

2016

HEALTHY TETON COUNTY

ANNUAL DATA UPDATE



Healthy Teton County 2016 Annual Data Update

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Community Health Needs Assessment

In May 2015, the Healthy Teton County (HTC) coalition completed a comprehensive community health needs assessment (CHNA) on the health status of Teton County, Wyoming. This project — led by Teton County Public Health (TCPH) and St. John’s Medical Center (SJMC), in partnership with over 35 community organizations — identified and prioritized the primary health issues facing Teton County. After examining both qualitative and quantitative data, the list of key health issues included both traditional clinical indicators as well as social determinants of health. The top 10 health issues are listed below:

1. Access to health services
2. Severe housing
3. Food insecurity
4. Routine screenings
5. Transportation
6. Immunizations for 65+
7. Sexually transmitted infections
8. Smokeless tobacco
9. Radon
10. Youth alcohol use

The full CHNA report, including methodology and results, can be found at www.healthytetoncounty.org.

Community Health Improvement Plan

The HTC coalition is now actively conducting the action phase of our initiative; the first step was to develop community-wide strategies for impacting our local identified health needs. These strategies are summarized in HTC’s Community Health Improvement Plan (CHIP) which can be found at www.healthytetoncounty.org. The CHIP describes the guiding strategic framework and detailed community Action Plans for addressing each of the primary health issues. The CHIP Action Plans were developed by the HTC Action Groups and outline outreach activities that are designed to make the greatest collective impact on our common goals.

Strategic Issue Action Groups

Each HTC Action Group is led by a community expert in the topic area. Action Groups follow a Collective Impact model of implementation which emphasizes a common agenda, shared measurement, and mutually reinforcing activities. Action Groups work to carry out their Action Plans through strategic partnerships, program development, and policy change. Quarterly check-ins allow Action Group leads to stay connected with HTC and track their progress in the implementation of their Action Plans. For a full list of the HTC Action Groups and Action Group leads, reference Appendix A or visit www.healthytetoncounty.org.

INTRODUCTION

Annual Update Overview

This annual data update represents the progress that HTC has made in our first year of implementation, and is intended to: provide analysis of the most recent key indicator data; describe trends in data and identify emerging issues; keep the community informed about progress towards measurement targets set in the CHIP, including the activities and efforts of the HTC coalition and its Action Groups. Complete data tables can be found in Appendix B.

Interpreting the Data

The primary data source used by HTC throughout this initiative has been and will continue to be the County Health Rankings (CHR). CHR is a online resource (www.countyhealthrankings.org) managed by the University of Wisconsin that annually reports on and ranks vital statistics for almost every county in the United States. The rankings are comprised of data from state and national data sets including the Center for Disease Control's Behavioral Risk Factor Surveillance Surveys (BRFSS), and are reliable, valid, and utilized by counties nationwide to assess community health status. CHR also provide data trends for indicators whose data collection methods have remained consistent over time. In this report, trend data will be reported through line charts when available.

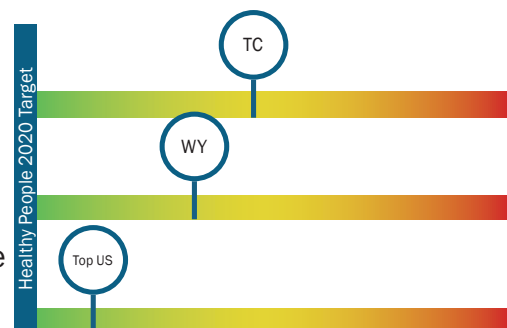
Note that while some data points can be compared year to year, the 2016 BRFSS data collection methods have changed slightly, which means that data reported in 2015 may not be comparable to the data reported in 2016. This discrepancy should be kept in mind for measures that use BRFSS as their data source. Additionally, it is important to point out that although the CHR report data as "2016", the most recent data available is often from 2013 or 2014. Similarly, BRFSS data reported in 2016 is actually describing population statistics from one or two years ago. The data source, including the year the data was collected, is listed for every indicator reported in this document.

This lag in the release of data is important to keep in mind as we track the HTC Action Groups' progress and report on key indicators; the work we are doing presently in 2016 to improve Teton County's health measures will not be reflected in the standardized data until approximately 2018. In order to complement this delay, each HTC Annual Update Report will describe the activities of our Action Groups, including important process measures whenever possible.

The CHIP report published in November 2015 described specific action plans for each Action Group and set target measures for each health indicator. These target measures were based on Healthy People 2020 (HP2020) goals; HP2020 is a federal program focused on, "providing science-based, 10-year national objectives for improving the health of all Americans." HP2020 will be used in this document to compare Teton County to national targets.

Data Key

2016 data will be displayed through a graphic like the one shown at right. Each image will list data for Teton County (TC), Wyoming (WY), and the top performing counties (90th percentile and above) in the United States (Top US) in large circles along a gradient bar. Markers closer to the green end indicate high performing measures while markers closer to the red end indicate lower performing measures. HP2020 target measures, when available, will be indicated by a vertical blue bar.





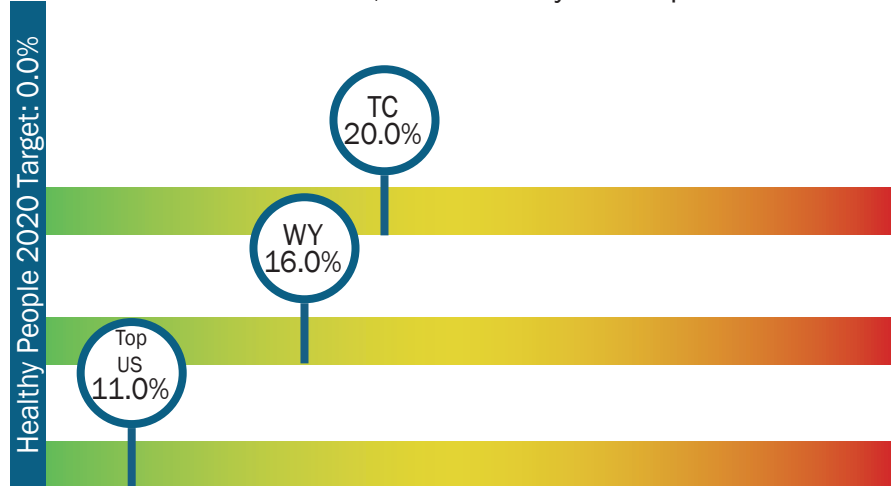
DATA UPDATE

Priority Area 1: Access to Health Services

Current Status

Access to health services was identified as the primary health issue in Teton County due to high uninsured rates, cost as a barrier to care, and focus groups and a community survey which identified cost and access to health services as prevalent issues for community members. In 2016, the reported uninsured rate for adults between the ages of 18 and 60 was 20.0% as compared to 16.0% in Wyoming. The top performing counties in the United States reported an average uninsured rate of 11.0%.

Adult Uninsured Rate, Teton County Data Update 2016

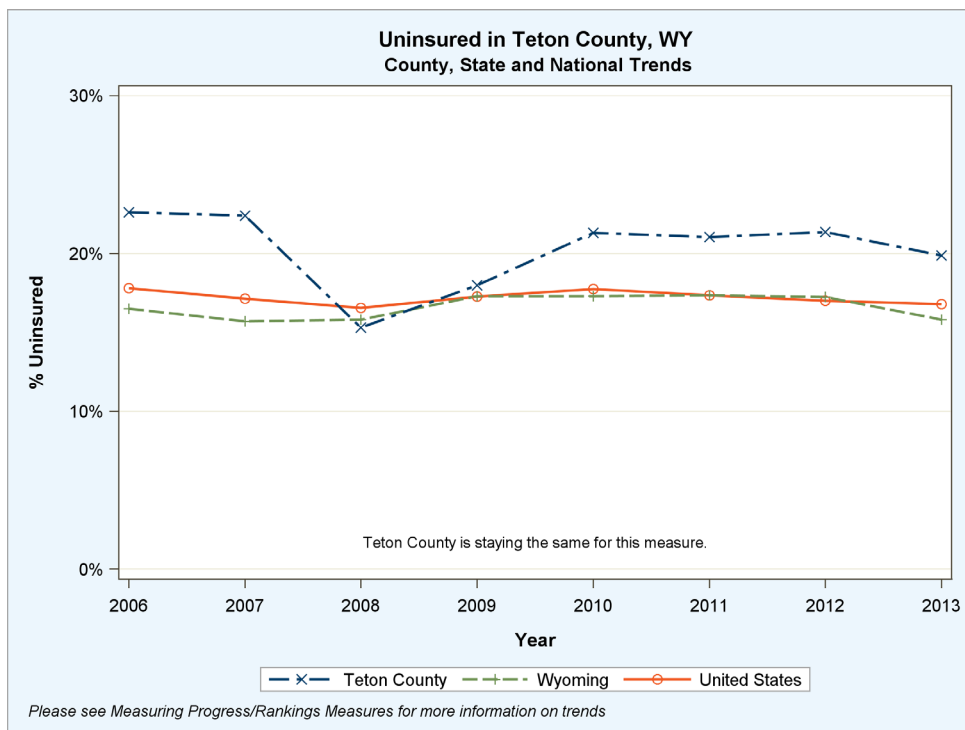


Data Trends

Teton County Access to Health Services Key Measures, 2014-2016				
Indicator	2014 Baseline	2015 Data	2016 Data	Target Measure
Uninsured Adults (Residents between the ages of 18 and 60 that were uninsured)	21.0% Data Source: CHR, Small Area Health Insurance Estimates 2011	21.0% Data Source: CHR, Small Area Health Insurance Estimates 2011	20.0% Data Source: CHR, Small Area Health Insurance Estimates 2013	0.0% Source: HP2020
Cost as a Barrier to Doctor Visits (Teton County adults reporting being unable to see a doctor due to cost)	11.0% Data Source: CHR, BRFSS 2006-2012	11.0% Data Source: CHR, BRFSS 2006-2012	No data collected	9.0% Source: HP2020
Uninsured Children (Percentage of the population under age 19 that has no health insurance coverage)	13.0% Data Source: US Census Bureau's Small Area Health Insurance Estimates 2011	13.0% Data Source: US Census Bureau's Small Area Health Insurance Estimates 2012	12.0% Data Source: US Census Bureau's Small Area Health Insurance Estimates 2013	0.0% Source: HP2020

DATA UPDATE

Trend data over time indicates that the Teton County uninsured rate is remaining statistically constant.



Community Actions

SJMC has led the efforts to improve access to health services in Teton County and has focused its efforts on Affordable Care Act navigation and pursuit of a grant to explore the feasibility of a local community health center.

In 2015, Teton County was recognized by the state for enrolling the highest percentage of its population - 2,722 individuals or approximately 11% - in Affordable Care Act (ACA) insurance plans. Again, in 2016, Teton County led the state - this time, with 2,812 residents, or 12% of its population enrolling in Marketplace plans. ACA navigation efforts have sprung from a partnership between the Teton County Library and SJMC. Six certified Marketplace navigators work in the community and bilingual navigation is available throughout the year. Increasing the number of insured adults and children carries dual benefits - while clearly reducing the number of residents who are uninsured, it also carries the added benefit of reducing cost as a barrier to care. Many of the ACA marketplace plans have low cost primary care visits as a benefit of the plan and many preventive services are available at no cost to the participant.

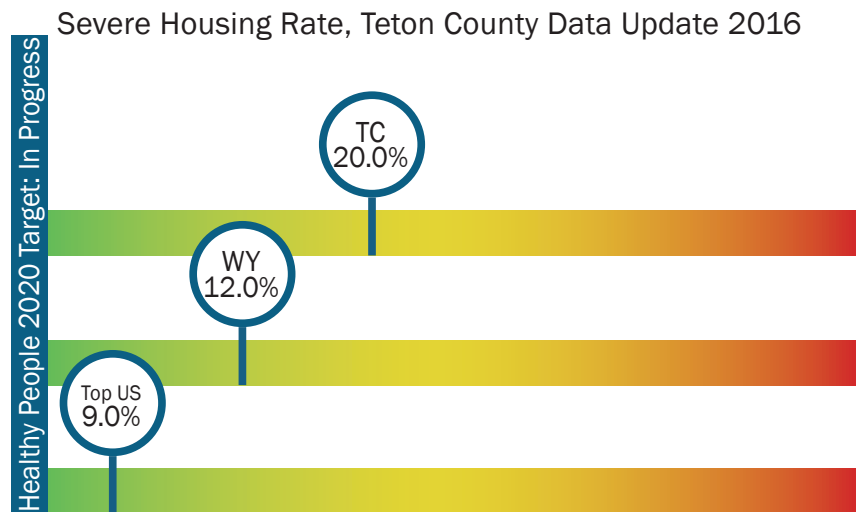
St. John's Hospital Foundation also continues to expand its financial assistance to patients with the Women's Health Care Fund, Oncology Patient Support Fund, Diabetes Fund and the Stroke and Cardiac Funds. These funds assist low-income, uninsured patients with preventive services and medical intervention necessary for diagnosed conditions.

In 2016, SJMC worked in close collaboration with the St. John's Hospital Foundation to secure a grant for \$200,000 from the Wyoming Primary Care Association to explore the feasibility of establishing a Federally Qualified Health Center (FQHC) in Teton County. While the financial feasibility study indicated that a FQHC would run at a significant loss in Teton County (due to challenges with payor mix and patient volumes), SJMC is now investigating whether a rural health clinic model would be more appropriate and financially feasible in this community.

Priority Area 2: Severe Housing

Current Status

CHR defines severe housing as, “A household that has one or more of the following: housing unit lacks complete kitchen facilities; lacks complete plumbing; severely overcrowded (1.5 persons or more per room); severely cost burdened (monthly costs including utilities exceeding 50% of monthly income.” The 2016 CHR reported that 20.0% of Teton County residents experience severe housing, compared to 12.0% in Wyoming. The top performing counties in the United States reported an average severe housing rate of 9.0%.



Data Trends

Teton County Severe Housing Key Measures, 2014-2016				
Indicator	2014 Baseline	2015 Data	2016 Data	Target Measure
Severe Housing (Percentage of the population reporting severe housing)	20.0% Data Source: CHR, US Census Bureau Comprehensive Housing Affordability Strategy Database, 2006-2010	19.0% Data Source: CHR, US Census Bureau Comprehensive Housing Affordability Strategy Database, 2007-2011	20.0% Data Source: CHR, US Census Bureau Comprehensive Housing Affordability Strategy Database, 2008-2012	In Development Source: HP2020

No trend charts were available for this indicator.

Community Actions

The Severe Housing Action Group members have focused on promoting community involvement in the public planning process, including local housing policy initiatives and the Housing Action Plan that was developed in collaboration by the Town of Jackson and the Teton County Government along with local stakeholders. In order to avoid duplication of efforts, the Severe Housing Action Group intends to support the current efforts underway.

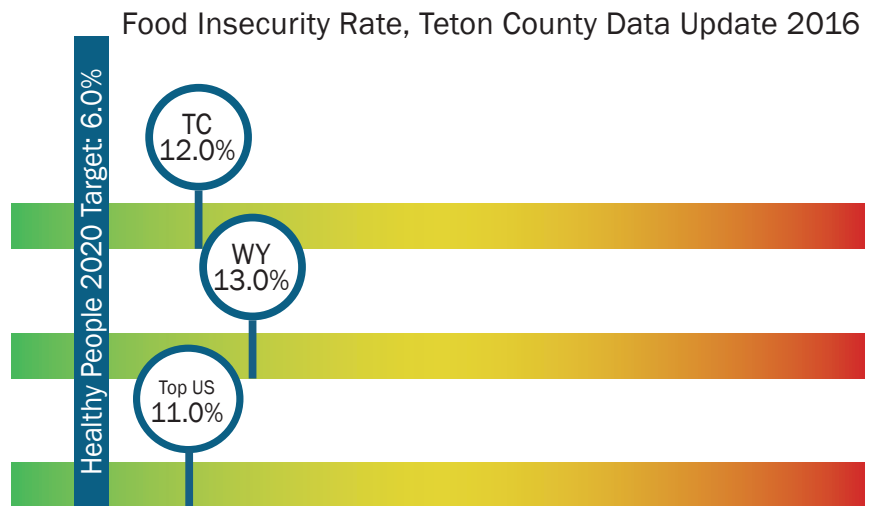
A major action of this group was conducting a Collective Impact and Advocacy training for community partners in October 2015. This training, in partnership with the Jackson Hole Conservation Alliance, provided attendees with information about how to effectively advocate for issues of interest. The Severe Housing Action Group will continue to engage with the newly-formed Jackson/Teton County Regional Housing Authority and the Jackson/Teton County Affordable Housing Department as the community conversations around housing solutions continue.

DATA UPDATE

Priority Area 3: Food Insecurity

Current Status

Food insecurity is defined by Feeding America as “Lack of access, at times, to enough food for an active, healthy life for all household members, and limited or uncertain availability of nutritionally adequate food.” Food Insecurity was included on the Top 10 list due to this issue’s broad impacts on the health of the community. County Health Rankings reported a 12.0% food insecurity rate in Teton County for 2016. Wyoming reported 13.0% and the top US performers indicate a rate of 11.0%.



Data Trends

Teton County Food Insecurity Key Measures, 2014-2016				
Indicator	2014 Baseline	2015 Data	2016 Data	Target Measure
Food Insecurity (Percentage of population who lack adequate access to food.)	14.0% Data Source: Map the Meal Gap, Feeding America 2011	13.0% Data Source: Map the Meal Gap, Feeding America 2012	12.0% Data Source: Map the Meal Gap, Feeding America 2013	6.0% Source: HP2020
Children Eligible for Free Lunch (Teton County children eligible for free or reduced lunch programs)	27.2% Data Source: Wyoming Department of Education 2014-2015 school year	No Data	25.0% Data Source: Teton County School District Food Service 2015-2016 school year	N/A

No trend charts were available for this indicator.

Community Actions

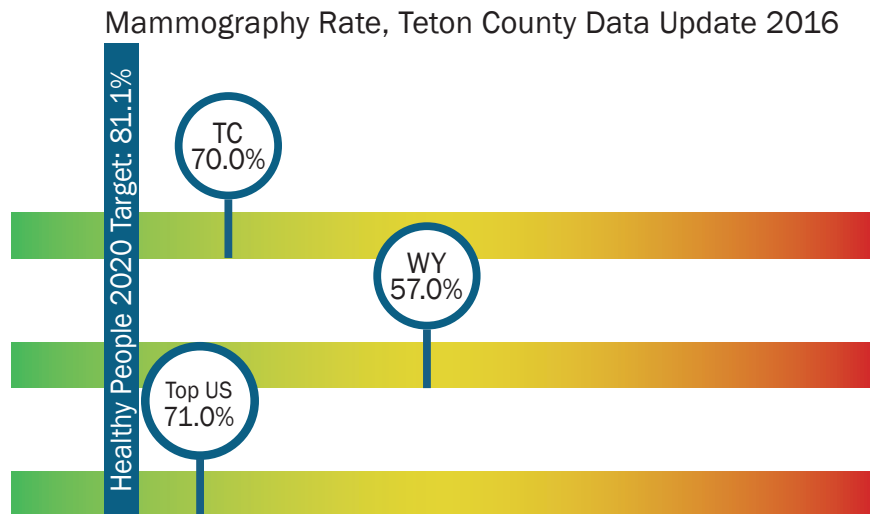
The Food Insecurity Action Group has made substantial progress on a number of their action plan goals. One of the major successes was the development of a local food map that delineates all of the programs where individuals and families in need can access nutritional resources. This food map will be distributed to local social service agencies and posted in visible locations around Teton County such as the START buses and community bulletin boards. In addition, a collaboration with The Food Bank of the Rockies allowed a large food distribution event to occur in June 2016.

This Action Group has also identified community education as a priority, and has conducted cooking classes for select populations in partnership with the University of Wyoming Extension, Hole Food Rescue, and Beyond Broccoli, among others.

Priority Area 4: Routine Screenings

Current Status

The routine screenings priority area is made up of three types of screenings: mammography, colonoscopy/sigmoidoscopy, and diabetic monitoring. This category was included in the Top 10 due to Wyoming's low screening rate and due to Teton County's rate being below the HP2020 goal of 81.1%. In 2016, the Teton County mammography rate for Medicare recipients was 70.0%, as compared to 57.0% in Wyoming and 71.0% for the top US performers. The table below gives a full data summary of all screening types.

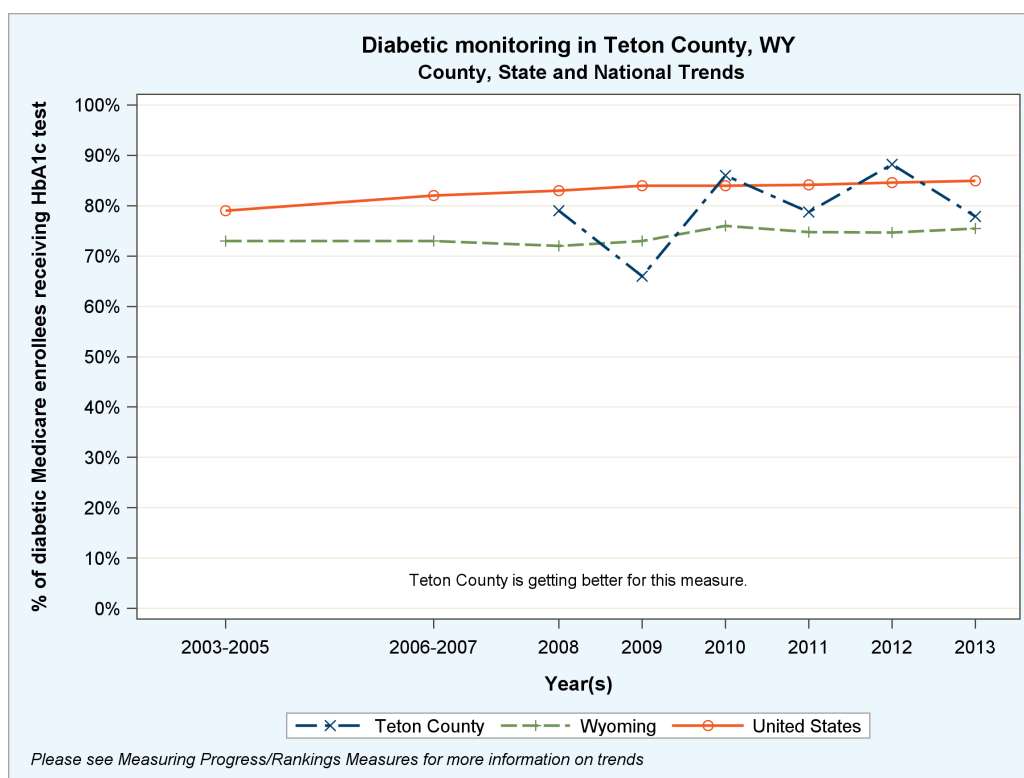
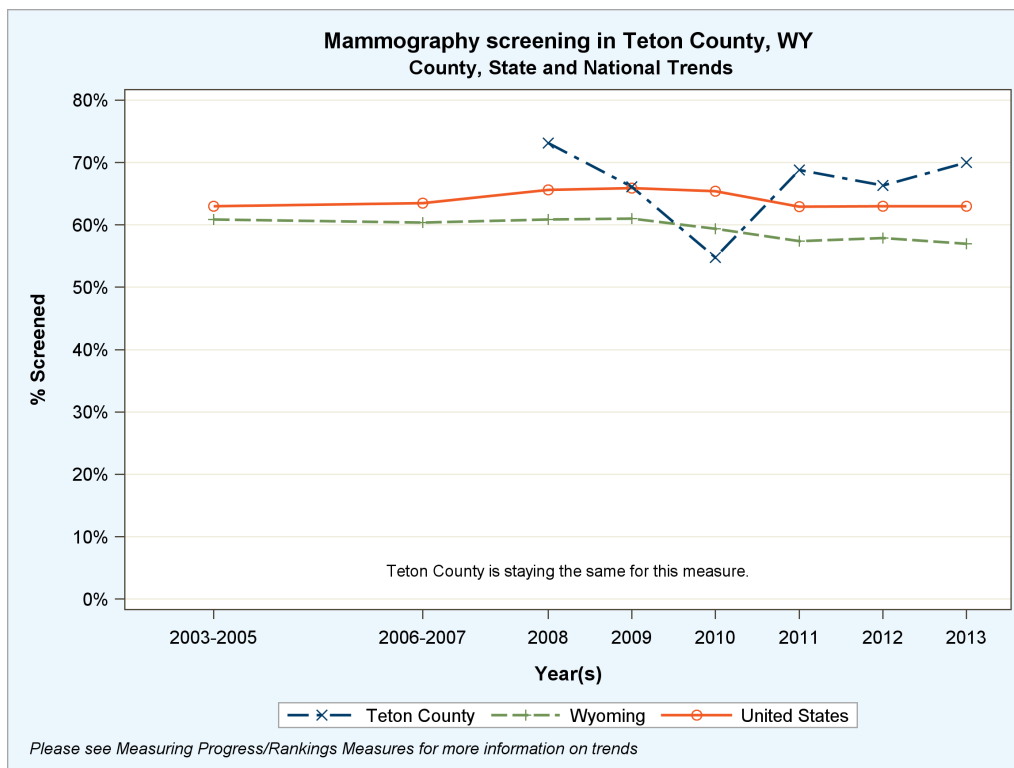


Data Trends

Teton County Routine Screenings Key Measures, 2014-2016				
Indicator	2014 Baseline	2015 Data	2016 Data	Target Measure
Medicare Recipient Mammography Screening (Percentage of female fee-for-service Medicare enrollees age 67-69 that had at least one mammogram over a two-year period)	68.8% Data Source: CHR, Dartmouth Atlas of Health Care 2011	66.3% Data Source: CHR, Dartmouth Atlas of Health Care 2012	70.0% Data Source: CHR, Dartmouth Atlas of Health Care 2013	81.1% Source: HP2020
Mammography Screening (Teton County females 50 to 74 years of age)	75.7% Data Source: Wyoming Behavioral Risk Factor Surveillance Survey 2007-2011	No Data	No Data	81.1% Source: HP2020
Colorectal Screening (Percentage of Teton County adults aged 50 and over who reported ever receiving a sigmoidoscopy or colonoscopy)	66.3% Data Source: US Census Bureau's Small Area Health Insurance Estimates 2011	No Data	No Data	0.0% Source: HP2020
Diabetic Monitoring (Percentage of diabetic Medicare enrollees ages 65-75 that receive blood glucose monitoring)	79.0% Data Source: CHR, Dartmouth Atlas of Health Care 2011	88.0% Data Source: CHR, Dartmouth Atlas of Health Care 2012	78.0% Data Source: CHR, Dartmouth Atlas of Health Care 2013	N/A

DATA UPDATE

Trend data over time indicates that the Teton County mammography and diabetic monitoring screening rates are remaining relatively constant. No colonoscopy chart was available.



Community Actions

SJMC had led the community in efforts to promote routine screenings.

Colorectal Screenings: SJMC's efforts to increase colorectal screenings have included marketing, education, and increasing awareness of the financial resources available to assist with the cost of these screenings. During FY 2016, the SJMC marketing team designed a dedicated page for its public website with patient education about colonoscopies and scheduling opportunities; this page will "go live" in FY 2017.

Education by providers about routine screenings has occurred at events such as Walk with a Doc, Dinner with a Doc and community talks in adjacent counties. In addition, at the 2016 annual Community Health Fair (attended by 1000+ Teton County residents), staff members, including a general surgeon, distributed information about colonoscopies and answered residents' questions. Information was also available about financial assistance opportunities available for colorectal screenings through the Wyoming Colorectal Cancer Screening Program, the SJMC patient assistance program and the St. John's Hospital Foundation Women's Healthcare Fund.

In addition, in FY16, SJMC began providing gastroenterology services with a board certified gastroenterologist. In addition to office consultations for gastrointestinal issues, this provider also performs routine colonoscopies and endoscopic procedures.

Mammography: SJMC has focused on financial barriers, community education, and facility capacity in its efforts to increase the percentage of Teton County women who meet screening requirements for mammograms.

Over the last year, SJMC sought to increase awareness in the community about the availability of financial assistance for mammograms from the St. John's Hospital Foundation Women's Health Care Fund. Information about this program, including applications whenever possible, has been distributed to women's health clinics, our medical translation service, local social service offices and key departments within the hospital. Further, information about the Women's Health Care Fund reached community members during October (Breast Cancer Awareness Month) through the Dine to Donate initiative, Dine for a Cause program and the Fine Dining Featured Nonprofit fund. Information about the fund was also distributed during the spring at the annual SJMC Community Health Fair.

Community education about screening recommendations for mammograms has also been completed this fiscal year. In fall 2015, SJMC joined with regional medical centers to launch the Teton Pinky Promise – an initiative to increase awareness about the importance of screening mammography and compliance with screening recommendations. More information can be viewed at: tetonpinkypromise.com. Information about Teton Pinky Promise was distributed to all residents in Teton County, WY, Teton County, ID, Alpine, WY and Dubois, WY in the Fall 2015 Health Matters newsletter.

Further education about mammography occurred in October 2015, at the annual SJMC "Light the Town Pink" event. Close to 200 community members attended; each received a 'goodie bag' with information about screening mammography and SJMC's breast cancer services.

Breast Tomosynthesis: SJMC's mammography staff often operates at capacity, with October historically being the busiest month for mammograms. In 2016, SJMC purchased a breast tomosynthesis mammography machine that provides 3D imaging and superior image quality to 2D mammography.

DATA UPDATE

Tomosynthesis is recognized for detecting more early-stage cancers than 2D mammography.

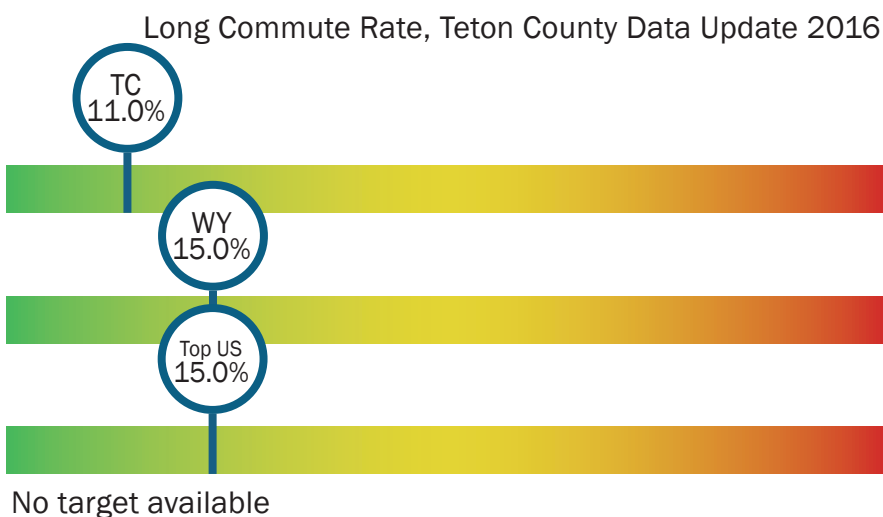
In addition, SJMC's new tomosynthesis machine will assist with alleviating capacity issues with scheduling mammograms by reducing the duration of many appointments (both diagnostic and biopsy).

Diabetes: The SJMC Diabetes Self-Management Program continues to provide low-cost or no-cost A1c screening to community members on a walk-in basis throughout the year. In addition, the program offered two screening days for community members in November 2015 (Diabetes Awareness Month). Further, community members were educated and screened for diabetes, at no cost, at the annual Health Fair. Those at-risk for diabetes are always referred to the Diabetes Self-Management Program for further consultation.

Priority Area 5: Transportation

Current Status

Transportation is associated directly with health status due to its impacts on social, physical, mental, and environmental health. For example, driving along on a commute longer than 30 minutes is associated with negative health outcomes. In 2016, 11.0% of Teton County residents reported driving alone for 30 minutes or more to work. This percentage is slightly lower than Wyoming and the top US performers at 15.0%.



Data Trends

Teton County Transportation Key Measures, 2014-2016				
Indicator	2014 Baseline	2015 Data	2016 Data	Target Measure
Driving Alone - Long Commute (Percentage of commuters, among those who commute to work by car, truck, or van alone, who drive longer than 30 minutes to work each day)	12.0% Data Source: CHR, American Community Survey 5-year Estimates 2008-2012	11.0% Data Source: CHR, American Community Survey 5-year Estimates 2009-2013	11.0% Data Source: CHR, American Community Survey 5-year Estimates 2010-2014	N/A
Driving Alone to Work (Driving Alone to Work is the percentage of the workforce that usually drives alone to work.)	62.0% Data Source: CHR, American Community Survey 5-year Estimates 2008-2012	64.0% Data Source: CHR, American Community Survey 5-year Estimates 2009-2013	63.0% Data Source: CHR, American Community Survey 5-year Estimates 2010-2014	N/A

No trend charts were available for this indicator.

Community Actions

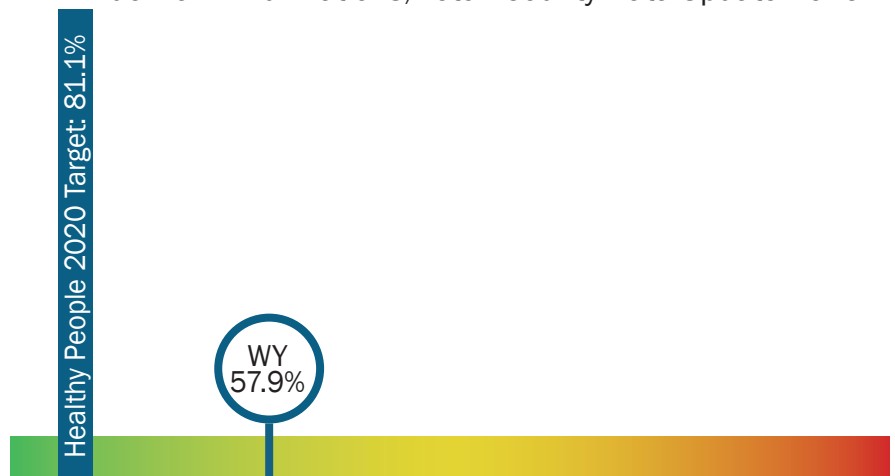
The Transportation Action Group has focused on engaging community partners in conversations about the connection between health and transportation. In tandem, Age Friendly Jackson Hole (AFJH), an independent advocacy group created after a series of senior focus groups during the initial HTC community health needs assessment, has been working to promote transportation options for those with limited mobility. Initiatives of AFJH include creating a easily readable public transportation flier, placement of ski poles to assist with crossing icy streets during winter, and mapping handicapped parking spaces in the Town of Jackson.

Priority Area 6: Immunizations for 65+

Current Status

Individuals over 65 years of age are members of a population that is vulnerable to common illnesses such as influenza and pneumonia. This measure was included in the Top 10 list due to Teton County's low immunization rates among those over 65 years of age as compared to the Healthy People 2020 target. 2016 data was only available for the state of Wyoming; Teton County data had not yet been released as of this document's publication date. A summary of the available immunization data is provided below.

Influenza Immunizations, Teton County Data Update 2016



Data for Teton County and Top US Performers not available.

DATA UPDATE

Teton County Immunizations for 65+ Key Measures, 2014-2016				
Indicator	2014 Baseline	2015 Data	2016 Data	Target Measure
Influenza Immunizations, 65+ (Percentage of adults aged 65 years or older that received an influenza immunization in the past 12 months)	49.3% - Teton County Data Source: Wyoming Behavioral Risk Factor Surveillance System 2007-2011	No Data	No Data	90.0% Source: HP2020
Pneumococcal Immunizations, 65+ (Percentage of adults aged 65 years or older that received a pneumococcal immunization in the past 12 months)	60.1% - Teton County Data Source: Wyoming Behavioral Risk Factor Surveillance Survey 2012	No Data	No Data	90.0% Source: HP2020

No trend charts were available for this indicator.

Community Actions

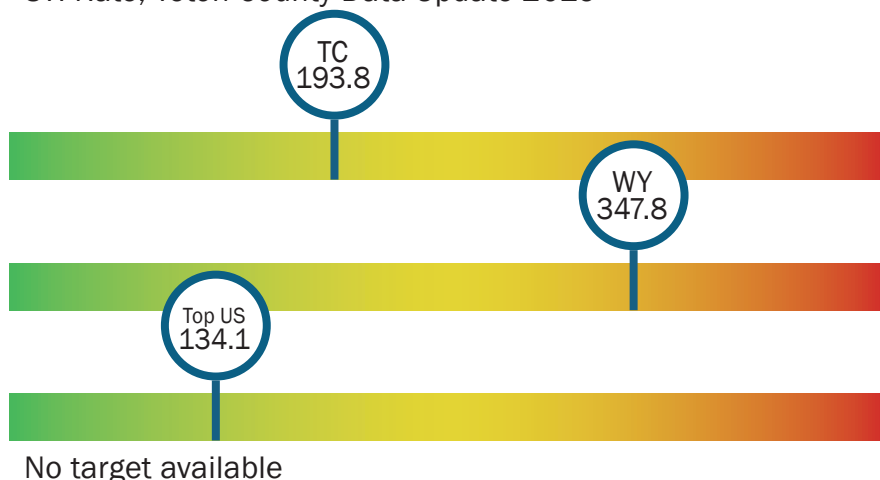
The Immunizations for 65+ Action Group, led by TCPH, has conducted a number of community outreach efforts. Recent initiatives include: running promotional ads for influenza and pneumococcal immunization clinics; writing a newsletter article for the Senior Center of Jackson Hole; increasing walk-in immunization clinic times; hosting an immunization clinic at the Senior Center of Jackson Hole; and participating in the Senior Resources Fair at the Library by administering immunizations in conjunction with a local pharmacy. TCPH also provided referrals to other providers for high dose influenza and pneumococcal immunizations when unavailable at TCPH. TCPH purchased additional doses of the pneumococcal vaccine to accommodate demand and maintained a wait list with plans to alert patients of a special walk-in clinic.

Priority Area 7: Sexually Transmitted Infections

Current Status

The indicator used to estimate the presence of Sexually Transmitted Infections (STIs) is chlamydia incidence per 100,000 population. STIs were selected as a priority issue in Teton County due to a historical upward trend in this measure over the past eight years. Data released in 2016 indicates that Teton County's rate of 193.8 cases per 100,000 is higher than the top US performers (134.1 cases per 100,000) but lower than the STI rate in Wyoming which is 347.8 cases per 100,000.

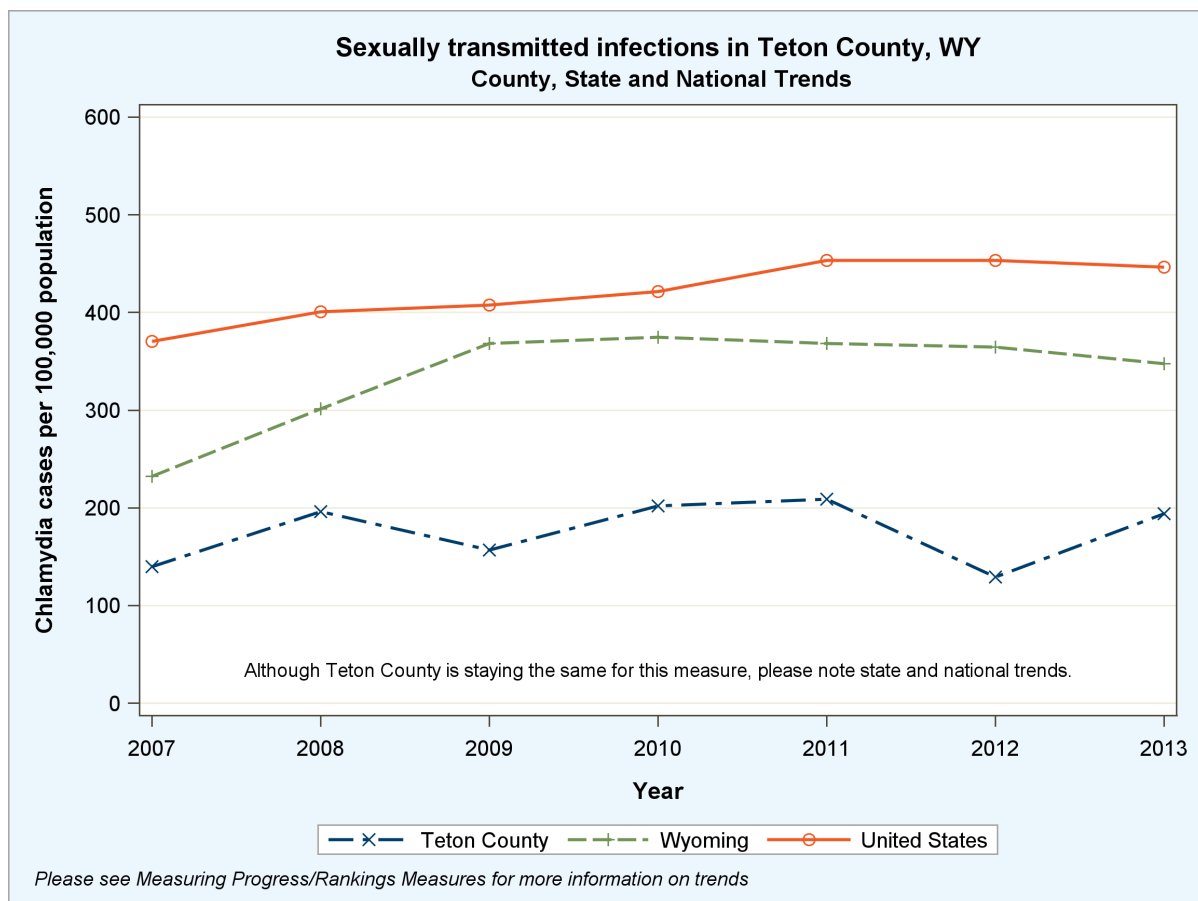
STI Rate, Teton County Data Update 2016



Data Trends

Teton County Sexually Transmitted Diseases Key Measures, 2014-2016				
Indicator	2014 Baseline	2015 Data	2016 Data	Target Measure
STI Infections (Chlamydia incidence (number of new cases reported) per 100,000 population)	209/100,000 Data Source: CHR, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention 2011	129/100,000 Data Source: CHR, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention 2012	193.8/100,000 Data Source: CHR, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention 2013	N/A

Trend tables indicate that this measure is staying the same in Teton County.



Community Actions

TCPH has increased screening, treatment, and prevention activities around STIs, with the primary focus on young adults. A school-based sexual health curriculum was adopted by Teton County School District (TCSD) and a facilitator training was completed by TCPH and TCSD staff. Additionally, a resource card for adolescents has been updated, and Summit High School was added to the school-based education program. An adolescent development presentation by the Wyoming Department of Health was held at TCPH with representation from multiple agencies.

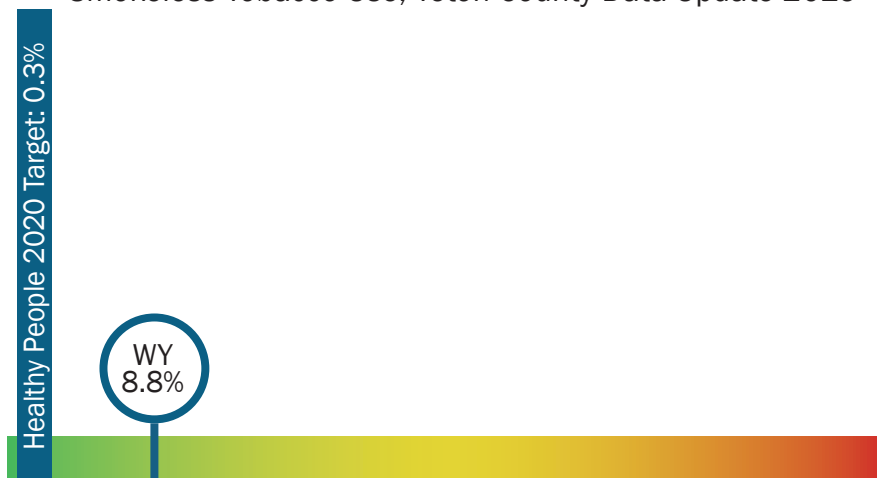
DATA UPDATE

Priority Area 8: Smokeless Tobacco Use

Current Status

Smokeless tobacco use is associated with oral health issues, cancer, and other health problems. Products in this category include chewing tobacco, snuff, snuss, and dissolvable products. 2016 data was only available for the state of Wyoming; Teton County data had not yet been released as of this document's publication date. A summary of the available immunization data is provided below.

Smokeless Tobacco Use, Teton County Data Update 2016



Teton County Smokeless Tobacco Use Key Measures, 2014-2016

Indicator	2014 Baseline	2015 Data	2016 Data	Target Measure
Smokeless Tobacco Use (Percentage of males and females that reported using smokeless tobacco products)	9.0% - Teton County Data Source: Wyoming Behavioral Risk Factor Surveillance System 2013	No Data	No Data	0.3% Source: HP2020

No trend charts were available for this indicator.

Community Actions

Outreach around tobacco use has been conducted in conjunction with Priority Area 10, youth alcohol use. This joint action group is working to promote the adoption of smoke-free and vape-free ordinances in the Town of Jackson. The Teton County Alcohol and Tobacco Coalition meets monthly and is facilitated by the Prevention Management Organization of Wyoming - Teton County.

Priority Area 9: Radon

Current Status

Radon is a odorless, tasteless, and invisible gas produced by the decay of naturally occurring uranium in soil and water. This gas is a form of ionizing radiation and a proven carcinogen. Radon has shown to be prevalent in the Greater Teton Area. In 2014, 36.0% of home radon tests purchased through Teton County Public Health detected elevated radon levels (greater than 4 picocuries per liter); 40.0% of home radon tests detected elevated levels in 2015.

High Radon Rate, Teton County Data Update 2016



Data Trends

Teton County Radon Key Measures, 2014-2016				
Indicator	2014 Baseline	2015 Data	2016 Data	Target Measure
High radon levels (Percentage of home radon test kits that detected radon levels over 4 picocuries per liter)	35.0% Data Source: Teton County Public Health 2014	40.0% Data Source: Teton County Public Health 2015	No Data	N/A

No trend charts were available for this indicator.

Community Actions

The Radon Action Group has focused on raising awareness about radon within Teton County. Multiple events during January, which is Radon Awareness Month, provided opportunities to educate the community about the dangers of radon, how to test for radon, and radon mitigation options. Action group members presented at the January Lunchtime Learning which was hosted by SJMC at the Teton County Library, participated in a panel discussion as a part of Teton County's Sustainability Series, conducted a radio interview, and shared information about radon via social media.

TCPH staff also staffed booths at the Home Show and Eco Fair in 2016 in order to continue outreach and education efforts within the community.

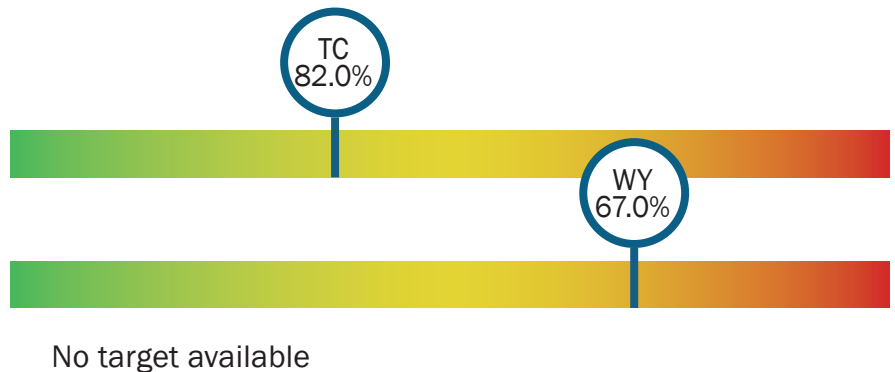
DATA UPDATE

Priority Area 10: Youth Alcohol Use

Current Status

Youth alcohol use indicators are taken from the Wyoming Prevention Needs Assessment. Data reported for the initial HTC community health needs assessment in 2014 were collected in 2012; data reported in 2016 describe data collected in 2014. The measures describe the percentage of youth in the stated grade that reported ever having used alcohol or marijuana.

12th Grade Alcohol Use, Teton County Data Update 2016



Teton County Youth Substance Use Key Measures, 2014-2016

Indicator	2014 Baseline	2015 Data	2016 Data	Target Measure
8th grade alcohol use	42%	No Data	26%	N/A
10th grade alcohol use	73%	No Data	74%	N/A
12th grade alcohol use	81%	No Data	82%	N/A
10th grade marijuana use	39%	No Data	46%	N/A
12th grade marijuana use	45%	No Data	53%	N/A

No trend charts were available for this indicator.

Community Actions

The Youth Alcohol Use Action Group is conducted as part of the Teton County Alcohol and Tobacco Coalition. This group meets monthly and is facilitated by the Prevention Management Organization of Wyoming - Teton County. Outreach around youth alcohol use has focused on making recommendations to the Town Council for ordinance changes that address underage drinking and over serving. Complementary efforts to raise awareness about the prominence of alcohol at community social events have received attention in local media.



CONTINUED DATA SURVEILLANCE AND EMERGING ISSUES

DATA SURVEILLANCE

Continued Surveillance & Emerging Issues

Along with the top 10 prioritized health needs, the 2015 CHNA also highlighted a number of measures in which Teton County was performing at or near the top 10% of counties in the United States. These indicators were evidence of a healthy population and were selected for annual monitoring in order to track Teton County's ongoing progress. The positive health indicators selected by the HTC Steering Committee in 2015 are listed below:

Positive Health Indicators in Teton County, WY from the 2015 CHNA Report

- » Cancer incidence and mortality
- » General health status
- » Mental health
- » Obesity and diabetes rates
- » Physical activity
- » Prenatal care
- » Quality of life
- » Smoking rate
- » Suicide rate
- » Teen birth rate

The status of these indicators for 2014 (the year CHNA data was collected), 2015, and 2016 are listed in the table on page 20. Again, note that the years that the data were reported do not necessarily correspond with the years that the data was collected. For data sources, including years, reference Appendix B.

Key



When reading the table at right, note that the status graphics indicate observations and not statistical analyses. The following symbols will help guide your interpretation of the data:

Getting better: 

Staying the same: 

Getting worse: 

DATA SURVEILLANCE

Teton County Health Indicators - Ongoing Monitoring										
Indicator		Teton County			Top US			WY		
		2016	2015	2014 CHNA	2016	2015	2014 CHNA	2016	2015	2014 CHNA
Poor or fair health (BRFSS)		11%	6%	6%	12%	10%	10%	14%	13%	13%
Poor physical health days (BRFSS)		3	2.1	2.1	2.9	2.5	2.5	3.3	3.2	3.2
Frequent physical distress		9%	n/a	n/a	9%	n/a	n/a	10%	n/a	n/a
Poor mental health days		3	2.3	2.3	2.8	2.3	2.4	3.3	3.2	3.2
Frequent mental distress		9%	n/a	n/a	9%	n/a	n/a	10%	n/a	n/a
Diabetes prevalence		7%	4%	4%	9%	8%	8%	8%	8%	8%
Adult obesity		13%	13%	13%	25%	25%	25%	27%	26%	26%
Physical inactivity		11%	12%	11%	20%	20%	21%	23%	23%	23%
Access to exercise opportunities		98%	97%	94%	91%	92%	85%	65%	68%	57%
Low birthweight		6%	6.3%	6.7%	6%	5.9%	6.0%	9%	8.6%	8.6%
Adult smoking		15%	10%	10%	14%	14%	14%	20%	20%	20%
Teen births		23	27	31	19	20	20	40	42	43
Cancer incidence	No data available			412.4			443.7			428.1
Cancer mortality	No data available			124.2			168.5			158.5

DATA SURVEILLANCE

Areas to Explore

Additional areas to explore indicated by CHR as potential future health problems (that are not currently included in the HTC Top 10 or Ongoing Monitoring lists) include: Adult Smoking, Excessive Drinking, and Violent Crime. These will be added to the Ongoing Monitoring list for future Annual Updates and will be explored more deeply through additional data analyses. A brief data overview of these three indicators is below.

Teton County Emerging Issues 2016				
Indicator	2014 Baseline	2015 Data	2016 Data	Target Measure
Adult Smoking (Percentage of the adult population that currently smokes every day or most days and has smoked at least 100 cigarettes in their lifetime)	10.0% Data Source: CHR, BRFSS 2006-2012	10.0% Data Source: CHR, BRFSS 2006-2012	15.0% Data Source: CHR, BRFSS 2014	12.0% Source: HP2020
Excessive Drinking (Percentage of adults reporting binge or heavy drinking)	21.0% Data Source: CHR, BRFSS 2006-2012	21.0% Data Source: CHR, BRFSS 2006-2012	22.0% Data Source: CHR, BRFSS 2014	25.4% Source: HP2020
Violent Crime (Number of reported violent crime offenses per 100,000 population)	264/100,000 Data Source: CHR, Uniform Crime Reporting 2009-2011	299/100,000 Data Source: Data Source: CHR, Uniform Crime Reporting 2010-2012	299/100,000 Data Source: Data Source: CHR, Uniform Crime Reporting 2010-2012	N/A



APPENDICES

APPENDICES

A: ACTION GROUP DETAILS

Action Group	Contact Information
Access to Health Services	Julia Heemstra St. John's Medical Center jheemstra@tetonhospital.org
Severe Housing	Mary Erickson Community Resource Center mary@crcjh.org
Food Insecurity	Jordan McCoy University of Wyoming Extension jmccoy@tetonwyo.org
Routine Screenings	Julia Heemstra St. John's Medical Center jheemstra@tetonhospital.org
Transportation	Jodie Pond Teton County Public Health jodie.pond@wyo.gov
Immunizations for 65+	Janet Garland Teton County Public Health jgarland@wyo.gov
Sexually Transmitted Infections	Janet Garland Teton County Public Health jgarland@wyo.gov
Smokeless Tobacco	Matt Stech Prevention Management Organization of Wyoming - Teton County mstech@pmowyo.org
Radon	Eric Baird Teton County Public Health eric.baird@wyo.gov
Youth Alcohol Use	Matt Stech Prevention Management Organization of Wyoming - Teton County mstech@pmowyo.org

APPENDICES

B: DATA TABLES

County Health Rankings, Teton County Data 2014-2016

	Teton County		Error Margin				Top US			WY		State Rank		Ranking Measure?	BRESS
	2016	2015	2014 CHNA	2016	2015	2014 CHNA	2016	2015	2014 CHNA	2016	2015	2014 CHNA			
Premature death	3,800	3,853	4,054	2,700-4,900	2,833-4,872	3,055-5,054	5,200	5,200	5,317	7,200	7,360	7,532	1	1	1
length of life															
Poor or fair health	11%	6%	6%	11-11%	4-8%	4-8%	12%	10%	10%	14%	13%	13%	2	1	1
Poor physical health days	3	2.1	2.1	2.9-3.1	1.7-2.5	1.7-2.5	2.9	2.5	2.5	3.3	3.2	3.2			
Poor mental health days	3	2.3	2.3	2.9-3.2	1.8-2.7	1.8-2.7	2.8	2.3	2.4	3.3	3.2	3.2			
Low birthweight	6%	6.3%	6.7%	5-8%	5.2-7.4%	5.6-7.8%	6%	5.9%	6.0%	9%	8.6%	8.6%			
Premature age-adjusted mortality	160	164.1	171	130-190	133-195.1	138.8-203.2	270	269.1	274	340	348	352.6			
Child mortality							40	37.9	41.4	60	59.9	67.1			
Infant mortality							5	4.8	4.9	7	7	7			
Frequent physical distress	9%			9-9%			9%			10%					
Frequent mental distress	9%			9-9%			9%			11%					
Diabetes prevalence	7%	4%	4%	7-7%	3-6%	3-5%	9%	8%	8%	8%	8%	8%			
HIV prevalence	76	88	88				41	40	40	50	52	52			
Health Behaviors															
Adult smoking	15%	10%	10%	14-15%	7-13%	7-13%	14%	14%	14%	20%	20%	20%	1	1	1
Adult obesity	13%	13%	13%	10-15%	11-16%	11-16%	25%	25%	25%	27%	26%	26%			
Food environment index	7.9	7.9	8				8.3	8.4	8.7	7.6	7.7	7.9			
Physical inactivity	11%	12%	11%	9-13%	9-14%	8-13%	20%	20%	21%	23%	23%	23%			
Access to exercise opportunities	98%	97%	94%				91%	92%	85%	65%	68%	57%			
Excessive drinking	22%	21%	21%	22-23%	18-25%	18-25%	12%	10%	10%	19%	17%	17%			
Alcohol-impaired driving deaths	25%	22%	19%	12-39%			14%	14%	14%	35%	37%	38%			
Sexually transmitted infections	193.8	129	209				134.1	138	123	347.8	365	368			
Teen births	23	27	31	18-29	22-33	25-37	19	20	20	40	42	43			
Food insecurity	12%	13%	14%				11%	10%	10%	13%	13%	12%			
Limited access to healthy foods	5%	5%	5%				2%	2%	1%	8%	8%	8%			
Drug overdose deaths							8			17					
Drug overdose deaths - modeled	6.1-8.0						6.1-8.0			19.4					
Drug poisoning deaths								7	6%		13	11			
Motor vehicle crash deaths		7	14		13-Apr	9-22	9	10	10%	20	21	24			
Insufficient sleep	26%			25-27%			28%			31%					
Clinical Care															
Uninsured	20%	21%	21%	18-22%	19-24%	19-24%	11%	11%	11%	16%	17%	17%	1	1	2
Primary care physicians	770:1	723:1	798:1				1,040:1	1,045:1	1,051:1	1,500:1	1,493:1	1,476:1			
Dentists	1,270:1	1,237:1	1,204:1				1,340:1	1,377:1	1,392:1	1,660:1	1,719:1	1,774:1			
Mental health providers	280:1	309:1	529:1				370:1	386:1	521:1	330:1	353:1	510:1			
Preventable hospital stays	35	27	27	27-43	19-34	20-35	38	41	46	48	53	55			
Diabetic monitoring	78%	88%	79%	61-95%	68-100%	59-98%	90%	90%	90%	75%	75%	75%			

County Health Rankings, Teton County Data 2014-2016

	Teton County		Error Margin				Top US			WY			State Rank		Ranking Measure?	BRESS?
	2016	2015	2014 CHNA	2016	2015	2014 CHNA	2016	2015	2014 CHNA	2016	2015	2014 CHNA	2016	2015		
Mammography screening	70%	66.3%	68.8%	58-81%	54.6-78.0%	56.9-80.7%	71%	70.7%	70.7%	57%	57.9%	57.4%				R
Uninsured adults	22%	24%	23%	19-25%	21-27%	20-26%	13%	13%	13%	19%	20%	21%				
Uninsured children	12%	13%	13%	8-15%	9-17%	9-16%	5%	4%	5%	7%	9%	8%				
Health care costs	\$7,223	\$7,563	\$7,005			\$7,001-7,009				\$7,643	\$7,883	7913				
Other primary care providers	1,147.1	1,237.1	1,204.1				866.1	928.1	1,032.1	1,240.1	1,352.1	1,379.1				
Could not see a doctor due to cost		11%	11%	9-14%	9-14%			8%	8%		12%	12%				
Social & Economic Factors																
High school graduation	88%	83%	88%				93%		93%	78%	79%	80%	6	8	11	
Some college	75%	73%	69.6%	64-85%	62.5-83.4%	58.0-81.1%	72%	71%	70.2%	66%	66.1%	65.2%				R
Unemployment	4.8%	5.3%	6.6%				3.5%	4.0%	4.4%	4.3%	4.6%	5.4%				R
Children in poverty	10%	11%	14%	7-12%	7-14%	10-18%	13%	13%	13%	14%	14%	15%				R
Income inequality	3.8	4.1		3.2-4.4	3.0-5.1		3.7	3.7		4.2	4.1					R
Children in single-parent households	19%	18%	18%	10-28%	9-28%	9-27%	21%	20%	20%	28%	28%	27%				R
Social associations	19.3	19.8					22.1	22		13.4	13.9					R
Violent crime	299	299	264				59	59	64	206	206	215				R
Injury deaths	47	47	52	35-62	35-62	39-68	51	50	49	84	86	84				R
Median household income	\$75,300	\$70,201	\$66,592	\$67,800-82,900	\$63,345-77,057	\$63,342-73,842	\$61,700	\$59,854	\$58,383	\$58,300	\$58,424	\$55,104				
Children eligible for free lunch	18%	13%	14%				25%	22%	24%	27%	27%	27%				
Residential segregation - black/white							23			67						
Residential segregation - non-white/white	21						15			37						
Homicides							2	2	2	3	3	3				
Physical Environment																
Air pollution - particulate matter	10.2	10.2	10.2				9.5	9.5	9.5	11.2	11.2	11.2	8	4	5	
Drinking water violations	Yes	1%	0%				No	0%	0%		6%	2%				R
Severe housing problems	20%	19%	20%	15-25%	14-24%	15-26%	9%	9%	9%	12%	12%	12%				R
Driving alone to work	63%	64%	62%	58-68%	59-69%	58-68%	71%	71%	71%	77%	77%	76%				R
Long commute - driving alone	11%	11%	12%	7-15%	8-15%	7-17%	15%	15%	15%	15%	15%	15%				R

APPENDICES

B: DATA TABLES

Teton County Data for 2016 Annual Update Progress on Top 10 Prioritized Issues

Top 10 Issue	Indicator	Teton County		Error Margin		Top US		WY		Year Data was collected		Data Source						
		2016	2015	2014 CHNA	2016	2015	2014 CHNA	2016	2015	2014 CHNA								
1. Access to Health Services	Uninsured children	12%	13%	13%	8-15%	9-17%	9-16%	5%	4%	5%	7%	9%	8%	2013	2012	2011	CHR	
1. Access to Health Services	Uninsured	20%	21%	21%	18-22%	19-24%	19-24%	11%	11%	11%	16%	17%	17%	2013	2012	2011	CHR	
1. Access to Health Services	Could not see a doctor due to cost	n/o	11%	11%	n/o	9-14%	9-14%	n/o	8%	8%	n/o	12%	12%	n/o	2006-2012	2006-2012	2006-2012	CHR
1. Access to Health Services	Uninsured adults	22%	24%	23%	19-25%	21-27%	20-26%	13%	13%	13%	19%	20%	21%	2013	2012	2011	CHR	
2. Severe Housing	Severe housing problems	20%	19%	20%	15-25%	14-24%	15-26%	9%	9%	9%	12%	12%	12%	2008-2012	2007-2011	2006-2010	CHR	
3. Food Insecurity	Food insecurity	12%	13%	14%				11%	10%	10%	13%	13%	12%	2013	2012	2011	CHR	
3. Food Insecurity	Children eligible for free lunch	18%	13%	14%				25%	22%	24%	27%	27%	27%	2012-2013	2012	2011	CHR	
4. Routine Screenings	Diabetic monitoring	78%	88%	79%	61-95%	68-100%	59-98%	90%	90%	90%	75%	75%	75%	2013	2012	2011	CHR	
4. Routine Screenings	Mammography screening	70%	66.3%	68.8%	58-81%	54.6-78.0%	59-80.7%	71%	70.7%	70.7%	57%	57.9%	57.4%	2013	2012	2011	CHR	
4. Routine Screenings	Mammography screening, 40+			75.7%						78.4%	65%		66.5%	2014		2007-2011, 2012	WY BRSS	
4. Routine Screenings	Colorectal screening, adults 50+			66.3%						67.3%	61.8%		60.9%	2014		2007-2011, 2012	WY BRSS	
5. Transportation	Driving alone to work	63%	64%	62%	58-68%	59-69%	56-68%	71%	71%	71%	77%	77%	76%	2010-2014	2009-2013	2008-2012	CHR	
5. Transportation	Long commute - driving alone	11%	11%	12%	7-15%	8-15%	7-17%	15%	15%	15%	15%	15%	15%	2010-2014	2009-2013	2008-2012	CHR	
6. Immunizations for 65+	Influenza immunizations, 65+			49.3%							57.9%		55.4%	2014		2007-2011	WY BRSS	
6. Immunizations for 65+	Pneumococcal immunizations, 65+			60.1%							70.1%		68.3%	2014		2012	WY BRSS	
7. Sexually Transmitted Infections	Sexually transmitted infections	193.8	129	209				134.1	138	123	347.8	365	368	2013	2012	2011	CHR	
8. Smokeless Tobacco	Males			0.3%							16.2%		8.8%	2014		2013	WY BRSS	
9. Radon	High radon	n/o	40.0%	35.0%										2015	n/o	2014	TCPH	
10. Youth Alcohol Use	See separate spreadsheet													2014	n/o	2012	PNA	

Teton County Data for 2016 Annual Update
Progress on Top 10 positive Issues

Top 10 Positive	Indicator	Teton County		Error Margin		Top US		WY		Data Year for 2016 CHR				Data Source	BRESS Measure?			
		2016	2015 2014 CHNA	2016	2015 2014 CHNA	2016	2015 2014 CHNA	2016	2015 2014 CHNA	2016	2015 2014 CHNA							
General Health Status	Poor or fair health	11%	6%	6%	11-11%	4-8%	4-8%	12%	10%	10%	14%	13%	13%	2014	2006-2012	2006-2012	CHR	BRESS
General Health Status	Poor physical health days	3	2.1	2.1	2.9-3.1	1.7-2.5	1.7-2.5	2.9	2.5	2.5	3.3	3.2	3.2	2014	2006-2012	2006-2012	CHR	BRESS
General Health Status	Frequent physical distress	9%	n/c	n/c	9-9%	n/c	n/c	9%	n/c	n/c	10%	n/c	n/c	2014	n/c	n/c	CHR	BRESS
Mental Health	Poor mental health days	3	2.3	2.3	2.9-3.2	1.8-2.7	1.8-2.7	2.8	2.3	2.4	3.3	3.2	3.2	2014	2006-2012	2006-2012	CHR	BRESS
Mental Health	Frequent mental distress	9%	n/c	n/c	9-9%	n/c	n/c	9%	n/c	n/c	10%	n/c	n/c	2014	n/c	n/c	CHR	BRESS
Obesity & Diabetes	Diabetes prevalence	7%	4%	4%	7-7%	3-6%	3-5%	9%	8%	8%	8%	8%	8%	2012	2011	2007-2011	CHR	
Obesity & Diabetes	Adult obesity	13%	13%	13%	10-15%	11-16%	11-16%	25%	25%	25%	27%	26%	26%	2012	2011	2010	CHR	
Physical Activity	Physical inactivity	11%	12%	11%	9-13%	9-14%	8-13%	20%	20%	21%	23%	23%	22%	2012	2011	2010	CHR	
Physical Activity	Access to exercise opportunities	98%	97%	94%				91%	92%	85%	65%	68%	57%	2014	2010 & 2013	2012	CHR	
Prenatal Care	Low birthweight	6%	6.3%	6.7%	5-6%	5.2-7.4%	5.6-7.8%	6%	5.9%	6.0%	9%	8.6%	8.6%	2007-2013	2006-2012	2005-2011	CHR	
Smoking rate	Adult smoking	15%	10%	10%	14-15%	7-13%	7-13%	14%	14%	14%	20%	20%	20%	2014	2006-2012	2006-2012	CHR	BRESS
Teen births	Teen births	23	27	31	18-29	22-33	25-37	19	20	20	40	42	43	2007-2013	2006-2012	2005-2011	CHR	
Cancer Incidence		388.3	n/c	412.4					443.7	412.4	n/c	428.1	2009-2013	n/c	2008-2012		WY Cancer Surveillance	
Cancer Mortality		147.6	n/c	124.2					168.5	155.9	n/c	158.5	2009-2013	n/c	2008-2012		WY Cancer Surveillance	
Suicide Rate																		

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