	

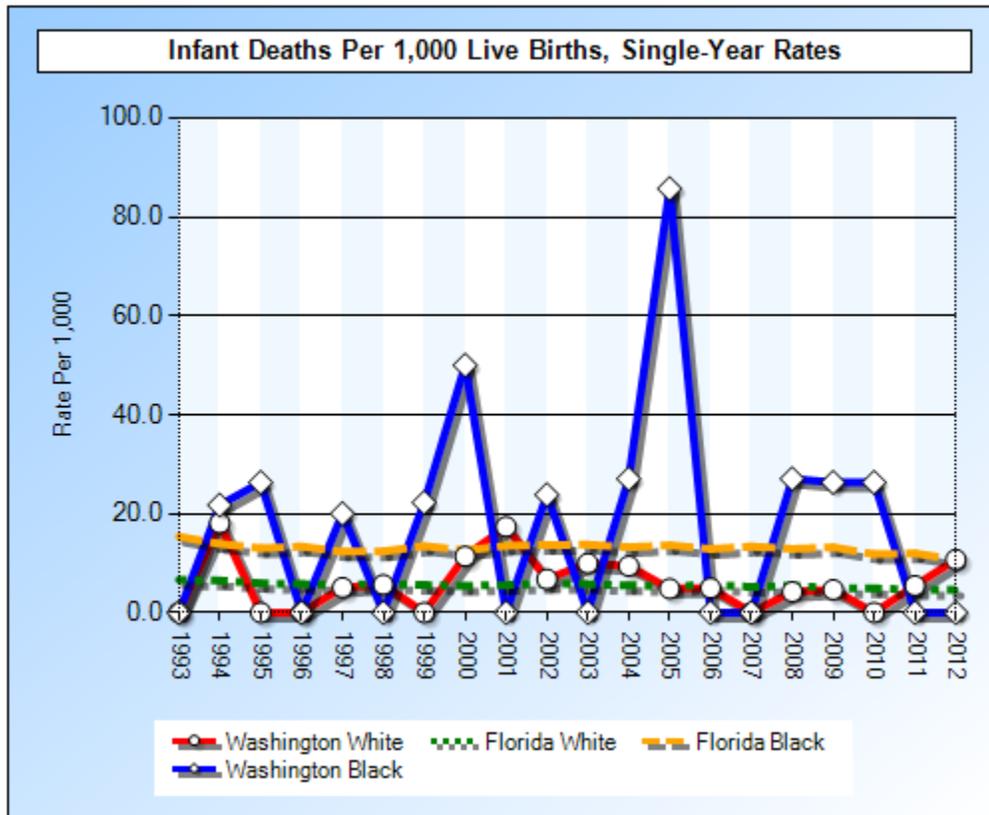
Source: Florida CHARTS

White women, ages 15-19, had more repeat births than Black women in the same age category from 2010 to 2012. The table below summarizes this data and provides a comparison to the count and rate of similar populations for Florida.

Repeat Births to Mothers Ages 15-19, Ages 15-19, Single Year Rates								
Year	Washington				Florida			
	White		Black		White		Black	
	Count	Rate (%)	Count	Rate (%)	Count	Rate (%)	Count	Rate (%)
2010	3	12.5	3	37.5	1,861	15.8	1,452	21.7
2011	4	16.7	2	18.2	1,620	15.5	1,274	21
2012	6	20.7	2	28.6	1,539	15.5	1,085	20.1

Source: Florida CHARTS

Infant death rates (ages 0-365 days) decreased for black infants since 2010. However, white infant death rates have shown an upward trend since 2010. The graph below displays the trends from 1993 to 2012.



Source: Florida CHARTS

Health Assets and Resources

HEALTH INSURANCE COVERAGE

Access to health resources is often impacted by an individual's health insurance coverage. Health insurance may be obtained privately through an employer or purchased independently. Individuals who meet specific eligibility requirements may also qualify for government subsidized or other publicly funded health coverage programs such as Medicare, Medicaid, Military and/or VA benefits. There are also those individuals who are uninsured, including full and part-time employees whose employers do not offer health insurance benefits, low-income persons who do not qualify for Medicaid, early retirees, and others who simply cannot afford the cost for adequate coverage.

Responses from Washington County residents in the 2010 county-level BRFSS indicate that 74.3% of residents overall reported having some type of health insurance coverage at the time of the survey; compared to 83.0% statewide. This was considered to be a statistically significant difference from the state average. There were some specific differences in coverage noted among specific groups. For example, 73.7% of women reported having health insurance in Washington County, compared to 84.2% of women statewide. Additionally, 77.2% of persons who had attended additional schooling beyond obtaining a high school degree reported having coverage, compared to only 57.3% of persons who did not obtain a high school degree or equivalent. Similarly, 92.6% of persons making \$50,000 or more per year had insurance, compared to only 65.6% among persons making less than \$25,000.



Data reported by the U.S. Census Bureau from the 2010 Small Area Health Insurance Estimates indicate that as many as 21.9% of Washington County residents were uninsured at that time among all races, age groups, and genders. Additional data

obtained and reported by the Florida Hospital Association (FHA) indicates that during 2011, at least 26.0% of Washington County residents between ages 18 and 64 were uninsured; with an additional 9.9% of minors under the age of 18 also being uninsured. Among seniors, the FHA reports at least 0.8% of residents over the age of 65 were without health insurance.

Florida's Agency for Health Care Administration (AHCA) administers the Medicaid program for the state. The agency records and tracks various types of enrollment data, and many of these figures are available on their website at:
<http://ahca.myflorida.com/Medicaid/index.shtml>.

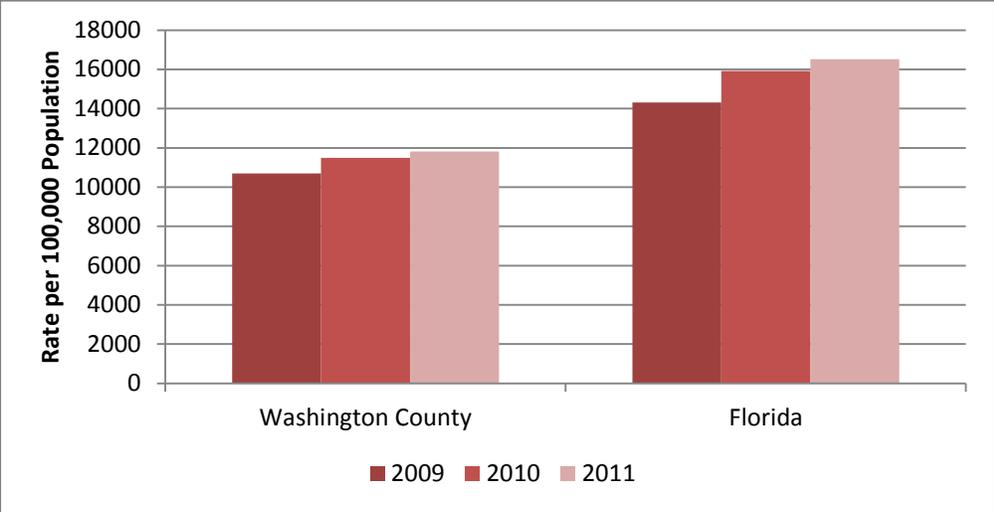
The table on the following page shows the reported enrollments in Medicare, Medicare HMO, Medicaid, Medicaid HMO, and Commercial HMO insurance programs. Please note that significant numbers of insured residents are not reported because commercial insurance enrollment figures are not available and the number of employees who are self-insured is unknown.

Hospital Discharges by Principal Payer, Florida, 2011

Payer	Frequency	Total Charges	Percent (%) of Total Charges	Average Total Charges
Medicare	1,191,973	60,087,179,782	53.5	50,409
Commercial Insurance	608,602	23,885,222,141	21.3	39,246
Medicaid	539,458	16,995,162,048	15.1	31,504
Self-Pay/Non-Payment	218,615	7,249,092,392	6.5	33,159
Tricare or Other Federal	36,584	1,211,196,568	1.1	33,107
Other State/Local Government	24,639	1,188,134,815	1.1	48,221
VA	12,877	636,803,169	0.6	49,452
Other	9,878	368,605,723	0.3	37,315
Workers' Compensation	8,426	509,491,711	0.5	60,466
KidCare	4,627	169,376,976	0.2	36,606
Total	2,655,679	112,300,265,325	100	42,286

The median monthly Medicaid enrollment has increased in Washington County and in Florida during recent years. This trend is displayed below.

Median Monthly Medicaid Enrollment, Washington County and Florida, 2009-2011



Source: Florida Agency for Healthcare Administration (AHCA), 05/21/2013

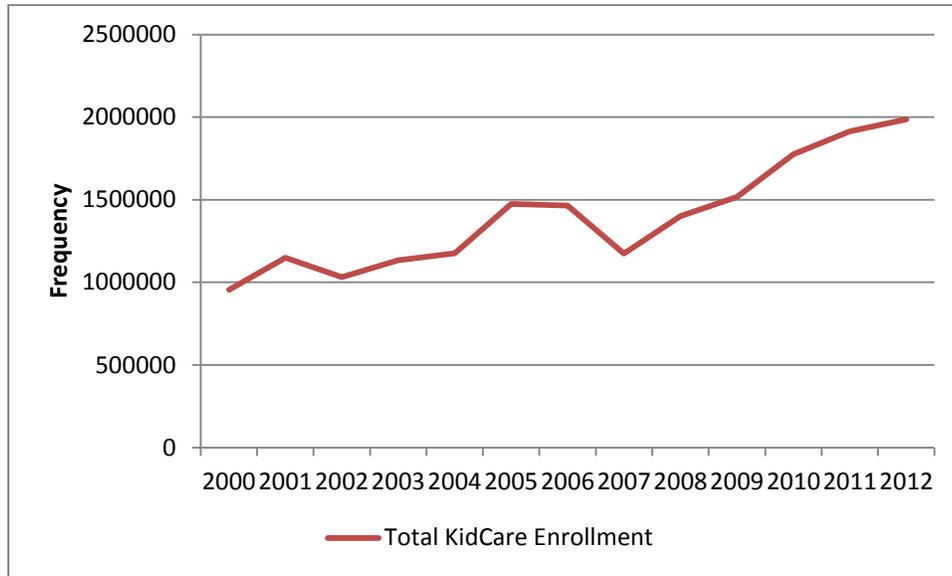
COVERAGE FOR CHILDREN

Federal government provisions for children's health coverage include Medicaid and Title XXI of the Social Security Act. In Florida, the KidCare Act of 1997 established eligibility requirements for coverage as well as created the Healthy Kids Program and the MediKids program for children ages 0-5. There are four general categories of children's coverage in Florida:

1. Medicaid covers children birth through 18 years, and eligibility is based on the age of child and household income. For example, children under age 1 are covered if the household income is below 200% of FPL; children aged 1-5 are covered if household income is less than 133% of FPL; and children aged 6 through 18 are covered if household income is below 100% of FPL.
2. MediKids covers children age 1 –5 whose income is between 133-200% of the federal poverty level.
3. The Healthy Kids program provides medical coverage for children ages 5 up to 19 in households whose income is between 100 – 200% of the federal poverty level (FPL).
4. Children's Medical Services covers children from birth through 18 who have special behavioral or physical health needs or chronic medical conditions.

The total Florida KidCare enrollment in January from 2000 through 2012 is shown in the figure below.

Total KidCare Enrollment (MediKids + Medicaid), Florida, January 2000 – January 2012



Source: Florida Agency for Healthcare Administration, 5/31/2013

PRIMARY CARE

Primary Care Providers (PCP's) offer routine medical care for the prevention, diagnosis, and treatment of common medical conditions. Primary care providers often serve as "gatekeepers" for the health care system, as they are intended to be the entry point into the health care system for non-emergent services, and refer patients requiring additional care to specialists for treatment. In this way, The U.S. Health Resources and Services Administration (HRSA) considers general and family practitioners, internists, pediatricians, obstetricians and gynecologists, physician assistants, and nurse practitioners all as primary care providers. Additionally, public health nurses and school nurses provide primary care services to designated populations.

Due to their central role in the health services system, a shortage of primary care providers can negatively impact the health of a community. For this reason, the Federal government has established specific criteria to determine whether an area has a shortage of providers; and also criteria to help determine whether a specific area is underserved. The HRSA Shortage Designation Branch is responsible for setting the criteria and ultimately deciding whether or not a geographic area, population group or facility is a **Health Professional Shortage Area (HPSA) or a Medically Underserved Area or Population (MUA/MUP)**. Health Professional Shortage Areas (HPSA's) may be designated as having a shortage of primary medical care, dental, or mental health providers. They may be urban or rural areas, population groups or specific medical or other public facilities.

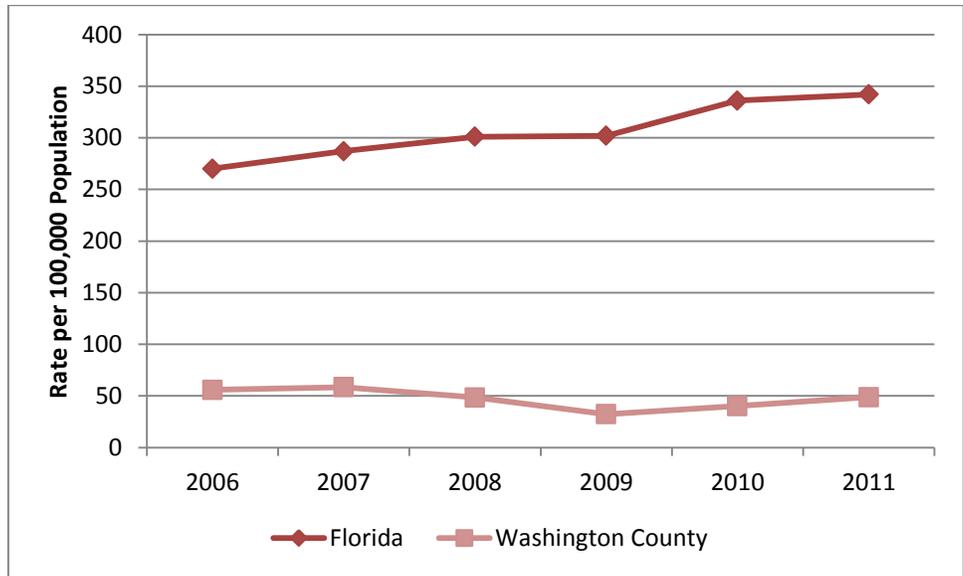
HRSA considers a primary care physician-to-population ratio of 1:3,500 persons adequate for most communities; except in areas where more than 20% of the population lives in poverty, where the ratio is increased to 3,000 persons per primary care physician. The primary care HPSA designation is also based on the availability of care in nearby areas, documented infant mortality rates, birth rates, and poverty

level. Currently, there is one Primary Care HPSA designations for Washington County.

Additionally, the federal administration defines Medically Underserved Areas (MUA's) as a whole county or a group of contiguous counties in which residents have a shortage of personal health services; and Medically Underserved Populations (MUP's) as groups of persons who face economic, cultural or linguistic barriers to health care. The current MUA/MUP designations for Washington County include only the Washington County Service Area (as defined by HRSA).

Overall, Washington County has a significantly lower rate (48.8 per 100,000 population) of licensed physicians when compared to the state (342.0 per 100,000 population) in 2011. Recently, the gap between Washington County and the state average has been increasing.

Physicians, Washington County and Florida, 2006-2011



Source: Florida Department of Health

One important note - when looking at physician coverage rates in Washington County, the data reflects only those physicians who list a Washington County

address for their licensure. This data does not account for physicians who have a primary office location in a neighboring county but who have satellite offices or otherwise provide services in Washington County.

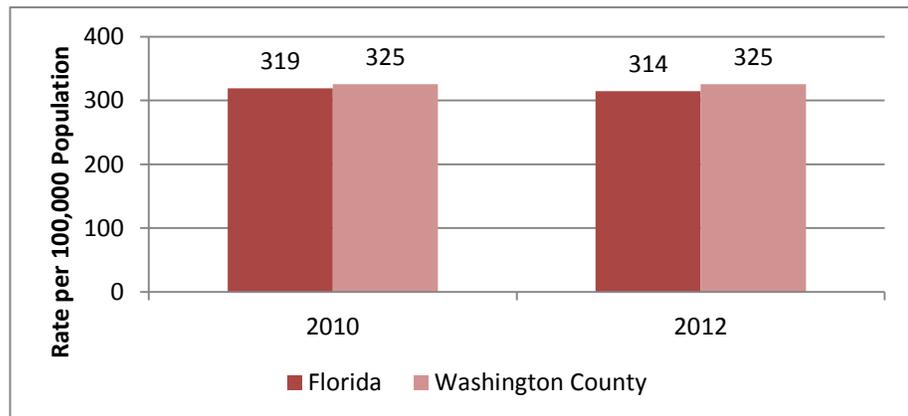
HEALTH CARE FACILITIES

Acute Care

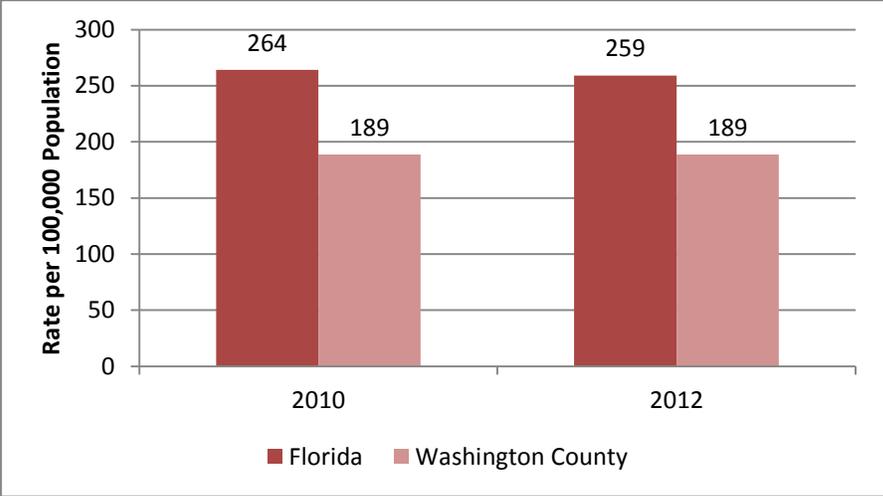
Acute care hospitals play a key role in the delivery of health care services, especially in more rural communities where primary and specialist outpatient care shortages may exist. In addition to providing traditional inpatient services, hospitals may also provide extensive diagnostic and treatment services on an outpatient basis.

Overall, Washington County has a higher rate of available hospital beds when compared to Florida. However, Washington County does not have a higher rate acute care beds and neonatal intensive care unit hospital beds when compared to the rest of the state.

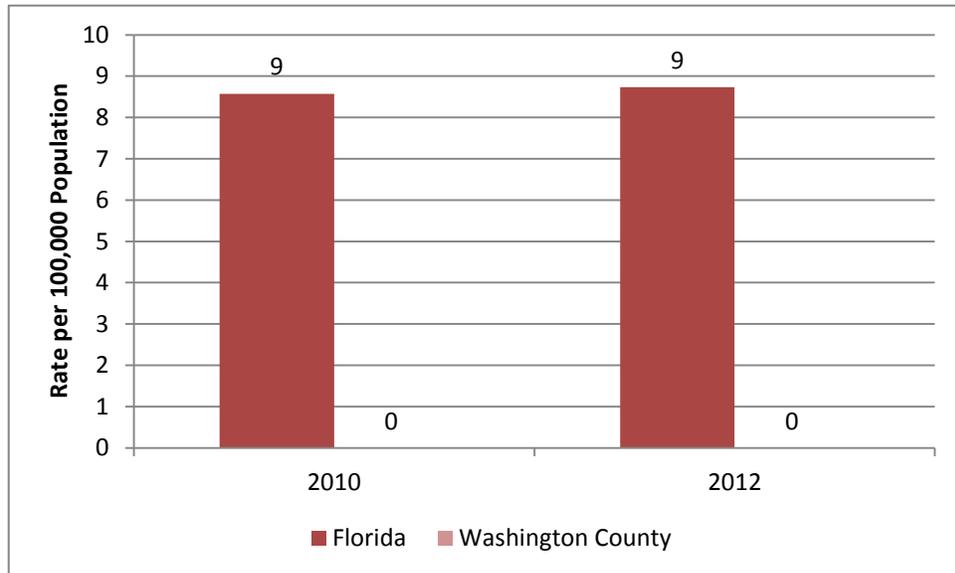
Total Hospital Beds (All Facilities), Washington County and Florida, 2010 & 2012



Acute Care Hospital Beds (All Facilities), Washington County and Florida, 2010 & 2012



NICU Hospital Beds (All Facilities), Washington County and Florida, 2010 & 2012



Northwest Florida Community Hospital is the primary hospital for Washington County, and provides Emergency Medicine and Radiology services; however, the hospital is not a Baker Act receiving facility. From October 2011 through September 2012, there were 655 admits with an average length of stay of 3.8 days costing on average US\$15,489 at Northwest Florida Community Hospital.

Data on discharge diagnosis solely for Washington County was not available. In the two tables on the following page are the Top 5 Diagnosis Related Group, MS-DRGs (Hospitalizations) in 2011 for Females and Males.

Top 5 Diagnosis Related Group, MS-DRGs (Hospitalizations) in Florida during 2011 for Females

Diagnosis	Discharges	Percent of Female Discharges	Average Length of Stay (days)	Average Total Charges (\$US)
Vaginal Delivery	125,050	9.1	2.4	12,937
Cesarean Delivery	79,919	5.8	3.3	24,251
Psychoses	55,407	4	7.2	15,830
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders	51,778	3.8	3.3	27,802
Chronic Obstructive Pulmonary Disease	38,098	2.8	4.7	31,984

Top 5 Diagnosis Related Group, MS-DRGs (Hospitalizations) in Florida during 2011 for Males

Diagnosis	Discharges	Percent of Female Discharges	Average Length of Stay (days)	Average Total Charges (\$US)
Psychoses	61,129	5.9	7.5	15,581
Heart Failure and Shock	32,286	3.1	4.6	33,448
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders	30,456	2.9	3	25,774
Percutaneous Cardiovascular Procedure	29,546	2.8	3.1	83,800
Simple Pneumonia and Pleurisy	27,729	2.7	4.5	32,205

Emergency Room Care

Local hospital Emergency Room (ER) utilization rates can be an indicator of the availability and accessibility of health care services within an area. Many ER visits are preventable, or involve conditions that may be more appropriately cared for in a primary care setting.

During 2012, there were 6,362 visits to the Northwest Florida Community Hospital Emergency Room of which 12.2% resulted in an inpatient admission (Source: ESSENCE, Florida Department of Health). Previous to 2012, data was not available for trend comparison of Emergency Room admissions.

Hospital data submitted to AHCA regarding the primary diagnosis at discharge from the ER (regardless of whether released or admitted as inpatient) provides ten reasons for emergency room visits among Santa Rosa County residents. The table on the following page displays selected non-fatal injury emergency department visits by mechanism in Washington County during 2011.

Select Non-fatal Injury Emergency Room Diagnoses, Washington County & Florida, 2011

Injury Mechanism	Washington County		Florida
	N	County Age Adjusted Rate per 100,000 Population	Florida Age Adjusted Rate per 100,000 Population
Firearm	7	29	2374
Suffocation	2	8	1313
Pedalcyclist, Other	15	68	812
Motor Vehicle - Pedalcyclist	37	155	783
Fall	1	5	640
Drowning, Submersion	240	1,026	435
Other Spec & NEC	81	335	404
Overexertion	233	1,017	320
Cut, Pierce	150	643	209
Motor Vehicle - Pedestrian	4	19	100

Long-Term Care

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

Washington Rehabilitation and Nursing Center, located in Chipley, is a long term care facility that offers rehabilitation services and clinical services including wound care, an on-staff respiratory therapist, a registered dietician, and on-site dermatology, psychology, psychiatry, and podiatry services. Admission trend information was not available for this facility.

Long-term care also includes nursing home care. Medicaid is the primary funding source of nursing home care, paying for more than half (81.3%) of all nursing home days in Washington County. Medicaid typically pays for long-term care; while Medicare covers short-term care following hospital discharge. Many nursing homes limit the number of dedicated Medicaid beds in their facilities in order to control the number of low-reimbursing, long-term Medicaid patients admitted.

There is one free standing skilled nursing facilities in Washington County. The rate of available nursing home beds (731 per 100,000 population) is higher than the state average (435 per 100,000 population). The table below summarizes the number of nursing home beds, average occupancy rates, and percent of days covered by both Medicaid and Medicare for Washington County's free standing nursing home.

Skilled Nursing Home Information, Washington County and Florida, 2011

	Washington County	Florida
Community Bed Days (per 100,000 population)	266,661	153,055
Community Patient Days (per 100,000 population)	217,903	133,892
Medicaid Patient Days (per 100,000 population)	177,262	82,196
Occupancy Rate	81.7%	87.5%
Percent Medicaid	81.3%	61.7%

Source: Florida Department for Elder Affairs

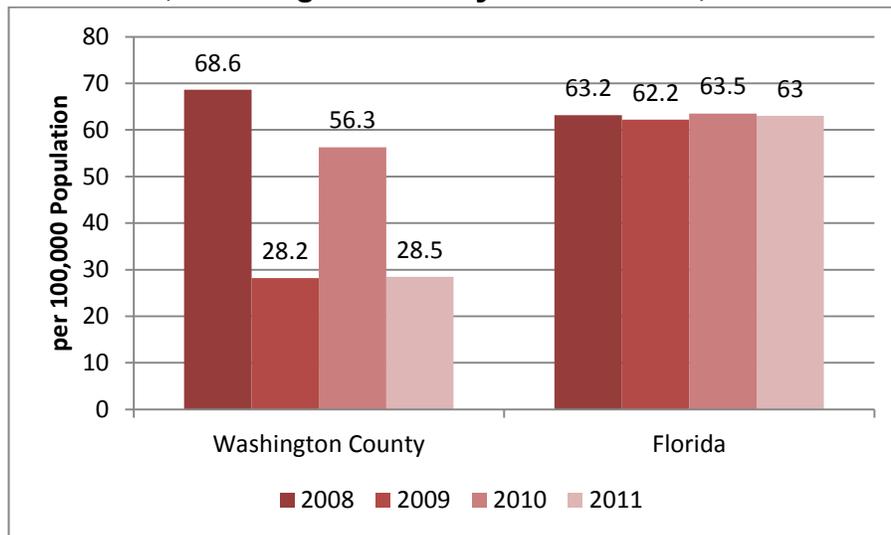
Mental Health and Substance Abuse

Washington County has no adult psychiatric hospital beds or dedicated mental health facilities.

Dental Care

The number of dentists in Washington County has changed from 2008 to 2011. The most current data available showed there were 28.5 dentists per 100,000 population as compared to the Florida rate of 63 dentists per 100,000 population. The graph below displays this trend.

Dentists, Washington County and Florida, 2008-2011



Source: Florida Department of Health, Division of Medical Quality Assurance

Washington County Physical Assets

There are a number of physical assets and resources within Washington County which can be mobilized to address the health issues identified in the Community Health Assessment. These are summarized in the table below and on the following page.

Parks	Walking Trails
Econfina Creek Water Management Area	Florida National Scenic Trail
Pine Log State Forest	Econfina Creek Water Management Area
Choctawhatchee River Water Management Area	Pine Log State Forest
Falling Waters State Park	Choctawhatchee River Water Management Area
	Falling Waters State Park
Recreation Center	
Dawn Fitness For Women	Recreational Bodies of Water
	Pate Lake
Athletic Field	Choctawhatchee River
Pals Park	
	Public Libraries
Schools	Literacy Volunteers-Washington
Kate Smith Elementary School	Washington County Library
Veron Elementary School	Country Oaks Library & Learning
Roulhac Middle School	Wausau Public Library
Veron Middle School	Sam Mitchell Library
Chipleigh High School	
Washington Holmes Technical Center	
WISE	
WCSP at Okeechobee	
Veron High School	

Medical Care Centers	Pharmacy
Northwest Florida Community Hospital	Vernon Discount Drugs
Speciality Clinic	Walmart Pharmacy
Custom Medical Solutions	Medicine Shoppe
The Eye Center Of North Florida	CVS/pharmacy
Southern Family Health Care	King's Discount Drugs
Family Health Care of Chipley	
Community Dialysis Center	Dental
Health Clinic	Savage Jr John w DDS
Vernon Clinic	Zediker Arthur C
	Taylor Jack R DDS
Rehab Centers	Miller Samuel B DDS
Laurel Rueben	Family Dentistry of Chipley
Northwest FL Therapy-Wellness	Washington County Public Health
Catherine B. Ablis	Downhome Dental Center
Chipley Physical Therapy	
Lorrie A. Laurel	Long-Term Care Facilities
Muskogee Vocational Rehab	Washington Rehabilitation Center
	Tropical Paradise Villa Retire
Mental Health Services	Broxton's Acf
FIRST GOD ALWAYS	Grandview Living

Health Policies

Within the state of Florida, there are numerous policies which can be used to impact health issues within Washington County. The table below and on the following pages summarized those policies most relevant to the issues identified in this Community Health Assessment.

Health Risk Factors	Florida Law	Description
Chronic Disease & Mortality		
Cancer (e.g., lung prostate, breast)	FS 381.0031(1,2) and FAC 64D-3	Permits FDOH Investigation; Requires Reporting To FDOH By Laboratories & Licensed Providers Of Cluster/Outbreak
	FS 385.202	Requires Providers To Report To Florida Cancer Registry
	FS 385.103	Chronic Disease Community Intervention Programs
	FS 385.206	Hematology-Oncology Care Center Program
Heart Disease and Stroke	FAC 64C-4.003	CMS Headquarters Approves Pediatric Cardiac Facilities For The CMS Network On A Statewide Basis.
	FS 385.103	Chronic Disease Community Intervention Programs
Chronic Lower Respiratory Disease (CLRD)	FS 385.103	Chronic Disease Community Intervention Programs
Cerebrovascular Disease	FS 385.103	Chronic Disease Community Intervention Programs
Diabetes	FS 385.203	Diabetes Advisory Council; Creation; Function; Membership
	FS 385.204	Insulin; Purchase, Distribution; Penalty For Fraudulent Application For And Obtaining Of Insulin
	FS 385.103	Chronic Disease Community Intervention Programs

Health Risk Factors	Florida Law	Description
Unintentional injuries	FS 385.103	Chronic Disease Community Intervention Programs
	FAC 64B-7.001	Pain Management Clinic Registration Requirements
	FAC 64K-100(1, 2, 3, 4, 5, 6 , 7)	Establishment Of Florida's Prescription Drug Monitoring Program
	FS Title XXIX, Chapter 397	Substance Abuse Services
	FS 316.613	Child restraint requirements
	FS 316.614	Safety belt usage
	FS 316.1936	Possession of open containers of alcoholic beverages in vehicles prohibited; penalties.
	FS 327.35	Boating under the influence; penalties; "designated drivers"
Overweight and Obesity	FS 385.103	Chronic Disease Community Intervention Programs
Communicable Diseases		
Arboviral Diseases	FS 388	Control of Arthropods in Florida
Tuberculosis	FS 392	Tuberculosis Control.
Enteric Diseases	FS 381.0031(1,2) and FAC 64D-3	Permits FDOH Investigation; Requires Reporting To FDOH By Laboratories & Licensed Providers Of Newly Diagnosed Or Suspected Case/Cluster/Outbreak
	FAC 64D-3.046	Policy On Vaccines Provided In Florida CHD (e.g., Hepatitis A)
	FS 381.0072	Food Service Protection
Influenza and Pneumonia	FS 381.0031(1,2) and FAC 64D-3	Permits FDOH Investigation; Requires Reporting To FDOH By Laboratories & Licensed Providers Of Newly Diagnosed Or Suspected Case (Novel Strain Or Pediatric Death) /Cluster/Outbreak

Health Risk Factors	Florida Law	Description
Vaccine Preventable Disease	FS 381.0031(1,2) and FAC 64D-3	Permits FDOH Investigation; Requires Reporting To FDOH By Laboratories & Licensed Providers Of Newly Diagnosed Or Suspected Case/Cluster/Outbreak
	FAC 64D-3.046	Policy On Vaccines Provided In Florida CHD; Determines Vaccination Policy For Admission To Florida Public Schools
	FS 402.305 and FAC 65C-22.006	Daycare Facility Requirements For Compulsory Immunizations For Admittance And Attendance
	FS 402.313 and FAC 65C-20.011	Licensed Family Daycare Homes Requirements For Compulsory Immunizations For Admittance And Attendance
	FS 402.305 and FAC 65C-25.002 and FAC 25.008	Licensed Specialized Childcare Facilities For The Care Of Mildly-Ill Children Requirements For Compulsory Immunizations For Admittance And Attendance
Hepatitis	FS 381.0031(1,2) and FAC 64D-3	Permits FDOH Investigation; Requires Reporting To FDOH By Laboratories & Licensed Providers Of Newly Diagnosed Or Suspected Case/Cluster/Outbreak
	FAC 64D-3.046	Policy On Vaccines Provided In Florida CHD; Determines Vaccination Policy For Admission To Florida Public Schools, Including Exemptions
Sexually Transmitted Infections	FS 381.0031(1,2) and FAC 64D-3	Permits FDOH Investigation; Requires Reporting To FDOH By Laboratories & Licensed Providers Of Newly Diagnosed Or Suspected Case/Cluster/Outbreak
	FS Title XXIX, Chapter 384	STIs: Department Requirements
HIV/AIDS	FS 381.0031(1,2) and FAC 64D-3	Permits FDOH Investigation; Requires Reporting To FDOH By Laboratories & Licensed Providers Of Newly Diagnosed Or Suspected Case/Cluster/Outbreak
	FAC 64D-200(2, 3, 4, 6)	Outlines With Respect To HIV The Definitions, Confidentiality, Testing Requirements, And Registration Of HIV Testing Programs
	FS 381.004	HIV Testing

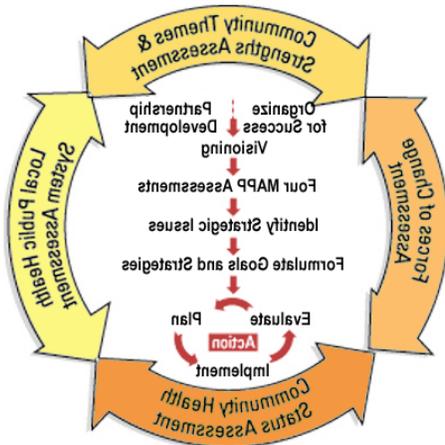
Health Risk Factors	Florida Law	Description
Maternal & Child Health		
Birth Rates	FS Title XXIX, Chapter 383	Maternal And Infant Health Care
Low Birth Weight	FS Title XXIX, Chapter 383	Maternal And Infant Health Care
Infant Mortality	FAC 64D-3.046	Policy On Vaccines Provided In Florida CHD; Determines Vaccination Policy For Admission To Florida Public Schools
	FAC 64C-4.003	CMS Headquarters Approves Pediatric Cardiac Facilities For The CMS Network On A Statewide Basis.
	FS Title XXIX, Chapter 383	Maternal And Infant Health Care
Teen Pregnancy	FAC 64F-23.001	Informed Consent - Abortion
	FS 63.053 and 63.054	Unmarried Father Registry
	FS Title XXIX, Chapter 390	Termination Of Pregnancies
	Florida Constitution, Article X, Section 22	Parental Notice Of Termination Of A Minor's Pregnancy
	FS Title XXIX, Chapter 384.31	STI: Testing Of Pregnant Women; Duty Of The Attendant
Infant and Child Injuries	FS Title XXIX, Chapter 391	Children's Medical Services

Health Risk Factors	Florida Law	Description
Health Resource Availability (Access & Resources)		
Access to Health Care	FS Title XXX	Social Welfare (Unknown Effect Due To Federal Affordable Care Act Implementation) (E.G., Medicaid, Blind Services, Etc.)
	FAC 64D-3.046	Policy On Vaccines Provided In Florida CHD; Determines Vaccination Policy For Admission To Florida Public Schools
	FAC 64C-4.003	CMS Headquarters Approves Pediatric Cardiac Facilities For The CMS Network On A Statewide Basis.
	FAC 64F-16.006	Sliding Fee Scale
	FS 296.31	VETERANS' NURSING HOME OF FLORIDA ACT
Social & Mental Health		
Education (Access & Completion)	FL Constitution, Article X, Section 27	Comprehensive Statewide Tobacco Education And Prevention Program
	FL Constitution, Article IX, Section 1	Public Schools; Education Of All Students
	FS Title XLVIII	K-20 Education Code (FS 1007 - Access)
Foster Care	FS Title XXIX, Chapter 402.47	Foster Grandparent And Retired Senior Volunteer Services To High-Risk And Handicapped Children
	FS Title XXX, Chapter 409	Social And Economic Assistance, Part I
Mental Health Treatment	FS Title XXX, Chapter 430	Elderly Affairs: Alzheimer's Disease Services
	FS Title XXIX, Chapter 394	Mental Health

Health Risk Factors	Florida Law	Description
Disability	FS Title XXX, Chapter 410	Aging And Adult Services
	FS Title XXX, Chapter 430	Elderly Affairs
	FS Title XXIX, Chapter 393	Developmental Disability
Crime	FS Title XLVI	Crimes In Florida
	FAC 64B-7.002	Pain Clinic / Physician Disciplinary Guidelines
	FAC 64B-3.005	Requires Counterfeit-Proof Prescription Pads Or Blanks For Controlled Substance Prescribing
	FAC 64B21-504.001	School Psychology Disciplinary Guidelines
	FS 767.04	Dog owner's liability for damages to persons bitten (e.g., PEP)
Suicide	FAC 64K-100(1, 2, 3, 4, 5, 6 , 7)	Establishment Of Florida's Prescription Drug Monitoring Program – In Response To Overdose/Suicide Rates
	FS 406.11	Examinations, Investigations, And Autopsies
Nutrition and Physical Activity	FS 381.0053	Comprehensive Nutrition Program
	FS Title XXIX, Chapter 383	Maternal And Infant Health Care
	FS 1003.455	Physical education; assessment
Alcohol Use	FS Title XXXIV	Alcoholic Beverages And Tobacco Regulations

Health Risk Factors	Florida Law	Description
Tobacco Use	FS 386.201 and FAC 64-14	Florida Clean Indoor Air Act: DOH Shall Regulate All Facilities That DBPR Does Not With Respect To This Act.
	FL Constitution, Article X, Section 20	Workplaces Without Tobacco Smoke
	FS Title XXXIV, Chapter 569	Tobacco Product Regulations

The next step in the Washington County process is to conduct the *Community Health Improvement Planning (CHIP)* phase of the MAPP process, wherein the results from this report will be reviewed by community health partners. By understanding that the Washington County community's health is affected by where its residents live, work, and play, a comprehensive action plan can be developed.



This process follows the guidelines of the Mobilizing for Action through Planning and Partnerships (MAPP) model. MAPP was developed by the National Association of County and City Health Officials (NACCHO), in collaboration with the Centers for Disease Control and Prevention (CDC). MAPP provides a framework to create and implement a community health improvement plan that focuses on

long-term strategies that address multiple factors that affect health in a community.

The MAPP model utilizes six distinct phases:

1. Partnership development and organizing for success
2. Visioning
3. The Four MAPP assessments (Community Health Status Assessment, Community Strength and Themes Assessment, Local Public Health System Assessment, Forces of Change Assessment)
4. Identifying strategic issues
5. Formulating goals and strategies
6. Action (program planning, implementation, and evaluation)

It is recommended that the data sources in this report serve as the “measures of success” for the Community Health Improvement Action Plan. Many of the health indicators can be used as baseline and post-implementation evaluation measures for impact. In addition, other county and state successful Health Improvement initiatives can act as “Best Practices” and provide a foundation for the Community Health Improvement Plan’s activities.

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Appendices

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APPENDIX 1: Washington County Needs Assessment

A. List of Key Informants and Focus Groups

Interviews were held with key informants from the following organizations:

- Board of County Commissioners
- Ebro Community Outreach Project
- Healthy Families
- Healthy Start
- Life Management Center
- Northwest Florida Community Hospital
- Panhandle Area Education Consortium
- Private ARNP
- Shepherd's Gate Church
- Vernon Middle School
- Washington County Chamber of Commerce
- Washington County Council on Aging
- Washington County School District
- Washington/Holmes Technical Center
- Washington County School Board
- Westpoint Home Company

Focus Groups were conducted with the following groups:

- Ebro: Family and Community Outreach Committee (13 participants)
- Wassau: Shephards Gate Food Pantry (6 participants)
- Chipley: Washington County Council on Aging (8 participants)
- Chipley: Cancun Mexican Restaurant (5 participants)
- Chipley: Workforce Center (6 participants)

B. Key Informant Interview Questions

Which populations have the greatest difficulty accessing affordable primary healthcare services, oral healthcare services and mental healthcare services? (These can be described in terms of age, ethnicity, socio-economic level or other status).

What are the factors contributing to this?

What geographic area of the county has the most difficulty accessing services?

What are the factors contributing to this?

What are the greatest barriers or challenges facing each of these populations? (These can be described in terms of cultural or linguistic barriers, geographic barriers, insurance status, income level etc.)

Where do these populations currently go for their primary, oral and mental healthcare services?

What about the current healthcare system is working well for these populations? What is not working so well? How could the current system be improved?

Have there recently been any significant changes or trends in the area or that may be impacting these populations level of need for services, their health outcomes or their access to affordable healthcare?

It is estimated there may be around 1000 Hispanics living in the county. Where do they reside and congregate? Do they have any special or unique needs? Where do they currently go for healthcare services?

How large is the homeless population in the county? Are there any services available to them?

Which specific services are in shortest supply (oral, mental health, OB)?

What transportation resources exist in the county? Which areas of the county face the greatest transportation barriers?

C. Focus Group Questions

Give me a word or phrase to describe your overall experiences with getting or using healthcare services in Washington County.

What are the main factors that influence your decision about whether or not to seek healthcare services for you or your family?

Describe a time when you or someone in your family had a hard time getting healthcare services they needed. This may include a time when you or they decided to put it off, or not seek care at all.

Washington County has a lot of deaths from cancer, diabetes, respiratory disease and heart disease. Why do you think so many people in Washington County suffer from these diseases?

How has your family's ability to get healthcare services in Washington County changed, either for the better or for the worse, over the past 1-5 years?

In an ideal world, what features, qualities or services would you like to see a community health center in Washington County to have?

How does transportation or lack of public transportation affect your ability to get healthcare services for you and your family?

Describe your experience with getting and keeping health insurance for you and your family. This may include Medicaid, KidCare or other public insurance programs.

How has the current economic crisis affected you or your family's ability to get healthcare services?

Please finish each of the following sentences:

The greatest barrier or challenge to getting good, basic healthcare for me and my family is....

What I like most about my family doctor and his office is...

What I like least about family doctor and his office is...

The most frustrating thing about using healthcare services in Washington County is....

The thing that would make healthcare in Washington County better and easier to use is....

D. Table of Providers

Primary Care Physicians		
Provider	New Medicaid	Sliding Scale
Lapuz	No	No
Melvin	Medipass Kids only	No
Wade	Kids only	No
Qureshi	Yes	No
Porter	Kids only	No
Ward	Kids only	Yes
Hatcher	Yes	Yes
Clemmons	No	No
Malick	Yes	No
Khan	Yes	No
Sloan	No	No
Mid-Level Providers (ARNP / PA)		
Provider	New Medicaid	Sliding Scale
Frost (Ward, Admin)	Yes	Yes
Garney (Porter)	Kids only	No
Breland (CHD)	Yes	Yes
Bray (CHD)	Yes	Yes
Horton (Ward)	Only kids	Yes
Edenfield (Ward)	Only kids	Yes
Day (Melvin)	Medipass Kids only	No
Kennedy (Hatcher)	Yes	Yes
Dressel (Hatcher)	Yes	Yes
Baxley (Hatcher)	Yes	Yes

Dentists		
Provider	See Children	Accept Medicaid
Minor	Yes	No
Hooper	No	No
Parker	No	No
Parker	Yes	No
Whitaker	Yes	NO
Wilson	Yes	No
Taylor	No	No
Miller	Unknown	Unknown



Washington County, Florida County Health Status Summary

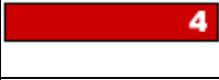
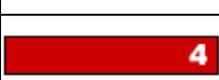
Indicator	Year(s)	Rate Type	County Quartile ^A 1=most favorable 4=least favorable	County Rate	State Rate	County Trend ^B (click to view)	Healthy People 2020 Goals ^C
Actual Causes of Death*							
Physical Activity							
Adults who meet moderate physical activity recommendations ¹	2007	Percent	1	42.5%	34.6%		
Adults who meet vigorous physical activity recommendations ¹	2007	Percent	3	23.7%	26.0%		
Adults who engage in no leisure-time physical activity ¹	2002	Percent	3	32.4%	26.4%		32.6%
Overweight and Obesity							
Adults who consume at least five servings of fruits and vegetables a day ¹	2007	Percent	4	22.2%	26.2%		
Adults who are overweight ¹	2007	Percent	3	39.1%	38.0%		
Adults who are obese ¹	2007	Percent	3	27.9%	24.1%		30.6%
Tobacco Use							
Adults who are current smokers ¹	2007	Percent	3	24.1%	19.3%		12%
Socio-Demographics							
Median income (in dollars) ²	2000	Null	4	\$27,922	\$38,819		
Residents below 100% poverty ²	2000	Percent	4	19.2%	12.5%		
Unemployment rate ³	2009	Percent	2	10.1%	10.2%	No Trend ↔	
Population that is linguistically isolated ²	2000	Percent	2	0.3%	1.9%		
Population over 25 without high school diploma or equivalency ²	2000	Percent	3	28.8%	20.1%		

Health Status and Access to Care							
Adults who rate their health status as "fair" or "poor" ¹	2007	Percent		21.6%	16.6%		
Adults with any type of health care insurance coverage ¹	2007	Percent		78.5%	81.4%		
Adults who could not see a dentist in the past year because of cost ¹	2007	Percent		21.9%	19.2%		
Adults who received a flu shot in the past year ¹	2007	Percent		27.1%	32.7%		
Total licensed family physicians ⁴	2007-09	Per 100,000		16.1	19.3		
Total licensed dentists ⁴	2007-09	Per 100,000		51.0	61.8		
Total hospital beds ⁵	2007-09	Per 100,000		326.4	316.7		



Washington County, Florida County Health Status Summary

Indicator	Year(s)	Rate Type	County Quartile ^A 1=most favorable 4=least favorable	County Rate	State Rate	County Trend ^B (click to view)	Healthy People 2020 Goals ^C
Chronic Diseases							
Coronary Heart Disease							
Coronary heart disease age-adjusted death rate ⁷	2007-09	Per 100,000		152.3	108.5	Better ↓	100.8
Coronary heart disease age-adjusted hospitalization rate ⁸	2007-09	Per 100,000		474.1	440.4	Better ↓	
Stroke							
Stroke age-adjusted death rate ⁷	2007-09	Per 100,000		30.2	31.6	No Trend ↔	33.8
Stroke age-adjusted hospitalization rate ⁸	2007-09	Per 100,000		221.7	268.6	Better ↓	
Heart Failure							
Heart failure age-adjusted death rate ⁷	2007-09	Per 100,000		16.1	7.6	No Trend ↔	

Congestive heart failure age-adjusted hospitalization rate ⁸	2007-09	Per 100,000		241.2	185.3	Better ↓	
Adults with diagnosed hypertension ¹	2007	Percent		34.5%	28.2%		
Adults who have diagnosed high blood cholesterol ¹	2007	Percent		40.2%	37.1%		13.5%
Adults who had their cholesterol checked in the past five years ¹	2007	Percent		65.8%	73.3%		
Lung Cancer							
Lung cancer age-adjusted death rate ⁷	2007-09	Per 100,000		76.6	46.9	No Trend ↔	45.5
Lung cancer age-adjusted incidence rate ⁹	2005-07	Per 100,000		77.2	67.7	No Trend ↔	
Colorectal Cancer							
Colorectal cancer age-adjusted death rate ⁷	2007-09	Per 100,000		17.0	14.7	No Trend ↔	14.5
Colorectal cancer age-adjusted incidence rate ⁹	2005-07	Per 100,000		29.9	43.0	No Trend ↔	
Adults 50 years of age and older who received a sigmoidoscopy or colonoscopy in the past five years ¹	2007	Percent		47.4%	53.7%		
Adults 50 years of age and older who received a blood stool test in the past year ¹	2007	Percent		8.4%	21.2%		
Breast Cancer							
Breast cancer age-adjusted death rate ⁷	2007-09	Per 100,000		25.0	20.4	No Trend ↔	20.6
Breast cancer age-adj. incidence rate ⁹	2005-07	Per 100,000		73.8	109.3	No Trend ↔	
Women 40 years of age and older who received a mammogram in the past year ¹	2007	Percent		61.0%	64.9%		



Washington County, Florida County Health Status Summary

Indicator	Year(s)	Rate Type	County Quartile ^A 1=most favorable 4=least favorable	County Rate	State Rate	County Trend ^B (click to view)	Healthy People 2020 Goals ^C
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Chronic Diseases (continued)							
Prostate Cancer							
Prostate cancer age-adjusted death rate ⁷	2007-09	Per 100,000		28.3	18.3	No Trend ↔	21.2
Prostate cancer age-adjusted incidence rate ⁹	2005-07	Per 100,000		111.1	130.6	No Trend ↔	
Cervical Cancer							
Cervical cancer age-adjusted death rate ⁷	2007-09	Per 100,000		0.0	2.5	No Trend ↔	2.2
Cervical cancer age-adjusted incidence rate ⁹	2005-07	Per 100,000		3.7	9.1	No Trend ↔	
Women 18 years of age and older who received a Pap test in the past year ¹	2007	Percent		62.2%	64.8%		93%
Melanoma							
Melanoma age-adjusted death rate ⁷	2007-09	Per 100,000		5.0	2.9	No Trend ↔	2.4
Melanoma age-adjusted incidence rate ⁹	2005-07	Per 100,000		14.0	17.4	No Trend ↔	
Chronic Lower Respiratory Diseases							
Chronic lower respiratory diseases (CLRD) age-adjusted death rate ⁷	2007-09	Per 100,000		72.0	37.1	No Trend ↔	
CLRD age-adjusted hospitalization rate ⁸	2007-09	Per 100,000		392.8	339.9	Better ↓	50.1
Adults who currently have asthma ¹	2007	Percent		9.2%	6.2%		
Asthma age-adjusted hospitalization rate ⁸	2007-09	Per 100,000		667.5	729.9	Worse ↑	
Diabetes							
Diabetes age-adjusted death rate ⁷	2007-09	Per 100,000		40.5	20.0	No Trend ↔	65.8
Diabetes age-adjusted hospitalization rate ⁸	2007-09	Per 100,000		2042.1	2130.8	No Trend ↔	
Amputation due to diabetes age-adjusted hospitalization rate ⁸	2006-08	Per 100,000		24.1	23.8	No Trend ↔	

Adults with diagnosed diabetes ¹	2007	Percent	2	8.8%	8.7%		
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Washington County, Florida County Health Status Summary

Indicator	Year(s)	Rate Type	County Quartile ^A 1=most favorable 4=least favorable	County Rate	State Rate	County Trend ^B (click to review)	Healthy People 2020 Goals ^C
Communicable & Infectious Diseases							
Vaccine preventable diseases ¹⁰	2007-09	Per 100,000	2	2.7	3.8	No Trend ↔	
HIV cases reported ¹⁰	2007-09	Per 100,000	4	26.9	33.2		
AIDS cases reported ¹⁰	2007-09	Per 100,000	3	17.5	22.9	Worse ↑	
HIV/AIDS age-adjusted death rate ⁷	2007-09	Per 100,000	3	5.3	7.4	No Trend ↔	3.7
TB cases reported ¹⁰	2007-09	Per 100,000	1	1.3	4.9	No Trend ↔	1.0
Chlamydia cases reported ¹⁰	2007-09	Per 100,000	2	253.9	357.3	Worse ↑	
Gonorrhea cases reported ¹⁰	2007-09	Per 100,000	1	47.0	119.7	No Trend ↔	
Infectious syphilis cases reported ¹⁰	2007-09	Per 100,000	2	1.3	5.3	No Trend ↔	
Maternal, Infant & Young Child Health							
Early prenatal care (care began 1st trimester) ^{7, 13}	2007-09	Percent	4	67.0%	77.0%		77.9%
Low birth weight births (births < 2500 grams) ⁷	2007-09	Percent	2	7.7%	8.7%	No Trend ↔	
Premature births (births < 37 weeks gestation) ⁷	2007-09	Percent	2	13.2%	14.1%	No Trend ↔	11.4%
Multiple births ⁷	2007-09	Percent	1	1.6%	3.2%	No Trend ↔	
Births to teens 15-19 ⁷	2007-09	Rate per 1,000	3	57.7	40.4	No Trend ↔	

Repeat births to mothers 15-19 ⁷	2007-09	Percent	4	40.0%	22.7%	No Trend ↔	
Infant death rate ⁷	2007-09	Per 1,000 live births	1	4.8	7.1	No Trend ↔	6.0
Neonatal death rate ⁷	2007-09	Per 1,000 live births	2	3.6	4.5	No Trend ↔	4.1
Postneonatal death rate ⁷	2007-09	Per 1,000 live births	1	1.2	2.5	No Trend ↔	2.0
Fetal death ratio ⁷	2007-09	Per 1,000 live births	4	8.4	7.4	No Trend ↔	5.6
Kindergarten children fully immunized ¹¹	2007-09	Percent	1	98.9%	91.5%	No Trend ↔	



Washington County, Florida County Health Status Summary

Indicator	Year(s)	Rate Type	County Quartile ^A 1=most favorable 4=least favorable	County Rate	State Rate	County Trend ^B (click to view)	Healthy People 2020 Goals ^C
Unintentional Injuries							
Unintentional injuries age-adjusted death rate ⁷	2007-09	Per 100,000	4	66.4	44.0	No Trend ↔	36.0
Motor vehicle crash age-adjusted death rate ⁷	2007-09	Per 100,000	4	32.3	15.7	No Trend ↔	12.4
Social and Physical Environment							
Criminal homicide ¹²	2007-09	Per 100,000	1	1.3	6.0	No Trend ↔	
Domestic violence offenses ¹²	2007-09	Per 100,000	2	464.8	611.8	Worse ↑	
Adults who currently have asthma ¹	2007	Percent	4	9.2%	6.2%		
Suicide age-adjusted death rate ⁷	2007-09	Per 100,000	4	22.0	13.7	No Trend ↔	10.2

*Actual causes of death are the major external (nongenetic) factors that contribute to death in the US, first identified by McGinnis and Foege in 1993. These three sets of behaviors each contribute to over 100,000 deaths annually in addition to their impact on morbidity, quality of life, and public health burden.

Data Sources

- ¹Florida Department of Health, Bureau of Epidemiology, Florida BRFSS survey
- ²US Census Bureau
- ³US Department of Labor, Bureau of Labor Statistics
- ⁴Florida Department of Health, Division of Medical Quality Assurance
- ⁵Florida Agency for Health Care Administration, Certificate of Need Office
- ⁶Florida Department of Health, Office of Health Statistics and Assessment
- ⁷Florida Department of Health, Office of Vital Statistics
- ⁸Florida Agency for Health Care Administration (AHCA)
- ⁹University of Miami (FL) Medical School, Florida Cancer Data System
- ¹⁰Florida Department of Health, Division of Disease Control
- ¹¹Florida Department of Health, Bureau of Immunization
- ¹²Florida Department of Law Enforcement

All Age-Adjusted rates are 3-year rates per 100,000 and are calculated using the 2000 Standard US Population. These rates also use July 1 Florida population estimates from the Florida Legislature, Office of Economic and Demographic Research.

[View ICD Codes for death, cancer, and hospitalization indicators](#)

^ACounty Quartiles

Most favorable situation 1	Average 2 or 3	Least favorable situation 4
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(25% of counties)	(50% of counties)	(25% of counties)
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Quartiles in this report allow you to compare health data from one county to another in the state. Quartiles are calculated by ordering an indicator from most favorable to least favorable by county and dividing the list into 4 equal-size groups. In this report, a low quartile number (1) always represents more favorable health situations while fours (4) represent less favorable situations.

^BCounty Trends

As with rates, there is also random variation in the trend lines of these rates, so that a line that slopes upward may not represent a statistically significant increase, particularly if it is based on small numbers. For that reason, we test statistically to determine whether or not we can be at least 95 percent confident that what appears to be an increase or decrease is real, not just the result of random fluctuation.

Trends only calculated for indicators with 12 or more years of data available.

[Click here for more information about trends](#)

Trend Values

 Trend is getting better and is statistically significant

 Trend is getting worse and is statistically significant

 Trend is not statistically significant

Blank cell - Not enough data to compute a trend

¹³No trend available for entry into prenatal care due to a change in the measurement of this indicator in 2004. This renders data prior to 2004 incomparable to data from 2004 and forward.

^CHealthy People 2020 Goals

Healthy People 2020 is a national health promotion and disease prevention initiative. Its goals are to increase the quality and years of healthy life and eliminate health disparities. More information available at: <http://www.healthypeople.gov>. Goals are not available for every indicator.

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Appendix 2: Forces of Change

A. SURVEY INSTRUMENT

One of the primary components of the 2013 Washington County Community Health Improvement process is the Forces of Change Assessment (FOC). The Forces of Change assessment identifies legislative, technological, and other impending changes affecting the community in which the public health system operates.

This assessment answers the question *"What is occurring or might occur that affects the health of our community or the local public health system?"*

Based on your responses, the Forces of Change Assessment will provide a comprehensive yet focused list of the key forces facing the Washington County community and a description of their impacts. This process will require about 20 minutes of your time. Your responses will be ANONYMOUS – you will not be identified in any way.

You will be asked to identify critical EVENTS related to the health of the Washington County Community for 6 (six) Forces of Change:

- Economic Forces
- Environmental Forces
- Political Forces
- Health Forces
- Social Forces
- Technological Forces

Use these definitions to guide your responses:

What are Forces of Change? Forces are a broad all-encompassing category that includes trends, events, and factors. Forces include EVENTS & FACTORS.

What are Events? Events are one-time occurrences, such as a hospital closure, a natural disaster, or the passage of new legislation.

What are Factors? Factors are discrete elements, such as a community's large ethnic population, an urban setting, or a jurisdiction's proximity to a major waterway.

Forces of Change - Economic Forces

Please think about all the **Economic Forces** that are impacting Washington County.

Sample Economic Forces include:

- Decreasing state and federal funding
- Lack of large industries
- Unstable economic indicators – foreclosures, bankruptcies, high taxes, etc.

Forces of Change - Political Forces

Please think about **Political Forces** which impact the Washington County community. *Political Forces* may include:

- Leadership issues such as a change in governor and state department heads
- Jurisdictional issues such as annexation possibilities, re-districting, etc.
- Community attitudes related to lack of trust in government, lack of respect for law & enforcement

1. Please identify the most IMPORTANT Political Force impacting Washington County at this time.

2. For the Political Force you identified above, please list the STRENGTHS of Washington County to address or impact this Force.

3. Next, for the Political Force listed above, please identify those WEAKNESSES or THREATS in Washington County that may block attempts to impact this Force.

4. Forces of Change - Health Forces

Please think about **Health (Community & Individual) Forces** which impact the Washington County Community. *Health Forces* can be community-wide, such as access to dental care or can be individual, such as lack of education about preparing healthy meals. Health Forces can include:

- Dietary issues - Need healthier food & snacks in schools
- Risk issues - Smoking, Alcohol, Drug use, Exposure to toxic chemicals, Teenage Pregnancy
- Access issues - Lack of private psychiatrists in county or elder care facilities

1. Please identify the most IMPORTANT Health Force impacting Washington County at this time.

4. For the Health Force you identified above, please list the STRENGTHS of Washington County to address or impact this Force. Remember, Strengths may include organizations, resources, people, etc.

5. Next, for the Environmental Force listed above, please identify those WEAKNESSES or THREATS in Washington County that may block attempts to impact this Force. These may include one-time occurrences, such as a hospital closure, a natural disaster, or the passage of new legislation or discrete elements, such as a community's large ethnic population, an urban setting, or a jurisdiction's proximity to a major waterway.

Forces of Change - Social Forces

Please think about those **Social Forces** which impact Washington County and its community members. *Social Forces* include attitudes, culture, beliefs, and perceptions which ultimately influence behavior. Some of these Social Forces may be community-specific, while others may have a long history within an individual location or culture.

- 1. Please identify the most IMPORTANT Social Force impacting Washington County at this time.**

- 2. For the Social Force you identified above, please list the STRENGTHS of Washington County to address or impact this Force.**

- 3. Next, for the Social Force listed above, please identify those WEAKNESSES or THREATS in Washington County that may block attempts to impact this Force.**

Forces of Change - Technological Force

Please identify the **Technological Force** which impacts the Washington County Community. This may include the use of technology such as the internet, cell phones, or social networks. It may include technology in education, industry, or healthcare. It may also involve the lack of technological training or education of community residents. The key is to think about those *Technological Forces* which influence Washington County.

- 1. Please identify the most IMPORTANT Technological Force impacting Washington County at this time.**

- 2. For the Political Force you identified above, please list the STRENGTHS of Washington County to address or impact this Force.**

- 3. Next, for the Political Force listed above, please identify those WEAKNESSES or THREATS in Washington County that may block attempts to impact this Force.**

This Forces of Change Assessment will provide us with a comprehensive yet focused list of the key forces facing the Washington County community and a description of their impacts. This information will be used to guide the efforts in developing a Washington County Community Health Improvement Plan.

If you do NOT want to receive an email reminder to complete the Forces of Change Assessment, please enter your email here _____ . Your responses will be anonymous – your email will not be linked to your response to the Forces of Change Assessment.

Thank you for your time and commitment. If you have any questions, please contact Sharron Hobbs at Sharon_Hobbs@doh.state.fl.us.

B. VERBATIM RESPONSES

1. Please identify the most IMPORTANT Economic Force impacting Washington County at this time. (26)

Unemployment (9)

Unemployment based on lack of manufacturing and agricultural jobs.

Lack of jobs.

Lack of job opportunities.

Lack of jobs.

Lack of good paying jobs, available in the area, compiled with excessive taxation in all aspects of revenue generation. Very few people are willing to move to an area where the tax base on property is almost 17 mils, and the protective resources, such as fire and police are next to none.

Workforce.

Lack of Jobs.

Lack of high quality jobs.

Lack of jobs.

Funding (8)

Decreasing state and federal funding.

Unstable economic indicators.

Decreasing state funding.

Decrease in state and federal funding.

Very slow economic recovery for small businesses compared to other areas of the state and nation. Lack of large employers (industry).

Unstable economic indicators.

Unstable economic indicators for employers and job seekers. Investors are unsure and employers do not trust the economic trends to increase hiring.

High unemployment. Lack of high paying jobs/under employment. Weak national economy and uncertainty for small businesses.

Industries (6)

Lack of large industries.

Lack or industry/restaurant.

Lack of Large industries.

Lack of large industries.

Lack of industries.

Status of West Point Plant.

Other (2)

I really do not have enough information to answer this question.

1

2. For the Economic Force you identified above, please list the STRENGTHS (resources, organizations, people, etc.) of Washington County to address or impact this Economic Force. You can list as many STRENGTHS as you want which impact the Economic Force listed above. (26)

Government (13)

County has a strong workforce, non restrictive zoning, open areas, good environmental regulatory community.

Washington County Board of County Commissioners, City Chipley Council, Chamber of Commerce, various Civic organizations, Washington County Health Department, Tobacco Partnership, Tourist Development, local businesses, Washington County Democratic/Republican Party, Ministerial Association.

Board of Commissioners.

Local government representatives.

Local county governmental structures are not providing the necessary oversight to enable growth and expansion. Rural businesses are being over taxed, over regulated, with very little assistance for potential growth regarding necessary utilities and protection

County Commissioners.

County Commissioners, Local government, public health department, hospital Economic Development Associations such as Opportunity Florida, the Washington Count Chamber, Public Utilities, Chipola Regional Workforce Board, and employers.

City Council.

The state has very knowledgeable people that are leaders and followers. There are some things you can do without funding but more could be done for our community providing we have dollars to work with.

Washington County Chamber of Commerce.

Voting in new members to local government.

Unemployment (5)

People that are willing to work if jobs were available.

Chamber of Commerce to recruit more large industries.

Moral decreases also when there are no raises in site. People look to other places to work.

Dedication of plant manager and work ethic of local work force

One stop employment agency. The Chamber of Commerce.

Transportation (5)

Close proximity to Port of Panama City and new airport in Bay County.

Two four lane projects.

Proximity to interstate travel.

I 10 access is center of county.

The county must take advantage of the highway 79 tourist corridor. When fully developed the corridor will be the growth area of the county.

Land (4)

Large expanses of available land.

Chamber of Commerce, economic development organization

Rural community, property is available.

Dental for medical needy.

Medical (4)

Hospital.

Health Dept. for Medical Needy, education.

Council on Aging, Meals and Home environment, education on prevention and living with chronic illnesses

Education (4)

Vocational training.

Senior EXPO 2013 vendors on Aging to educate and promote wellness.

Vocational school that is expanding job training programs offered.

Washington-Holmes Technical Center: Chamber of Commerce: Proximity to Gulf ports (Panama City), railroad, and Interstate 10.

Faith-based (2)

Churches.

Several food and clothing banks have been established in the faith community. The business community supports each other trying to keep business local as much as possible.

3. Next, for the Economic Force listed above, please identify those WEAKNESSES or THREATS in Washington County to impacting this Economic Force. These may include Events, such as a hospital closure, a natural disaster, or the passage of new legislation or Factors, such as a community's large ethnic population, an urban setting, or a jurisdiction's proximity to a major waterway. (26)

Funding (9)

Lack of funding.

Low income levels.

Cost advantage of off-shore labor forces.

Lack of funding to support local economic opportunities. Grants are no longer a reliable source of funding and natural disasters drain the local economy. Fewer jobs cause local revenues to decrease and impact local businesses. People spend less and business decreases.

Local cash is restricted, donations, etc for churches and organizations.

Grants are based on population rather than NEED in communities.

Closure of local businesses, rural setting, region's health issues, (e.g. childhood obesity) impact on local residents, businesses, families, and public education due to a decrease in state and federal funding.

Passage of new legislation that reduces funding.

High tax rates for small businesses, high rates as well as difficulty getting coverage for workers compensation & liability insurance, difficulty getting business loans when work is present.

Employment (5)

In addition, this will put people to work, in Washington County. Bay County has almost extended its utilities to the county line, Why can't We do the same?

Lack of jobs that attract the young people back to our county.

Lack of private jobs.

Training and education that would build a workforce to attract businesses to our county.

Small business may be afraid to expand or hire due to uncertainty; fear health care legislation

Large spread out rural county with minimal large employers.

Lack of infrastructure: lack of skilled labor force: rural setting: no realistic policy to address these issues: poor tax base: county is broke.

The biggest weakness/threat is people not wanting to work!!!! They expect more than reasonable wages for their knowledge, skills and ability. It just easier to stay home on unemployment and that has become a standard rather than a transition between jobs.

Undereducated work force.

Loss of staffing to carry out care for clients and community.

Government (4)

Members of local government not wanting change that would bring in larger industries/restaurants.

The biggest threat is the State Legislator and the Washington County Commission imposing more regulations which will inhibit growth. When this growth starts there will be a population shift to favor the South end of the County and that will not please the County Commission.

Possible lack of community cooperation, finances to pursue and offer assistance to potential industries.

Lack of coordination and participation within the county.

Other (4)

I really do not have enough information to answer this question.

n/a.

Drought.
Depressed housing market.

Rural Settings (3)

Lack of infrastructure.

Comprehensive planning and development of rural properties with regards to proper utilities, such as water and sewage, need to be implemented on the I-10 corridor expansions as they occur within the next ten years. The addition of public utilities at the time of construction, will greatly enhance attraction of businesses to these main arteries, and restructure land use for development, instead of agriculture. This foresight will connect South Washington County to its county seat in a positive manner, produce jobs and revenues needed, so desperately at this time, not to mention the cost variations saved by doing the work in tandem with the proposed expansion. County and State agencies need to seek grants to provide its citizens with public utilities, as they tear up our highways, thus reducing future impact fees, protecting our water sources, and enabling a better environment to live and work in.

Very rural community.

Industries (3)

Lack of and closures of industries.

No industrial base. Most positions in this area are agricultural or service based industries.

Lack of industry that pays above state average.

Medical (3)

Large percentage of population have no insurance or Medicaid. New Health Care Laws may restrict Medicaid use or cost reimbursement-- this could impact medical facilities ability to withstand.

Transportation (3)

Many without transportation who live away from stores, etc.

No major railroads.

Airports.

4. Please identify the most IMPORTANT Environmental Force impacting Washington County at this time. (25)

Transportation (9)

Public transportation.

Public transportation...grocery stores, doctors, etc. Tri County provides local but no immediate services for all populations.

Public transportation or transportation for the elderly.

Transportation for all ages. Most families have limited transportation and aren't able to find jobs within walking or biking distance especially in the area's away from Chipley (the county hub).

Lack of public transportation.

Public transportation is a major need.

Public transportation limited and unaffordable to many.

Public Transportation - as there is none other than Transportation for the Disadvantaged.

Public transportation.

Land (6)

Land use.

Land use.

Drought for the farming.

Land availability.

Land use or urbanization.

Land use or urbanization.

Water (5)

Threat of well drilling by adjacent counties on water supply.

Threat of counties farther south stealing water Adverse impact of hurricane passing through area.

Land use and the availability to access city water/sewage

None.

See number Three! I covered this impact concerning public utilities, and the lack thereof.

Water.

Environment (3)

Florida regulations affecting free growth. US EPA Air and Water regulations. Corps of Engineers Regulations regarding Wetlands issues.

Air/water pollution, land usage, recreational issues, public transportation for the elderly/disadvantaged.

Rural setting - little pollution.

Other (2)

n/a I really do not have enough information to answer this question

5. For the Environmental Force you identified above, please list the STRENGTHS of Washington County to address or impact this Force. You can list as many STRENGTHS as you can think of which impact or address the Environmental Force you identified. (25)

Transportation (9)

We have Tri County Community Council transportation.
People would utilize a public system especially teens and adults needing to work.
Limited transportation system already in place.
Department of Transportation is located in Chipley, Washington County. Tri County Community Council already has a program serving a limited number in need.
Tri County Community Council provides transportation to medical appointments.
Transportation for the Disadvantaged assists those in need of such services.
Strengths include coordinated transportation that provides Medicaid participants and individuals that require transportation to medical appointments/services a valuable service at no or a very low cost.
TriCounty transportation exists

Land (7)

Controlled growth.
Lot of fertile land with trees, nice river and streams.
Good source for land that can be developed.
Cheap and available land.
Using land wisely.
Able to donate land for new businesses.
Skateboarding area for local teenagers, local state park, land usage for new businesses, Sunshine Express.

Government (5)

Willingness of county commissioners to use legal action to block vigilance of local state legislators to block theft efforts.
In my opinion, none of those listed have a major impact on WC at this time.
City limits have been extended.
I see no strengths at this time.
I really do not have enough information to answer this question.
Great quality of life.

Environment issues (4)

Plenty of water and woods.
Distance from coast which reduces impact of winds.
Implement water conservation programs as done by the City of Vernon.
Clean air and water. No or little polluting industry. Rural setting, trees, forests, rivers.

Workers (2)

Skilled work force. Ability to get things done.
Comprehensive planning, and doing projects in tandem are the only smart ways to accomplish a major utility addition in a rural society.

Help (2)

Volunteers
Churches

6. Next, for the Environmental Force listed above, please identify those WEAKNESSES or THREATS in Washington County that may block attempts to impact this Force. You can list multiple WEAKNESSES or THREATS. (25)

Transportation (7)

Lack of taxi services.

Tri County Community Council transportation charges a small amount for travel.

Due to lack of local business a public system would probably need to commute to panama city or the beaches not just in Washington County. Transportation would need to extend beyond the normal 8 - 5 day. The current J-Trans or Tri-County transportation only covers medical appointments.

One problem is the wait that elderly have at the doctor's office. They take more than one client so other clients may have to wait lengthy times to be picked up.

Many of the people who need transportation cannot afford the fee for transport and limit health services scheduling as a result.

Federal and State funding always threatens the provision of Transportation for the Disadvantaged. Medicaid funding reductions and private providers legislated by the state have also impacted these resources.

Lack of availability and funding for transportation.

Funding (7)

Costs money to work through environmental regulations.

Lack of recreational activities for local youth, funding not available to attract new businesses to this accommodate a fitness center to help curtail health issues, lack of jobs to entice prospective newcomers, unemployment, health issues; lack of facilities too.

Washington County does not have financial resources for legal action to block a concerted effort to steal water.

Washington County does not have financial resources to deal with significant storm damage and must depend on state/federal assistance

Limited income of residents.

Money seems to be a limited resource.

Lack of funds.

Water (5)

Water will continue to be a problem due to population growth. Area State Legislators do not have sufficient numbers or political strength to block water theft efforts by counties farther south. The weakest threat is global warming.

Prohibit the Northwest Florida Water Management District from diverting water to other parts of the state. The Washington County Commission does not have much reserve cash for an eventual legal battle that will occur in the next five years.

Draught.

Possible piping our water from our county to other counties.

Land (3)

Small farmers being forced out or to quit.

The main threat exists, in selling the impact fees to property owners with vast land resources. It can be done, A person or intity sitting on 40 acres of agriculture land, will now be able to subdivide that into smaller lots and parcels to be sold individually, at a greater value. This creates more value and revenues, than AG land, for the County. I am only writing about I-10

corridor properties at this time, Lands that will be affected by proposed expansion, for the greater good of all concerned.

Government (3)

Government restrictions.

Some people do not understand the need to 'change' and may hinder development.

Control of the local government.

Population (3)

Aging population.

No younger residents coming into county.

Not enough volunteers.

New business (2)

Threats of new businesses coming in.

I do not see or hear of anyone discussing bringing in large corporations that could benefit from the large land standing vacant.

Other (2)

None.

I really do not have enough information to answer this question.

Education (1)

Education, not many with secondary degrees.

7. Please identify the most IMPORTANT Political Force impacting Washington County at this time. (23)

Government (6)

The County Board of Commissioners.

Leadership issues (change in governor) community attitudes, re-districting issues.

State leadership.

We need to get rid of the ones that have been representing our county for way too long and that are against growth.

I'm not sure if anybody trust the government.

Judicial system, County Commissioners, & Taxing Authorities. I cannot think of anybody That is pleased or trusts what our public officials are investing our tax dollars in today! What happened "To Protect and Serve", it has turned into "Aggravate and Condemn". What happened to a simple warning ticket for a civil infraction of no damage or consequence? Today, It is all about the money and greed, nothing about, Do unto Others, as You would have Them Do Unto You! Lady Justice has turned a blind eye to the society, she is purposed to protect! This is probably the reason so many nuts are running loose in society, killing kids and innocent people, because justice is tending misdemeanors instead of criminals. Preplan growth and develop in ways to conserve future expenses, by including utilities in projects underway. Offer, reduced impact fees and rezoning costs for lands needed in the acquisition of proposed highway expansions.

State and Federal regulation that eliminates or restricts healthcare opportunities in the county.

Reduction in healthcare could also mean a reduction in job opportunities if reimbursement is not available.

The Board of County Commissioners.

Leadership issues such as change in governor.

Lack of trust / respect for government: When change of state leadership occurs it seems that the vision changes. The new vision may be a good one but in this current economy money is spent on strategies that may not be wise when revenue is low and the economy is attempting to recover. I think this is somewhat true at all levels of government county and federal doesn't matter

Leadership change in government.

Lack of diversity in Public government.

There is a lack of trust in government, uncertainty and fear on a national level that is reflected at a local level. Four years with no federal budget passed, uncertainty about how health care reform will affect the doctor- patient relationship and the soaring federal deficit are contributing factors to this fear.

Lack of visibility of local government leaders.

The Washington County Commission.

State and Local political changes always impact the local community but primarily the STATE revisions in taxation and other funding sources.

Political forces are all concentrated around the county seat.

Community (3)

Community attitudes.

Lack of trust.

Community attitudes related to lack of trust in government, lack of respect for law and enforcement.

Community attitudes related t lack of trust in government, lack of respect for law and enforcement.

Education (1)

Implementation of federal "Common Core" curriculum in schools.

Funding (1)

The county is "broke" - doesn't have any money.

Other (1)

I really do not have enough information to answer this question.

8. For the Political Force you identified above, please list the STRENGTHS of Washington County to address or impact this Force. (27)

Government (10)

Local leadership

To Lead, You must listen, to the people you service. Don't be eager to create laws or rules, just for notoriety, but for reason, and consequence. All public officials have the existence to exert a penalty or favor to the ones they lead. Always keep in mind, that the rules you tender and institute are meant for you, also. Do away with mandates, they inhibit justice, because they exclude extenuating circumstances that may effect outcome or justice in a matter.

Washington County has political leaders who assist the community in contacting the state and help with addressing issues.

Only real strength is the Economic Development Council made up of business leaders"

County officials work with the governor's office to identify needs of Washington County

"There is very little strength here as the board stays fractured and can get a plan for the future together

The county seat is the densest populated area of the county.

Ability to recruit fresh faces to the political arena

Generally WC has elected good and conscientious leaders

Good sheriff's department and police department

Community Issues (7)

Small community

The people

Very strong

Hard working

We are building a strong healthcare community with the hospital and the health department, along with primary care and specialists.

There are community groups still interested in bettering our community

The people to help increase voter turnout and education on issues

Education (4)

Knowledgeable staff.

Interest of local citizens and local school board

"Education on"

Dedicated local teachers, health care providers, law enforcement, etc. that will survive any political climate to meet the needs of the citizens of Washington County.

Other (4)

None that I an aware of.

I really do not have enough information to answer this question.

NA

Very little wiggle room here. It is a fact of life.

Voting (2)

People will vote out a Board that displeases them.

Actively participate in political interest groups, citizens advocating for a change in governmental political policies

9. Next, for the Political Force listed above, please identify those WEAKNESSES or THREATS in Washington County that may block attempts to impact this Force. (23)

Government (9)

Need new ideas and someone to really care for the people and our county.
Cohesion, work together to find the solution. Humble, learn to regulate in moderate terms.
Balance; don't burden an economy that is already suffering, without creating an outstanding return in services or goods that enhances pro growth. A governmental body that overlooks these basic terms is due to fail.
Political pressure from government officials.
Those political forces that do not see or make plans for the future.
People that are uneducated on issues but are community leaders.
Government making rules and regulations that are not a help to small rural areas.
You only see them during an election year.
There is no leadership involved with the Commission. Unfortunately they just jump from one debt crisis to another.
Lack of legal authority to make decisions on matters above; lack of funding to provide needed services.
The haves, the good old' boys still have a lot of power.

Community Issues (8)

Drug culture
Not easy to let the needs of the county be known to state officials.
Lack of knowledge by local citizens about the threat of "Common Core" curriculum.
Satisfaction with the status quo.
Time, things move slowly.
Sometimes communities are not aware of issues until they are ready to be passed in the legislature and it is too late to be proactive in support of the community.
The residents that are not located in the Chipley area are not represented equally.
Equal resources and availability of services should be accessible throughout the county

Funding/Money (4)

Funding
Low income.
Lack of funds.
Low tax base. Many people unemployed. Many people receiving transfer payments. Low education level.

Unemployment (2)

No jobs.
High unemployment and insurance coverage. A large number of uninsured that fall through the cracks of assistance in healthcare. This adds a huge amount to the bad debt and charity at the hospital as well as physician offices. There is no assistance from our county for charity and bad debt.

Other (2)

I really do not have enough information to answer this question.
None.

10. Please identify the most IMPORTANT Health Force impacting Washington County at this time. (23)

Smoking/Substance Abuse (13)

Smoking, Drugs, Alcohol usage, poor diets.

Smoking, Alcohol, Drug usage, Teenage Pregnancy.

Smoking (2)

Smoking, Alcohol, Drug use, exposure to toxic chemicals and teenage pregnancy.

Teen Pregnancy.

Obesity, tobacco, alcohol, drugs.

Smoking, Pill use, Alcohol and Drug Use are big problems.

Poor lifestyle choices

Unhealthy living habits - dietary, substance abuse, lack of exercise.

RISK Issues including all those listed, but our community has had several exposures to toxic chemicals relating to drug use and meth labs that result in harm to families.

Teen pregnancy.

Risk Issues especially tobacco and drugs.

Smoking, alcohol, drug use, teenage pregnancy.

Chronic Diseases (6)

Obesity (2)

This county has been recognized as # 65 out of 67 counties in Florida. We have identified several issues that contribute to that number. Obesity and those diseases that occur due to obesity are high volume in this county.

Diabetes.

Access to Dental Care for adults - This is a real concern I know people that would love to have their teeth fixed / improved in order to improve employability.

Access to dental for the aging population.

Healthcare (6)

Obama care and corresponding effect on Medicare and Medicaid.

Medical care and education.

Northwest Florida Community Hospital.

Washington County Health Department.

Inadequate mental health services, especially emergency services/ crisis centers. There is also a need for assisted living facilities for aged, disabled or persons with mental illness. There is a need for more mental health prevention work in the schools.

Dietary (3)

Meals should be healthy, quit offering choices of pizza or a healthy meal. Offer one meal each day sometimes that meal can be pizza or burgers just don't allow it to be the rule.

Need healthier food & snacks in schools.

Dietary issues

Funding (2)

Funding for basic health care.

Lack of Fee based healthcare and dental care is the biggest issues in this County, because of its need due to low income salaries.

Other (1)

I really do not have enough information to answer this question.

11. For the Health Force you identified above, please list the STRENGTHS of Washington County to address or impact this Force. Remember, Strengths may include organizations, resources, people, etc. (23)

Medical/Health (17)

Strong involvement of County Health Department, Family involvement.

Educational programs provide in our public schools with resources from Washington County Health Department, WE CAN! Program, educational resources provided by Northwest Florida Community Hospital.

Organizations for the elderly.

Good local physician's.

Local Health Department.

Good local Health Department.

Availability of a hospital.

Good hospital.

School health, health department and local hospital try to install better eating habits in their clients.

NWFCH has expanded its hospital services to include surgical services, home health, and skilled nursing facility and wound care. The Health Department is probably the best for indigent care.

Availability of contraception at the health department.

Health Dept.

A very active Health department and Hospital.

Community Issues (2)

Risk Issues - Community sees the need and problem.

Food banks.

Education (2)

Chemical Addiction Recovery Effort, School Health, Tobacco Program.

Life Management Center provides outpatient mental health services.

School district can implement.

Other (2)

I really do not have enough information to answer this question.

None noted!

12. Next, for the Health Force listed above, please identify those WEAKNESSES or THREATS in Washington County that may block attempts to impact this Force. These may include one-time occurrences, such as a hospital closure, a natural disaster, or the passage of new legislation or discrete elements, such as a community's large ethnic population, an urban setting, or a jurisdiction's proximity to a major waterway. (23)

Money/Funding (13)

One-time occurrences due to decreased state and federal funding.

Lack of funds, programs being cut back or taken away.

Funding.

Funding.

Funding not sufficient for effective community outreach.

Funding cutbacks have limited emergency mental health services. Medicare cuts are a contributing factor.

Lack of funding for underserved populations.

Lack of funding is the primary weakness for educating the community and students.

Increases in the cost of healthcare.

Lack of resources for people to see health specialist.

Incentive programs that allow medical professionals to operate under State Anonymity, but within approved state Licensure would be a great help in affording Fee Based Services for persons in need. This would enhance the ability to attract affordable healthcare to this area

Passage of new legislature may take away funding, May need more classes for the community involving the effect of smoking, alcohol, and drug use.

Health/Medical(9)

Dental Providers willing to work these clinics

Dietary - Decision makers not willing to upset students and families.

Staff small at health department.

Implementation of Obama care is controlled at Federal and State level.

Obesity relates to low economic status of many citizens, lack of good paying jobs and educational levels.

Expansion of Medicaid will probably not improve health status of recipients.

The location and limited hours (Mon-Fri 8-5) of the County health department limits access for services to many individuals.

Reduction of Medicare reimbursement may result in some local physicians refusing to accept Medicare

School lunches are of very poor nutritional value. There is a large diabetic population in children as well as adults

Education (7)

Poor education on the ability to lead better lifestyles

Apathy within the community and the lack of education to know what changes need to be made.

Limited education regarding good health choices.

Lack of education and importance.

Poorly educated populace. Lack of healthy role models for youth. "Southern" food.

Low socioeconomic level.

Many single parent families, economic costs to improve the programs

Unwillingness of residents to actively participate in the aforementioned programs.

Community Issues (3)

Adults lack of participation in their children's lives and setting a risk free example.

Many kids have one parent and this makes it tough on that one parent to help the children make changes.

Fast food restaurants and all-you-can-eat buffets. Smoking. Teen births. Unwed mothers (and fathers).

Government (2)

Government paper work may result in the leasing of medical services by health suppliers.

Passage of new legislation

The only weakness I see is with chemical and biological hazards. There are not enough decontamination facilities around the county.

Other (1)

I really do not have enough information to answer this question.

13. Please identify the most IMPORTANT Social Force impacting Washington County at this time. (21)

Attitudes/Values (16)

Trust in local hospital.

Family.

Language barriers for Hispanic / Lithuanian populations.

I believe it is apathy within the community to effect positive change.

Perceptions, attitudes.

Only a few people willing to work on issues it the same people most of the time. Most residents don't get involved.

Washington County probably has better extended family structures than more urban counties.

Local families look within for support.

Attitudes and perceptions.

Attitudes of residents, cultural beliefs/attitudes.

Strong religious community support, excellent civic cooperation.

People deciding to return to basic values that our country was founded on.

Cultural shift among youth. There does not seem to be as much respect for the institution of marriage and the family unit. Where teen pregnancies have occurred it does not seem to be viewed as problematic.

The area still does not have access to large grocery stores with a variety of healthy, affordable foods.

Washington County is a dry County.

The most important social force impacting Washington County at this time is no different than anywhere else in America and that is the problem of sin in the human heart. All social issues could be resolved by individuals who first love God and then love their human brothers and sisters as they love themselves.

Attitudes within the school board and education system influence the lack of education awareness and availability of services to prevent teen pregnancy, and STD's

Income/Funds (5)

Low income, low esteem, relying on government resources to provide, lack of motivation to work or further education.

Limited income.

Poor-___ country folks!

Economics--lack of funds

Unemployment, underemployment, low wages.

14. For the Social Force you identified above, please list the STRENGTHS of Washington County to address or impact this Force. Remember, you can list as many STRENGTHS as you like. (21)

Medical/Health (7)

Good health care system.

Providing educational Health Fairs throughout the public school system, in services & educating the public of these concerns.

Education about the hospital.

Strong clinic staff & counseling

Public Health department has resources available.

Free HPV vaccines, education, and contraception.

We have school nurses.

Education(5)

Dedicated school and health professionals.

Good school board.

Good school board.

Washington-Holmes Technical Center. Schools. County agencies.

COA site one day a week providing education, health support meals.

Business (2)

Some local stores are attempting to bring in better quality vegetables and fruits.

Increase revenue to the County.

Unemployment (2)

County govt., needs to step up, get pro growth minded, and start planning to revitalize this rural community, thereby creating ways to allow for, enhancement of jobs and influx of business and population.

Population wanting to work.

15. Next, for the Social Force listed above, please identify those WEAKNESSES or THREATS in Washington County that may block attempts to impact this Force. List as many WEAKNESSES or THREATS as you can. (21)

Community Issues (12)

Many single parent families, Many low-income families.

Lack of motivation

Again, it is apathy within the community. Kids are overweight and parents do not seem to care even when confronted with the issues at hand.

Judgmental mind sets about race, religion, political views anything different from me.

Teen pregnancy.

The inability to present growth plans, seek grants and forecast needs of the population, are a big setback for our present administration.

Lack of transportation.

A large part of the population thinks the government owes them everything they want and need.

Cultural influences such as music, movies, TV are "parenting" more than the parents.

The area is so large and the food stores concentrated in a small area making it difficult for residents to get to them. The high gas prices for the area compared to surrounding areas also impedes residents from being able to make comparative shopping easy.

Washington County Commission refuses to allow it to be voted wet. This inhibits more tourism oriented businesses coming to Washington county.

Religious organizations are often intimidated by non-religious groups such as the

Education (7)

Pressure from outside sources, lack of education, computer literacy.

Sometimes thinking that education may not make a difference in behavior.

Lack of education (2)

Inertia. Poorly educated populace. Not much industry. No infrastructure.

Underutilized school health program

Unavailability of HPV vaccines and contraception within the schools

Funding (5)

Funding. (3)

Local support (financial).

Long term government aid.

Unemployment (4)

Lack of good paying jobs forces best of youth to move away.

Lack of job opportunities.

Uneducated students and parents

Limited education regarding safe sex practices within the school setting.

Faith-Based (1)

ACLU or atheists in the community that try to stop the mention of God in the public arena and squelch the ability of charitable organizations to help or publicize opportunities that could benefit individuals

Other (1)

No major ones.

16. Please identify the most IMPORTANT Technological Force impacting Washington County at this time. (21)

Computers/Access Issues (17)

No County High Tech base

Usage of technology such as the internet, cell phones, technology usage in public school system, industry/healthcare.

Lack of internet.

Being a rural County is the biggest setback to furthering technology. Vast land space with few residents inhibits all but satellite based technologies, at this time.

Technology for the elderly, everyone is using automated phones, computer access for EVERY Agency.

Lack of broadband.

Most residents do not have access to fast internet and that is a deterrent.

Lack of technological training for students needed to meet the needs of today's workforce.

High speed internet brings education into the community.

Cell phones - face book.

Internet.

Lack of rural access to high speed internet.

Wireless Broadband Facilities

Lack of technically savvy populace. We have some savvy people, but most of the population is technically unsophisticated.

Lack of Cell Towers in some remote parts of the county.

Use of social networks within the community.

Education (5)

Vocational school, close by college.

Education of community residents.

Washington Technical Center is an asset.

Technical education opportunity, excellent educational systems in general.

Technology in Education.

Healthcare (4)

Health department, doctor's office.

Telemedicine- remote real time interpretation of x-rays and other diagnostic tools.

Importation of physician specialists to community.

Healthcare.

Other (1)

Unknown.

17. For the Technological Force you identified above, please list the STRENGTHS of Washington County to address or impact this Force. (21)

Education (14)

The ability to train the youth of the county.

It's easy to qualify to get in the voc tech; there are resources available for funding.

Sources thru internet to further education.

Council on aging senior's center, providing educational and health support throughout the Washington County. Variety of speakers from different agencies that provide services throughout the county.

GOODWILL Industries, providing basic computer skill classes.

We do have a vocational training school that can teach the use of technology.

Students not planning on going to college should be required to participate in Vocational Technical training on High School Campuses. I believe the school district would embrace this concept. Many of the classes offered at the Washington / Holmes Technical center could be telecasted. Have a Voc Tech Class that students can be in on the high school campus Another option is make the Vocation Center a High School as well allowing students to complete their diploma on site with a certification in a trade.

Panhandle Area Educational Network (PAEC) supports importation of education for teachers. Washington-Holmes Technical Center. Schools.

Provide a higher degree of access for Washington County Schools and government.

Individuals or groups can take advantage of this.

Computer/Internet (6)

Usage of computers in businesses, training in the workforce, usage of Nooks in public schools.

Local hospital has improving reputation and bringing new physicians facilitates new medical services locally. Telemedicine brings better, quicker local diagnoses.

Communication can be done via face book and students are heavy on it.

Allow for more internet service providers.

The Florida Rural Broadband Alliance, LLC (FRBA)-collaboration of local governments, community activists and economic development agencies from rural and economically disadvantaged communities located throughout 15 counties within Florida's Northwest Rural Area of Critical Economic Concern (NWRACEC) and the South Central Rural Area of Critical Economic Concern (SCRACEC). This organization is working to create the "middle mile" and bring service to rural areas.

Availability of cell phones.

Verizon provides excellent service in most of the county. Opportunity Florida provided an internet grant to assist people with internet connections.

Funding (4)

More funding.

Satellite Tech, has rule over this area at high cost for all. Community Development is the only way to overcome this inequity.

We are working with a grant, FRBA, that would, if completed, bring this opportunity to Washington County

More available resources.

Other (3)

Health Department and local hospital.

Unknown.All of the above.

18. Next, for the Technological Force listed above, please identify those WEAKNESSES or THREATS in Washington County that may block attempts to impact this Force. (21)

Technical issues (7)

No high-tech industry.

Computer not at all sites

Lack of development and forecast planning of growth tends to inhibit collectivizing the populous, so as to gain bargaining power with technological utilities.

Attitudes towards the use of technology.

Our county has very little power to deal with threats that could be introduced by the internet.

Need more cell towers to reach remote areas. Also TV stations are not able to be picked up in several areas.

Student's use of cell phones during the school day. Texting, sexting, and accessing social media sites during classroom instructions. Use of cell phones interfering with customer service at places of business

Education (7)

Educational abilities (reading & writing).

Some residents may not be familiar with the different avenues they may have to get education whether it be from the internet or other social networks.

Negative mind sets that will automatically believe it can't be done or you shouldn't mix youth and adults.

Need for distance learning application to provide higher level learning in community, such as college level classes for high school students or classes not otherwise available in high school such as Latin or Russian or calculus.

Rural setting. Schools. Poorly educated adult population.

Not as much time for 1 on 1 for counseling.

Less interaction.

Funding (5)

MONEY, funding, not enough employees' to cover all of their commitments, no resources for equipment

Funding.

Lack of funds.

May run out of time with the grant to complete the grant and cannot get an extension.

Companies that could provide service are not interested, may not see return on necessary investment

Community/Issues (3)

Transportation.

Apathy on the part of some.

Few doctors that accept Medicaid or Kid Care.

Other (2)

Unknown.

N/A

19. If you do NOT want to receive an email reminder to complete the Forces of Change Assessment, please enter your email here. Your responses will be anonymous – your email will not be linked to your response to the Forces of Change Assessment. (21)

- Emails not included for privacy purposes -

20. Additional comments? (7)

This was way too broad and hard to really understand.

Washington County is a rural area with great potential for growth, and good perspectives, if state and local leaders start forecasting the needs of its citizens and the use of its lands. We have some of the most pristine water front properties in the state, that are not coastline casualty risks, sorely undeveloped, and undervalued.

Thanks for your time helping us.

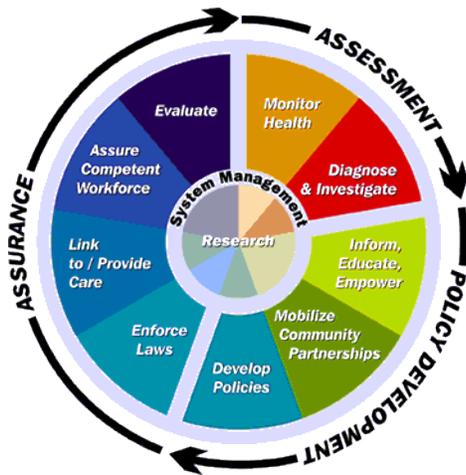
This is a difficult assessment but worthy of serious thought. I hope I have helped.

None.

None.

Good luck.

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From:

<http://www.naccho.org/topics/infrastructure/CHAIP/index.cfm>

The fundamental purpose of public health is defined by three core functions: assessment, policy development and assurance. Community Health Improvement Plans (CHIPs) provide information for problem and asset identification and policy formulation, implementation, and evaluation. CHIPs also help measure how well a public health system is fulfilling its assurance function.

A CHIP is part of an ongoing broad community health improvement process. A community health improvement process uses CHA data to identify priority issues, develop and implement strategies for action, and establish accountability to ensure measurable health improvement, which are often outlined in the form of a Community Health Improvement Plan (CHIP). The Public Health Accreditation Board's (PHAB's) voluntary, national public health department accreditation program is designed to document the capacity of a public health department to deliver the three core functions of public health and the Ten Essential Public Health Services. PHAB requires completion of a CHA and a CHIP as two of three prerequisites to accreditation program application.

