



Springfield
Medical Care Systems, Inc.

Where People Come First

Community Health Needs Assessment

September 30, 2013

Approved by Springfield Medical Care Systems' Board of Directors 9/10/13

Special Thanks to our Steering Committee

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2013 COMMUNITY HEALTH NEEDS ASSESSMENT SUMMARY OVERVIEW

INTRODUCTION

Federal requirements require Springfield Medical Care Systems (SMCS), as an entity funded by the Bureau of Public Health Care under section 330 of the Public Health Service Act, to engage in active, ongoing planning. As part of that process, a community health needs assessment (CHNA) and plans to meet identified needs must be conducted periodically and operational plans for implementation must be developed.

To comply with the federal requirement, the assessment must describe:

- the community served by the facility;
- the process and methods used to conduct the assessment;
- the way in which the facility took into account input from persons representing broad interests of the community; and,
- a prioritized description of all community health needs identified.

THE AREA SERVED

SMCS serves a population base of approximately 35,000. Statistical analysis of patients served defines the primary service area as most of Windsor County and northern Windham County, Vermont, and a small portion of Sullivan and Cheshire Counties in NH.

THE PROCESS

SMCS began its CHNA process early in 2012. A combination of secondary data analysis, focus groups, written surveys, and personal interviews were conducted throughout this process.

Secondary data (captured from www.chna.org and www.countyhealthrankings.org) are reported at the county level and, while they reflect what information is available, they may not accurately represent the specific towns served. For example, Windham County data includes the larger communities of Brattleboro and Putney, VT. Yet, SM serves primarily Bellows Falls and Westminster, VT, which are included in Windham County data. The same holds true for Cheshire County, which includes data for Keene, NH, and may impact the data in a way that does not accurately reflect Walpole, North Walpole and Alstead. Secondary data was also reviewed and referenced from a variety of state and national resources, including Vermont's Behavioral Risk Factor Surveillance System and national sources such as the National Institute of Mental Health and the Centers for Disease Control and Prevention (CDC).

In addition, SMCS organized the Springfield area focus group, and also participated in the Upper Valley community stakeholder meetings conducted through the collaborative efforts of Granite United Way, Dartmouth-Hitchcock, Alice Peck Day Memorial Hospital, and Mount Ascutney Hospital. We also collaborated with Brattleboro Memorial Hospital, Brattleboro Retreat, and Grace Cottage Hospital in assessing Windham County, VT.

COMMUNITY INPUT

A steering committee was formed to conduct this assessment, review the data, and recommend priorities and implementation strategies to SMCS Board of Directors. Members include:

- Steve Geller, Executive Director, Southeastern Vermont Community Action
- Sarah Kemble, MD, MPH, Medical Director, Springfield Medical Care Systems
- Wilda Pelton, Executive Director, Valley Health Connections
- Lynn Raymond-Empey, Executive Director, Vermont Coalition of Clinics for the Uninsured
- Becky Thomas, MPH, District Director, Vermont Department of Health
- Joyce Lemire, Executive Director, Senior Solutions
- Anna Smith, Director, Marketing and Community Relations, Springfield Hospital

Group discussions and in-person or telephone interviews provided input from the following sources:

- The SMCS Community Health Team (a 100+ member community health team that meets monthly);
- Medical Providers;
- Community Advisory Committee;
- General public;
- Area businesses;
- Community Health Officers;
- Police, Fire and EMT;
- Schools;
- Town officials;
- Home Health/VNA;
- Health Care and Rehabilitation Services of Vermont (Community Mental Health);
- Council on Aging; and,
- Southeastern Vermont Community Action.

A community-wide survey (via Survey Monkey) was distributed throughout the community. The distribution included Board Members, all Springfield Medical Care Systems medical staff, SMCS employees, and Community Health Team members, asking them to help distribute to their email and/or contact lists. The survey was also advertised on the hospital website and in the local newspapers. The survey was available to be completed online or via paper copy, and was made available at the Hospital, Valley Health Connections, all primary and specialty care offices, and Springfield Area Adult Day Service. A total of 440 responses were received.

PRIORITIZED NEEDS AND IMPLEMENTATION STRATEGIES

A review of the primary and secondary data, and the personal interviews, highlighted several priority needs that fall into three main categories: access to care, mental health services, and oral health care. A summary of priorities follows:

Improve Access to Care Across the Health System with an Emphasis on Primary and Preventive Care

Need:

Our community survey identified dental, medical, prescription drugs, and mental health care as services that were most inaccessible. (Reference the Community Health Needs Assessment Survey results, pages 32-40)

Reports from key stakeholder interviews identified difficulties in accessing transportation, the need to decrease wait times in both the primary care setting and the emergency department, and the need to improve access to inpatient care when needed, so patients can remain at their local hospital, closer to their medical home providers, and near family and friends.

Secondary data identified the following key areas for study and improvement:

(Reference County Health Rankings in pgs 10 - 13)

- premature death
- adult smoking
- adult obesity
- excessive drinking
- sexually transmitted infections (STDs)
- preventable hospital stays, i.e., re-admissions
- violent crime
- immunizations (5.7% of all VT children are not immunized—only Oregon reports higher rates. (CDC Prevention Report)

Strategies:

- Work with area Prevention Coalitions to:
 - Study incidence and causes of premature death and develop strategies;
 - Develop educational outreach efforts regarding smoking, drinking, substance abuse, STDs, and violence; and,
 - Continue participation in the Prevention Coalition's "Not In Our Town" campaign — a campaign to demonstrate social intolerance for and community action against drug dealing and use.)
- Continue offering tobacco treatment or intervention programs, and market them to physician offices and the public.
- Continue nutrition counseling programs and Healthy Living Workshops to combat obesity.
- Encourage participation in the Wellness, Recovery, Action Program (WRAP) throughout the SMCS system.
- Utilize the "Prescription for Exercise" program systemwide.
- Continue FQHC standard protocol to monitor BMI and intervene for elevated BMI in all patients.
- Increase same day and walk-in care services and promote their availability at primary care locations.
- Analyze the need for transportation for health care services and develop strategies to assist those in need.
- Implement a "fast-track service" in the Emergency Department to reduce wait times and facilitate efficient patient care for non-life threatening visits.
- Continue process improvement analysis on admission from the Emergency Department to inpatient care area.
- Review discharge procedures and follow up services to minimize hospital re-admissions.
- Continue utilizing care coordinators and other support staff to improve medical staff efficiency and availability.
- Enhance health care access for uninsured and under-insured populations through enrollment in the State Exchanges.
- Enhance health care access for low-income populations through continued use of financial assistance programs.
- Review school immunization rates for schools within our service area and develop tactics to increase vaccination rates.

Improve the Health and Wellbeing of those Living with Mental Illness/Substance Abuse

Need:

Quantifiable data that measures the prevalence for mental health services has proven difficult to find at the county or hospital service area level. However, the closure of Vermont's state hospital for inpatient psychiatric care has clearly strained our emergency department and other local services.

Suicide rates are high in all four counties, and Vermont and New Hampshire are above the national age adjusted death rate average per 100,000 population of 11.57, and the Healthy People goal of ≤ 10.2 . A Vermont Public Television report in January 2013 cites the "*American Foundation for Suicide Prevention 2010*" report indicating Vermont has the 12th highest rate in the country (16.9 per 100,000 people); a study from the Health Department from 1999-2005 reporting suicide as the 9th ranking cause of death in the state, and suicide as the second leading cause of death among teenagers (after automobile accidents), with most youth suicide deaths being males and most using a gun.

The Congressional Research Service report, "*Prevalence of Mental Illness in the United States: Data Sources and Estimates, 4/24/13*" reports the National Comorbidity Survey Replication indicates prevalence estimates of any mental illness among the adult population over a 12-month period to range from 26.2% to 32.4%. Both estimates include substance use disorders as mental illness. The report estimates prevalence of mental illness excluding substance use disorders to be 24.8% among adults. Of the 26.2% of all adults identified with a mental disorder, the severity of disorders ranged from 22.3% serious, 37.3% moderate, and 40.4% mild.

The report also identifies the estimated 12-month prevalence of all mental illness among adolescents to be 42.6%, and found 58.2% of the cases to be mild, 22.9% moderate, and 18.8% serious. The estimated serious mental illness among all adolescents was 8%.

In Vermont, 23% of adults report being told they have a depressive disorder, defined as depression, major depression, dysthymia, or minor depression (BRFSS 2011). In 2010, 25% of Vermont adults reported having anxiety and/or depression. Moderate to severe depression was reported by 8% of Vermont adults in 2010 (BRFSS 2010).

County Health Rankings (Robert Wood Johnson Foundation) indicate the self-reported average number of mentally unhealthy days in the past 30 day period (age adjusted) show the following for 2011-2013:

	2013	2012	2011
Windsor County, VT	3.7	3.2	3.3
Windham County, VT	3.2	3.5	3.4
VT overall	3.3	3.3	3.2
Sullivan County, NH	3.9	3.4	3.6
Cheshire County, NH	3.4	3.3	3.3
NH overall	3.3	3.2	3.2

SMCS staff report needs for psychiatry for child, adolescents, and geriatrics are great and additional resources are needed.

Strategies:

- Work with community partners to more clearly define mental health needs and develop strategies.
- Continue to improve local access and integration of education and outpatient counseling at primary care offices.
- Continue to collaborate with Health Care and Rehabilitation Services (HCRS) to provide emergency care to people in crisis.
- Conduct further analysis on the high rate of suicide, particularly (but not exclusively) in Windham County, and work with community partners to develop strategies for prevention.

Prevalence of Drug Use - Windsor County, VT

Need:

The percent of students reporting past-30 day alcohol and binge drinking, and lifetime prescription drug use reflects the need for increased access to services, especially for youth.

Prevalence: High School Youth

Percent of students reporting past 30 day alcohol and binge drinking,
and lifetime prescription drug use
Youth Risk Behavior Survey 2007-2011 grades 9th – 12th

	2007		2009		2011		
	VT	Windsor	VT	Windsor	US	VT	Windsor
Alcohol Use (past 30 days)	43%	42%	39%	38%	39%	35%	35%
Binge Drinking (past 30 days)	26%	26%	23%	23%	22%	21%	19%
Prescription Drug (lifetime)	NA	NA	17%	19%	NA	14%	16%

In 2011, Windsor County has a statistically similar prevalence to the state prevalence for all three substance misuse measures.

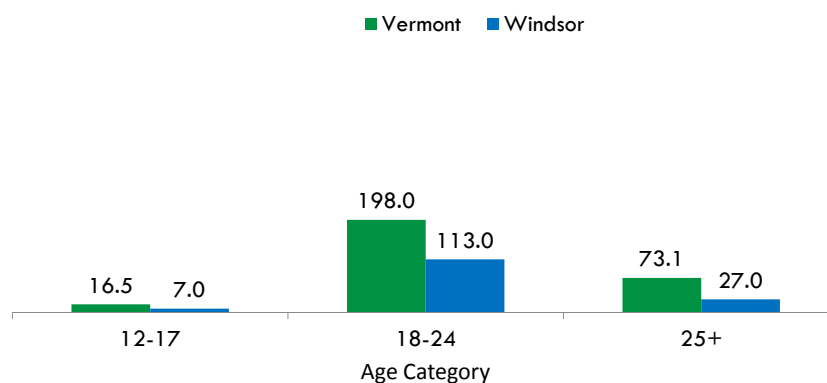
For more information on Middle School youth please see the Middle School report at: <http://healthvermont.gov/research/yrbs/2011/index.aspx#statewide>

Vermont Department of Health

Source: Vermont Youth Risk Behavior Survey 2007-2011

Emergency Department Discharge Rates

Emergency Department Discharge Rates per 10,000
People for Any Prescription Drug Misuse/Abuse, 2009



Vermont Department of Health

Source: Vermont Unified Hospital Discharge Data Set 2009

Prevalence: High School Youth

Percent of students reporting past 30 day alcohol and binge drinking,
and lifetime prescription drug use
Youth Risk Behavior Survey 2007-2011 grades 9th – 12th

	2007		2009		2011		
	VT	Windham	VT	Windham	US	VT	Windham
Alcohol Use (past 30 days)	43%	43%	39%	41%	39%	35%	39%
Binge Drinking (past 30 days)	26%	28%	23%	26%	22%	22%	19%
Prescription Drug (lifetime)	NA	NA	17%	22%	NA	14%	21%

In 2011, Windham County had a statistically higher prevalence compared to the state for past 30 day alcohol use and prescription drug misuse. Windham County had a similar binge drinking prevalence to the state.

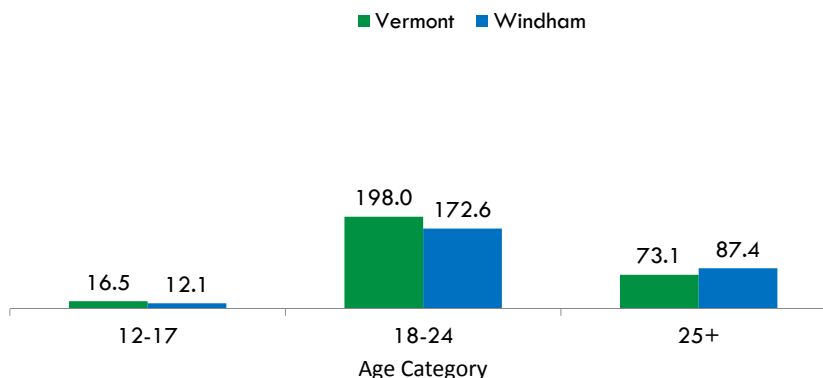
For more information on Middle School youth please see the Middle School report at: <http://healthvermont.gov/research/yrbs/2011/index.aspx#statewide>

Vermont Department of Health

Source: Vermont Youth Risk Behavior Survey 2007-2011

Emergency Department Discharge Rates

Emergency Department Discharge Rates per 10,000
People for Any Prescription Drug Misuse/Abuse, 2009



Vermont Department of Health

Source: Vermont Unified Hospital Discharge Data Set 2009

Strategy:

- Work with area community partners to:
 - Study prevalence and incidence of substance abuse across all ages, and develop tactics to help address needs.
 - Continued participation in the Prevention Coalition's "Not In Our Town" campaign — a campaign to demonstrate social intolerance for, and community action against, drug dealing and use.)

Improve Access to Oral Health Care for Children and Adults

Need:

The Vermont Oral Health Plan (2005) reports that “oral health is an integrated component of overall health. Without good oral health, a person is not truly healthy and may experience needless pain and suffering, as well as complications that diminish overall health and well-being.”

The VOHP report goes on to indicate that “tooth decay is the single most common chronic childhood disease - 5 times more common than asthma and 7 times more common than hay fever” and that “children below the Federal poverty line suffer far more dental decay than their wealthier counterparts, and their disease is more likely to be untreated.” Also, “only 56% of Vermonters receive the benefits of fluoride in their drinking water. Every dollar spent on fluoridation saves an average of \$38 in dental costs. Residents of communities with fluoridated water have 20-40% less dental disease than those living in non-fluoridated communities.”

While oral health was not reported in the Behavioral Risk Factor Surveillance System 2011 (BRFSS 2011) Data Summary, the 2010 report indicates that 74% of Vermont adults saw their dentist for any reason in the previous year in 2010, with no statistical difference in rate for men vs. women, and the rate of use has not changed significantly over time. BRFSS 2010 also reports 75% of Vermont adults had their teeth cleaned in the previous 12-month period, and that number also has not changed significantly over time.

Vermont Medicaid Utilization of Dental Services (fiscal year 2007 - the latest data available), shows utilization as follows:

	Vermont	Windsor County	Windham County
Children	50%	43%	46%
Adults	28%	20%	23%

Throughout our stakeholder interviews, oral health was frequently identified as a critical need for all ages. Health care providers, school administrators, and social service agencies all note the high demand for services and limited access to care. In addition, these interviews also highlight the range of services frequently does not meet the need. For example, extractions may be covered, but not dentures; also, while uninsured or underinsured adults lack the resources to get the care they need. Note reference map and additional details on pages 8 and 9.

Strategies:

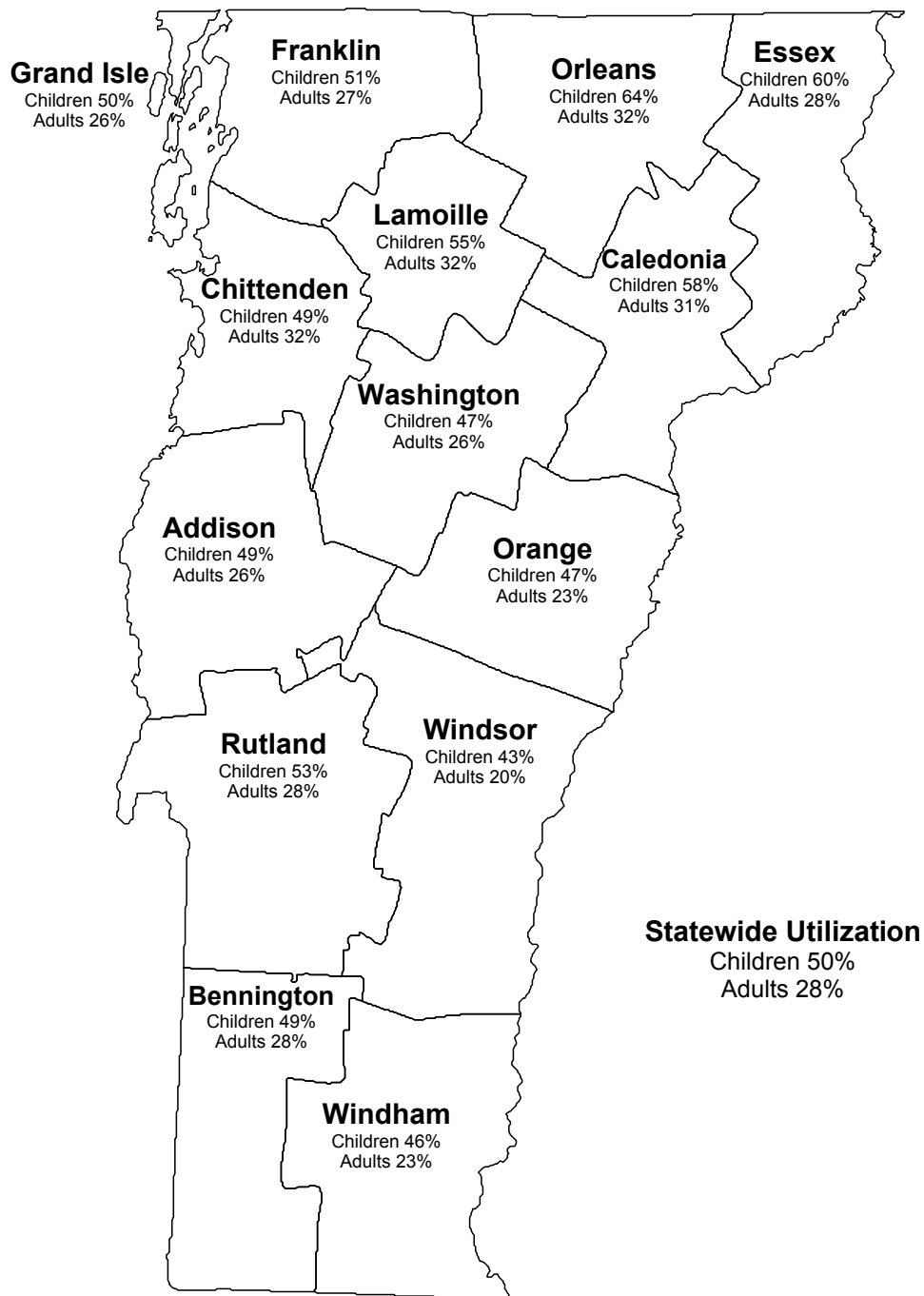
- Expand access at the Ludlow Dental Center, in Ludlow, VT, adding a third operatory to increase capacity.
- Continue participation in the Ronald McDonald Dental Mobile program with Community Health Team encouraging its use at other area schools. This program offers an opportunity for children who do not have a dental home to receive needed oral health screenings and dental care, and financial assistance is available.
- Review feasibility of making dental services available at other geographic locations, i.e., Springfield Health Center.
- Enhance access to low-income populations through continued use of financial assistance programs.
- Monitor special funding opportunities, including grant funding, to expand dental services in the area.
- Review the resource “Guide to Fluoride Levels in Public Water Systems” with all medical providers and post to web for public access.

DENTAL - MEDICAID RECIPIENTS ELIGIBLE FOR DENTAL VS. UTILIZATION

WINDSOR COUNTY MEDICAID RECIPIENTS ELIGIBLE FOR DENTAL CY 2003-2012:
Unduplicated counts & percentages of eligible beneficiaries receiving dental services
categorized by age and dental procedure code category groupings

	ALL MEDICAID RECIPIENTS ELIGIBLE FOR DENTAL	RECIPIENTS WITH ANY DENTAL PROCEEDURE		ALL DIAGNOSTIC		ALL PREVENTATIVE		ALL RESTORATIVE	
		D0100 – D9999		D0100 – D0999		D1000 – D1999		D2000 – D2999	
	Unduplicated COUNT	Unduplicated COUNT	% of All M/A Eligibles	Unduplicated COUNT	% of All M/A Eligibles	Unduplicated COUNT	% of All M/A Eligibles	Unduplicated COUNT	% of All M/A Eligibles
CY 2003									
CHILDREN (≤20)	6,853	3,178	46.4%	2,949	43.0%	2,774	40.5%	1,228	17.9%
ADULTS (≥21)	3,811	1,027	26.9%	921	24.2%	518	13.6%	372	9.8%
CY 2004									
CHILDREN (≤20)	6,719	3,238	48.2%	3,017	44.9%	2,857	42.5%	1,188	17.7%
ADULTS (≥21)	3,861	1,020	26.4%	930	24.1%	510	13.2%	369	9.6%
CY 2005									
CHILDREN (≤20)	6,537	3,165	48.4%	2,940	45.0%	2,776	42.5%	1,152	17.6%
ADULTS (≥21)	3,840	1,022	26.6%	930	24.2%	487	12.7%	409	10.7%
CY 2006									
CHILDREN (≤20)	6,461	3,053	47.3%	2,781	43.0%	2,720	42.1%	991	15.3%
ADULTS (≥21)	3,952	1,033	26.1%	929	23.5%	541	13.7%	382	9.7%
CY 2007									
CHILDREN (≤20)	6,311	2,846	45.1%	2,637	41.8%	2,502	39.6%	880	13.9%
ADULTS (≥21)	3,974	916	23.0%	826	20.8%	443	11.1%	307	7.7%
CY 2008									
CHILDREN (≤20)	6,576	3,096	47.1%	2,871	43.7%	2,769	42.1%	1,020	15.5%
ADULTS (≥21)	4,147	912	22.0%	819	19.7%	433	10.4%	310	7.5%
CY 2009									
CHILDREN (≤20)	6,836	3,296	48.2%	3,064	44.8%	2,966	43.4%	1,060	15.5%
ADULTS (≥21)	4,303	1,062	24.7%	973	22.6%	495	11.5%	370	8.6%
CY 2010									
CHILDREN (≤20)	7,097	3,471	48.9%	3,277	46.2%	3,145	44.3%	1,071	15.1%
ADULTS (≥21)	4,554	1,113	24.4%	1,029	22.6%	493	10.8%	353	7.8%
CY 2011									
CHILDREN (≤20)	7,174	3,545	49.4%	3,314	46.2%	3,231	45.0%	1,052	14.7%
ADULTS (≥21)	4,832	1,106	22.9%	1,026	21.2%	509	10.5%	369	7.6%
CY 2012									
CHILDREN (≤20)	7,241	3,562	49.2%	3,281	45.3%	3,212	44.4%	1,013	14.0%
ADULTS (≥21)	5,010	1,143	22.8%	1,051	21.0%	523	10.4%	404	8.1%

Vermont Medicaid Utilization of Dental Services
State Fiscal Year 2007
(07/01/06 – 06/30/07)





Windsor (WN)

	Windsor County	Error Margin	Vermont	National Benchmark*	Rank (of 14)
Health Outcomes					4
Mortality					6
Premature death	5,594	4,844-6,344	5,365	5,317	
Morbidity					6
Poor or fair health	11%	10-12%	11%	10%	
Poor physical health days	3.2	3.0-3.5	3.2	2.6	
Poor mental health days	3.2	3.0-3.5	3.3	2.3	
Low birthweight	6.6%	5.8-7.4%	6.5%	6.0%	
Health Factors					4
Health Behaviors					5
Adult smoking	17%	15-18%	17%	13%	
Adult obesity	24%	22-26%	24%	25%	
Physical inactivity	20%	18-22%	19%	21%	
Excessive drinking	19%	18-21%	19%	7%	
Motor vehicle crash death rate	13	10-17	12	10	
Sexually transmitted infections	178		200	92	
Teen birth rate	23	20-25	19	21	
Clinical Care					3
Uninsured	9%	8-10%	10%	11%	
Primary care physicians**	994:1		931:1	1,067:1	
Dentists**	1,856:1		1,727:1	1,516:1	
Preventable hospital stays	56	51-61	51	47	
Diabetic screening	89%	82-96%	89%	90%	
Mammography screening	73%	67-79%	72%	73%	
Social & Economic Factors					5
High school graduation**	82%		87%		
Some college	63%	59-68%	64%	70%	
Unemployment	5.3%		5.6%	5.0%	
Children in poverty	16%	11-20%	16%	14%	
Inadequate social support	18%	17-20%	17%	14%	
Children in single-parent households	28%	23-32%	30%	20%	
Violent crime rate	120		134	66	
Physical Environment					2
Daily fine particulate matter	9.6	9.5-9.7	9.6	8.8	
Drinking water safety	4%		12%	0%	
Access to recreational facilities	18		14	16	
Limited access to healthy foods**	4%		3%	1%	
Fast food restaurants	23%		31%	27%	

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

** Data should not be compared with prior years due to changes in definition.

Note: Blank values reflect unreliable or missing data

2013

County Health Rankings - Windham County, Vermont



Windham (WI)

	Windham County	Error Margin	Vermont	National Benchmark*	Rank (of 14)
Health Outcomes					9
Mortality					11
Premature death	6,177	5,319-7,034	5,365	5,317	
Morbidity					5
Poor or fair health	12%	10-13%	11%	10%	
Poor physical health days	3.2	2.9-3.5	3.2	2.6	
Poor mental health days	3.7	3.3-4.0	3.3	2.3	
Low birthweight	5.5%	4.7-6.3%	6.5%	6.0%	
Health Factors					5
Health Behaviors					4
Adult smoking	17%	15-19%	17%	13%	
Adult obesity	23%	21-25%	24%	25%	
Physical inactivity	17%	15-18%	19%	21%	
Excessive drinking	18%	17-20%	19%	7%	
Motor vehicle crash death rate	16	12-21	12	10	
Sexually transmitted infections	128		200	92	
Teen birth rate	23	20-26	19	21	
Clinical Care					5
Uninsured	10%	9-12%	10%	11%	
Primary care physicians**	809:1		931:1	1,067:1	
Dentists**	1,838:1		1,727:1	1,516:1	
Preventable hospital stays	53	47-58	51	47	
Diabetic screening	88%	80-96%	89%	90%	
Mammography screening	71%	64-79%	72%	73%	
Social & Economic Factors					9
High school graduation**	81%		87%		
Some college	64%	59-69%	64%	70%	
Unemployment	5.7%		5.6%	5.0%	
Children in poverty	17%	11-23%	16%	14%	
Inadequate social support	18%	16-20%	17%	14%	
Children in single-parent households	34%	28-40%	30%	20%	
Violent crime rate	179		134	66	
Physical Environment					11
Daily fine particulate matter	9.8	9.7-9.9	9.6	8.8	
Drinking water safety	6%		12%	0%	
Access to recreational facilities	16		14	16	
Limited access to healthy foods**	4%		3%	1%	
Fast food restaurants	32%		31%	27%	

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

** Data should not be compared with prior years due to changes in definition.

Note: Blank values reflect unreliable or missing data

2013



Sullivan (SU)

	Sullivan County	Error Margin	New Hampshire	National Benchmark*	Rank (of 10)
Health Outcomes					9
Mortality					9
Premature death	6,288	5,399-7,178	5,267	5,317	
Morbidity					9
Poor or fair health	12%	10-14%	11%	10%	
Poor physical health days	3.5	3.1-3.9	3.2	2.6	
Poor mental health days	3.9	3.3-4.4	3.3	2.3	
Low birthweight	7.7%	6.8-8.6%	6.7%	6.0%	
Health Factors					9
Health Behaviors					9
Adult smoking	20%	18-23%	18%	13%	
Adult obesity	29%	26-32%	27%	25%	
Physical inactivity	26%	23-29%	22%	21%	
Excessive drinking	15%	13-17%	18%	7%	
Motor vehicle crash death rate	16	12-22	10	10	
Sexually transmitted infections	208		187	92	
Teen birth rate	34	30-38	18	21	
Clinical Care					8
Uninsured	14%	12-16%	13%	11%	
Primary care physicians**	1,508:1		1,102:1	1,067:1	
Dentists**	3,702:1		1,606:1	1,516:1	
Preventable hospital stays	51	46-57	56	47	
Diabetic screening	86%	79-94%	89%	90%	
Mammography screening	73%	65-80%	74%	73%	
Social & Economic Factors					8
High school graduation**	83%		87%		
Some college	56%	50-61%	66%	70%	
Unemployment	4.9%		5.4%	5.0%	
Children in poverty	16%	11-21%	12%	14%	
Inadequate social support	20%	18-23%	18%	14%	
Children in single-parent households	30%	23-37%	26%	20%	
Violent crime rate	147		162	66	
Physical Environment					10
Daily fine particulate matter	9.7	9.5-9.8	9.6	8.8	
Drinking water safety	0%		0%	0%	
Access to recreational facilities	2		14	16	
Limited access to healthy foods**	5%		4%	1%	
Fast food restaurants	49%		46%	27%	

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

** Data should not be compared with prior years due to changes in definition.

Note: Blank values reflect unreliable or missing data

2013



Cheshire (CH)

	Cheshire County	Error Margin	New Hampshire	National Benchmark*	Rank (of 10)
Health Outcomes					5
Mortality					6
Premature death	5,683	5,057-6,309	5,267	5,317	
Morbidity					5
Poor or fair health	13%	11-14%	11%	10%	
Poor physical health days	3.5	3.1-3.8	3.2	2.6	
Poor mental health days	3.4	3.0-3.7	3.3	2.3	
Low birthweight	5.9%	5.3-6.6%	6.7%	6.0%	
Health Factors					6
Health Behaviors					7
Adult smoking	18%	17-20%	18%	13%	
Adult obesity	28%	26-31%	27%	25%	
Physical inactivity	22%	20-24%	22%	21%	
Excessive drinking	17%	15-19%	18%	7%	
Motor vehicle crash death rate	13	10-16	10	10	
Sexually transmitted infections	200		187	92	
Teen birth rate	16	15-18	18	21	
Clinical Care					6
Uninsured	15%	13-16%	13%	11%	
Primary care physicians**	1,454:1		1,102:1	1,067:1	
Dentists**	1,857:1		1,606:1	1,516:1	
Preventable hospital stays	47	43-51	56	47	
Diabetic screening	89%	83-95%	89%	90%	
Mammography screening	71%	65-77%	74%	73%	
Social & Economic Factors					5
High school graduation**	87%		87%		
Some college	59%	55-63%	66%	70%	
Unemployment	5.3%		5.4%	5.0%	
Children in poverty	14%	10-19%	12%	14%	
Inadequate social support	18%	16-20%	18%	14%	
Children in single-parent households	27%	23-31%	26%	20%	
Violent crime rate	164		162	66	
Physical Environment					9
Daily fine particulate matter	9.8	9.7-9.9	9.6	8.8	
Drinking water safety	2%		0%	0%	
Access to recreational facilities	8		14	16	
Limited access to healthy foods**	3%		4%	1%	
Fast food restaurants	37%		46%	27%	

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

** Data should not be compared with prior years due to changes in definition.

Note: Blank values reflect unreliable or missing data

2013

CHNA - 2013 DATA OVERVIEW

DEMOGRAPHICS

Source: CHNA.org - US Census Bureau, 2007-2011 American Community Survey 5 year estimates)

Population

	Total Population	Total Land Area Square Miles	Population Density (per Square Mile)	Median Age
Windham County	44,409	785.10	56.56	44.50
Windsor County	56,786	969.08	58.60	45.30
Vermont	624,258	9,216.70	67.83	41.40
Cheshire County	77,301	706.47	109.42	40.60
Sullivan County	43,658	537.17	81.27	43.70
New Hampshire	1,315,911	8,950.28	147.02	40.70
United States	310,346,360	3,530,997.60	87.89	37.00

Gender

	Male	Female	Percent Male	Percent Female
Windham County	21,731	22,678	48.93%	51.07%
Windsor County	27,867	28,919	49.07%	50.93%
Vermont	308,125	316,833	49.30%	50.70%
Cheshire County	37,619	39,682	48.67%	51.33%
Sullivan County	21,539	22,119	49.34%	50.66%
New Hampshire	649,547	666,364	49.36%	50.64%
United States	150,740,224	155,863,552	49.16%	50.84%

Population, Percent by Age Groups

	Age 0-4	Age 5-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65+
Windham County	4.85%	15.24%	8.47%	10.24%	11.99%	17.32%	16.10%	15.80%
Windsor County	4.82%	15.24%	6.43%	10.74%	12.21%	17.29%	15.82%	17.45%
Vermont	5.12%	15.74%	10.46%	11.01%	13.41%	16.39%	14.00%	14.32%
Cheshire County	4.80%	15.13%	13.72%	10.17%	12.37%	15.67%	13.57%	14.57%
Sullivan County	5.29%	15.98%	6.98%	10.37%	13.45%	16.67%	14.91%	16.34%
New Hampshire	5.39%	16.72%	9.39%	10.94%	14.12%	16.97%	13.16%	13.31%
United States	6.58%	17.57%	9.95%	13.26%	13.60%	14.54%	11.58%	12.92%

Change in Population

	Total Population 2010 Census	Total Population 2000 Census	Percent Change 2000-2010
Windham County	44,513	44,216	0.67%
Windsor County	56,670	57,418	-1.30%
Vermont	625,741	608,827	2.78%
Cheshire County	77,117	73,825	4.46%
Sullivan County	43,742	40,458	8.12%
New Hampshire	1,316,470	1,235,786	6.53%
United States	308,745,538	281,421,906	9.71%

Linguistically Isolated Population is Minimal

Windsor County, .40% - Windham County .09% - VT .77%;
Cheshire County, .39% - Sullivan County .30% - NH 1.34%.

SOCIAL & ECONOMIC FACTORS

Adequate Social or Emotional Support

	Total Pop Age 18	Est. Pop w/o Adequate Social Support	% Pop w/o Adequate Social Support
Windham County, VT	35,325	6,217	17.60%
Windsor County, VT	45,292	8,243	18.20%
Vermont	491,759	82,124	16.70%
Cheshire County, NH	61,700	10,859	17.60%
Sullivan County, NH	34,216	6,877	20.10%
New Hampshire	1,017,987	178,148	17.50%
United States	229,932,154	48,120,965	20.93%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2005-2011

Children in Poverty

	Total Population	Pop under 18	Under 18 in Poverty	% Pop under 18 in Poverty
Windham County, VT	43,071	8,724	1,064	12.20%
Windsor County, VT	55,718	11,123	1,479	13.30%
Vermont	600,321	127,280	17,667	13.88%
Cheshire County, NH	72,242	15,029	1,442	9.59%
Sullivan County, NH	43,036	9,059	1,289	14.23%
New Hampshire	1,275,969	286,345	28,291	9.88%
United States	298,788,000	72,906,664	14,550,805	19.96%

Source: U. S. Census Bureau, 2007-2011 American Community Survey 5-Year Estimates

Free and Reduced Price School Lunch Availability (percent of students eligible)

	Total Student Enrollment	Number Free/Reduced Lunch Eligible	% Free/Reduced Lunch Eligible
Windham County, VT	5,597	2,318	41.42%
Windsor County, VT	7,493	2,587	34.53%
Vermont	84,903	31,277	36.84%
Cheshire County, NH	9,654	3,262	33.79%
Sullivan County, NH	5,629	1,992	35.39%
New Hampshire	194,242	48,966	25.21%
United States	49,692,766	24,021,069	48.34%

Source: CHNA.org - US Dept of Education, National Center for Education Statistics (NCES), Common Core of Data, Public School Universe

Local child nutrition program data shows percentage of students enrolled in the school lunch program who are eligible for free and reduced price school meals within our service area as follows:

Flood Brook (Londonderry)	K-8, 28.52% low income
Green Mtn (Chester)	7-12, 52.49%
Ludlow	Preschool-12, 61.64%
Reading	K-6, 51.52%
Rockingham	K-12, 57.60%
Springfield	K-12, 58.36%
Weathersfield School	45.28%
State Average	40.21%

Source: The State of Vermont Department of Education, Child Nutrition Programs, Annual Statistical Report for School Year 2011-2012

High School Graduation Rate

	Avg Freshman Enrollment	Est. # of Diplomas Issued	On-Time Grad Rate
Windham County	505	402	79.70
Windsor County	712	605	85.00
Vermont	8,048	7,209	89.60
Cheshire County	920	787	85.60
Sullivan County	464	384	82.90
New Hampshire	17,510	14,757	84.30
United States	4,024,345	3,039,015	75.50

Source: CHNA.org - The University of Wisconsin Population Health Institute, County Health Rankings, 2012, and the US Department of Education National Center for Education Statistics (NCES), Common Core of Data, Public School Universe Survey Data, 2005-06, 2006-07, and 2007-08.

The Vermont Department of Education's Public School Dropout and High School Completion Report for the 2010-2011 School year reports Springfield High School with a 7.07% 9th-12th dropout rate. While the overall state dropout rate was 3.66% for 2011 (down from 5.70% for 2001), Springfield High School's rate of 7.07% is the third highest rate in the state, following Concord Schools of 10.87% and Winooski at 7.49%. Bellows Falls UHSD #27 reported 4.62%

The Vermont statewide cohort rate (on-time graduation) for the class of 2011 was reported at 87.46%, unchanged from 2010. Bellows Falls UHSD #27 2011 cohort rate is significantly lower than statewide average at 76.14%, and Springfield High School reported 70.40%. The Healthy People 2020 Target is >82.4.

Source: Vermont Department of Education Public School Dropout and High School Completion Report, 2010 - 2011.

Poverty Rate (<100% FPL)

	Population in Poverty	% Population in Poverty
Windham County, VT	4,623	10.73%
Windsor County, VT	5,728	10.28%
Vermont	67,761	11.29%
Cheshire County, NH	7,131	9.87%
Sullivan County, NH	4,463	10.37%
New Hampshire	101,634	7.97%
United States	42,739,924	14.30%

Source: U. S. Census Bureau, 2007-2011 American Community Survey 5-Year Estimates

Percent Below 200% Poverty Level

	Population < 200% PL	% Population < 200% PL
Windham County, VT	13,309	30.90%
Windsor County, VT	14,547	26.11%
Vermont	169,342	28.21%
Cheshire County, NH	18,833	26.07%
Sullivan County, NH	11,821	27.47%
New Hampshire	269,557	21.13%
United States	97,686,536	32.69%

Source: U. S. Census Bureau, 2007-2011 American Community Survey 5-Year Estimates

Population Receiving Medicaid

	Population Receiving Medicaid	% Population Receiving Medicaid
Windham County, VT	10,625	26.34%
Windsor County, VT	12,972	24.89%
Vermont	145,501	23.25%
Cheshire County, NH	8,796	12.84%
Sullivan County, NH	5,612	14.76%
New Hampshire	140,827	10.69%
United States	51,335,184	19.91%

Source: CHNA.org - U. S. Census Bureau, 2008-2010 American Community Survey 5-Year Estimates

Requirements for obtaining Medicaid vary by state, with NH more difficult. This may explain some of the variation.

Population with No High School Diploma

	Population Age 25 w/o HS Diploma	% Population Age 25 w/o HS Diploma
Windham County, VT	2,662	8.39%
Windsor County, VT	3,161	7.57%
Vermont	38,593	8.99%
Cheshire County, NH	5,127	10.00%
Sullivan County, NH	3,112	9.93%
New Hampshire	79,097	8.77%
United States	29,518,934	14.61%

Source: CHNA.org - U. S. Census Bureau, 2007-2011 American Community Survey 5-Year Estimates

Teen Births

	Female Pop 15-19	Births to Mothers 15-19	Teen Birth Rate per 1,000 births
Windham County, VT	9,784	226	23.10
Windsor County, VT	12,294	284	23.10
Vermont	155,950	3,119	20.00
Cheshire County, NH	23,107	409	17.70
Sullivan County, NH	8,787	326	37.10
New Hampshire	324,837	5,977	18.40
United States	72,071,117	2,969,330	41.20

Source: CHNA.org - Centers for Disease Control and Prevention, National Vital Statistics Systems, 2003-2009, accessed through Health Indicators

The National Vital Statics Reports, dated August 2012, reports that in 2010, the U.S. teen birth rate (ages 15-19) fell 10 % to 34.2 per 1,000, with the 18-19 age category reporting a 58.2 birth rate per 1,000 (down from 64.0 in 2009).

The Vermont rate for 18-19 year olds increased from 17.3 in 2009, to 17.9 in 2010 (the third lowest in the U.S. Source: KFF.org).

<u>Unemployment Rate</u>	Labor Force	# Employed	# Unemployed	Rate
Windham County, VT	24,239	23,075	1,164	4.80
Windsor County, VT	30,812	29,557	1,255	4.07
Vermont	349,553	334,810	14,743	4.22
Cheshire County, NH	40,893	38,867	2,026	5.00
Sullivan County, NH	23,060	22,070	990	4.29
New Hampshire	741,371	703,830	37,541	5.06
United States	155,733,703	144,431,759	11,301,944	7.26

Source: CHNA.org - U.S. Bureau of Labor Statistics, May 2013 Local Area Unemployment Statistics

Uninsured Population (adults)

	Population <65	Population w/o Medical Insurance	% Population w/o medical ins.	Population w/ Medical Ins.	% Pop w/ Medical Ins.
Windham County, VT	36,194	3,692	10.20%	32,502	89.80%
Windsor County, VT	45,778	4,128	9.00%	41,650	91.00%
Vermont	512,348	49,750	9.71%	462,598	90.29%
Cheshire County, NH	61,551	8,977	14.60%	52,574	85.40%
Sullivan County, NH	36,215	5,056	14.00%	31,159	86.00%
New Hampshire	1,103,465	143,475	13.00%	959,991	87.00%
United States	262,403,381	46,556,803	17.74%	215,846,576	82.26%

Source: CHNA.org - U.S. Census Bureau, Small Area Health Insurance Estimates (SAHIE), 2010

THE ENVIRONMENT

Air Quality - Poor air quality contributes to respiratory issues and overall poor health. The SMCS service area rates are 0.27% for all four counties. This measures against statewide rates of 0.20% for Vermont; 0.04% for New Hampshire; and 0.47% for the United States overall.

Source: CHNA.org - Centers for Disease Control and Prevention, National Environmental Public Health Tracking Network, 2008.

Fast Food Restaurant Access - Rates per 100,000 population

Windham County is high compared to the statewide average as well as the national average. Cheshire and Sullivan Counties are low compared to state and national averages.

Windham County	89.86
Windsor County	51.17
Vermont	56.57
Cheshire County	58.35
Sullivan County	54.87
New Hampshire	78.54
United States	70.04

Source: CHNA.org - U.S. Census Bureau, County Business Patterns, 2012.

Grocery Store Access reports the number of grocery stores per 100,000 population. Convenience stores and large warehouse stores are excluded. This indicator provides a measure of healthy food access and environmental influences on dietary behaviors. Sullivan County is lower than state and national averages. Vermont exceeds national averages, and Windham and Windsor counties are well above state averages.

Windham County	40.44
Windsor County	47.64
Vermont	37.56
Cheshire County	27.23
Sullivan County	16.00
New Hampshire	19.75
United States	20.85

Source: CHNA.org - U.S. Census Bureau, County Business Patterns, 2012.

Liquor Store Access

This indicator reports the number of beer, wine and liquor stores, rate per 100,000 population. This indicator provides a measure of environmental influences on behaviors. Windham and Windsor rates are higher than state and national rates.

	Population	# stores	Rate per 100,000 population
Windham County, VT	44,513	10	22.47
Windsor County, VT	56,670	15	26.47
Vermont	625,741	123	19.66
Cheshire County, NH	77,117	8	10.37
Sullivan County, NH	43,742	2	4.57
New Hampshire	1,316,470	96	7.29
United States	308,745,538	31,876	10.32

Source: CHNA.org - U.S. Census Bureau, County Business Patterns, 2012.

Low Income Population with Low Food Access

This indicator measures supermarket accessibility for the low income population. (Lower is better.)

	Population	Low Income Population with low food access	% Low Income Population with low food access
Windham County, VT	44,513	3,080	6.92%
Windsor County, VT	56,670	1,750	3.09%
Vermont	625,741	20,617	3.29%
Cheshire County, NH	77,117	3,094	4.01%
Sullivan County, NH	43,742	4,071	9.31%
New Hampshire	1,316,470	57,796	4.39%
United States	308,745,538	19,347,047	6.27%

Source: CHNA.org - U.S. Department of Agriculture, Food Access Atlas, 2013

Population with Low Food Access

This indicator measures supermarket accessibility for the overall population. (Lower is better.)

	Population	Population w/low food access	% Population w/low food access
Windham County, VT	44,513	7,603	17.08%
Windsor County, VT	56,670	5,367	9.47%
Vermont	625,741	79,913	12.77%
Cheshire County, NH	77,117	14,688	19.05%
Sullivan County, NH	43,742	14,306	32.71%
New Hampshire	1,316,470	372,117	28.27%
United States	308,745,538	72,905,540	23.61%

Source: CHNA.org - U.S.Department of Agriculture, Food Access Atlas, 2013

SNAP Authorized Food Access Supplemental Nutrition Assist. Pgm - Source: CHNA.org - U.S.Department of Agriculture, Food Environ.Atlas, 2012

This indicator reports the number of authorized stores as a rate per 100,000, includes grocery stores as well as supercenters, specialty food stores, and convenience stores authorized to accept SNAP.

	Total Population	SNAP-Authorized Retailers	SNAP-Auth Retailers Rate/100,000 pop
Windham County, VT	44,266	54	121.99
Windsor County, VT	56,666	53	93.53
Vermont	626,431	682	108.87
Cheshire County, NH	76,918	61	79.31
Sullivan County, NH	43,462	31	71.33
New Hampshire	1,318,194	1,007	76.39
United States	311,449,532	255,511	82.04

Park Access

This measures the percentage of population living within 1/2 mile of a park. The indicator is relevant because access to outdoor recreation encourages physical activity and other healthy behaviors. Numbers reported are low in Windham (10%), Windsor (12%), and Sullivan (13%) compared to Vermont (15%) and New Hampshire (17%), and U.S. (39%). This indicator is likely more relevant in non-rural areas.

Source: CHNA.org -Centers for Disease Control and Prevention, National Environmental Public Health Tracking Network, 2010.

Recreation & Fitness Facility Access - This indicator reports the number of recreation and fitness facilities (defined by the North American Industry Classification System.) Access to recreation and fitness facilities encourages physical activity and other healthy behaviors. Numbers reported are low in Sullivan County (2.29), but a new fitness center recently opened in Claremont. Windsor County (14.22) is higher, and Windham County (11.23) is lower than Vermont overall (13.58), but higher than U.S. overall (9.56).

Source: CHNA.org - U.S. Census Bureau, County Business Patterns, 2011.

Use of Public Transportation

This indicator reports the percentage of the population using public transportation as their primary means of commute to work. Numbers reported are low across the board as would be expected in our rural area without a good means of public transport available for worksite destinations. Cheshire and Sullivan Counties .21; NH .77; Windham .31; Windsor .88, VT 1.08, U.S. 4.96.

Source: CHNA.org - U.S. Census Bureau, 2007-2011 American Community Survey 5-Year Estimates.

Clinical Care

Access to Primary Care

County	Total Population	Total PCPs	PCP Rate per 100,000 pop.
Windham County, VT	44,513	56	125.80
Windsor County, VT	56,670	65	114.69
Vermont	625,741	761	121.60
Cheshire County, NH	77,117	53	68.72
Sullivan County, NH	43,742	34	77.72
New Hampshire	1,316,470	1,286	97.60
United States	312,471,327	264,897	84.70

Source: CHNA.org - U.S. Health Resources and Services Administration Area Resource File, 2011.

Breast Cancer Screening (Mammograms)

	Total Medicare Enrollees	Female Med Enrollees 67-69	Female Medicare Enrollees w/Mammogram w/i 2 yrs	% Medicare Enrollees w/Mammogram in 2 yrs.
Windham County, VT	6,240	542	386	71.40%
Windsor County, VT	8,938	743	539	72.68%
Vermont	80,273	6,705	4,849	72.33%
Cheshire County, NH	9,823	773	545	70.63%
Sullivan County, NH	6,007	510	370	72.75%
New Hampshire	149,975	12,407	9,196	74.13%
United States	51,875,184	4,218,820	2,757,677	65.37%

Source: CHNA.org - Dartmouth Atlas of Healthcare, Selected Measures of Primary Care Access and Quality, 2010.

Cervical Cancer Screening (Pap test)

This indicator measures the percentage of women aged 18+ who self-report they have had a Pap test within three years, important for early detection/treatment of health problems. Poor numbers may highlight a lack of access to preventive care, lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

	Female Pop Age 18	Est Pop with Reg Pap	% Pop with Reg Pap
Windham County, VT	17,976	14,129	78.60%
Windsor County, VT	23,501	18,660	79.40%
Vermont	251,633	205,836	81.80%
Cheshire County, NH	31,746	24,508	77.20%
Sullivan County, NH	17,131	13,790	80.50%
New Hampshire	521,297	426,942	81.90%
United States	94,071,886	75,649,213	80.42%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2004-2010.

Colon Cancer Screenings

Reporting the percentage of adult men aged 50+ who self-report they have ever had a sigmoidoscopy or colonoscopy.

	Male age 50+	Est Pop Ever Screened	% Pop Ever Screened
Windham County, VT	8,086	4,932	61.00%
Windsor County, VT	10,796	6,478	60.00%
Vermont	101,541	65,088	64.10%
Cheshire County, NH	12,462	7,540	60.50%
Sullivan County, NH	7,519	4,541	60.40%
New Hampshire	202,212	132,853	65.70%
United States	41,994,838	24,124,869	57.45%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2004-2010.

Dental Care Utilization

This indicator reports the percentage of adults age 18+ who self-report they have **not** visited a dentist, dental hygienist or dental clinic within the past year.

	Total Pop age 18	Total Adults w/o dental exam within the past year	% Adults w/o dental exam
Windham County, VT	35,325	9,383	26.56%
Windsor County, VT	45,292	12,384	27.34%
Vermont	494,588	124,416	25.16%
Cheshire County, NH	61,700	15,904	25.78%
Sullivan County, NH	34,216	10,054	29.38%
New Hampshire	1,025,011	237,144	23.14%
United States	235,375,690	70,965,788	30.15%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2006-2010.

Diabetes Management (Hemoglobin A1c Test)

This indicator reports the percentage of diabetic Medicare patients who have had a hA1c test, administered by a health professional within the past year.

	Total Medicare Enrollees	Med Enrollees w/Diabetes	Med Enrollees w/Diabetes w/annual exam	% Med Enrollees w/diabetes w/annual exam
Windham County, VT	6,240	528	462	87.69%
Windsor County, VT	8,938	773	686	88.87%
Vermont	80,273	7,881	7,007	88.92%
Cheshire County, NH	9,823	992	882	89.01%
Sullivan County, NH	6,007	586	504	86.18%
New Hampshire	149,975	15,962	14,201	88.97%
United States	51,875,184	6,218,804	5,212,097	83.81%

Source: CHNA.org - Dartmouth Atlas of Healthcare, Selected Measures of Primary Care Access and Quality, 2010.

Lack of Consistent Source of Primary Care

This indicator reports the percentage of adults aged 18+ who self-report that they do not have at least one person who they think of as their personal doctor or primary care provider. This indicator is relevant because access to regular primary care is important to preventing major health issues and emergency department visits.

	Total Pop age 18	Total adults w/o Reg MD	% Adults w/o Reg MD
Windham County, VT	35,325	4,078	11.54%
Windsor County, VT	45,292	6,329	13.97%
Vermont	494,588	59,576	12.05%
Cheshire County, NH	61,700	7,463	12.10%
Sullivan County, NH	34,216	4,684	13.69%
New Hampshire	1,025,011	112,210	10.95%
United States	235,375,690	45,514,047	19.34%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2006-2010.

Pneumonia Vaccinations (age 65)

This reports the percentage of adults age 65+ who self report that they have ever had a pneumonia vaccine.

	Total Pop age 65	Est.Pop w/Annual Pneu Vacc	% Pop w/Annual Pneu Vacc
Windham County, VT	6,722	4,800	71.40%
Windsor County, VT	9,680	6,495	67.10%
Vermont	32,467	22,857	70.40%
Cheshire County, NH	11,018	8,043	73.00%
Sullivan County, NH	7,013	4,909	70.00%
New Hampshire	66,213	47,342	71.50%
United States	15,659,860	10,389,527	66.34%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2005-2011.

Preventable Hospital Events

This reports the discharge rate per 1,000 Medicare enrollees for conditions that are ambulatory care sensitive, including pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available and accessed by these patients.

	Total Med A Enrollees	Ambulatory Care Sensitive Condition Hospital Discharges	Ambulatory Care Sensitive Condition Discharge Rate
Windham County, VT	6,657	350	52.67
Windsor County, VT	9,566	532	55.69
Vermont	84,968	4,299	50.60
Cheshire County, NH	10,589	499	47.15
Sullivan County, NH	6,450	331	51.47
New Hampshire	161,962	9,076	56.04
United States	56,167,590	3,737,659	66.54

Source: CHNA.org - Dartmouth Atlas of Healthcare, Selected Measures of Primary Care Access and Quality, 2010.

HEALTH BEHAVIORS

Alcohol Consumption

Adults age 18+ who self-report heavy alcohol consumption (more than 2 drinks per day for men and 1 drink per day for women). Current behaviors are determinants of future health and this may illustrate a cause of significant health issues, such as cirrhosis, cancers, and untreated mental and behavioral health needs.

	Total Pop age 18	Est Pop Heavily Consuming Alcohol	% Population Heavily Consuming
Windham County, VT	35,325	5,475	15.50%
Windsor County, VT	45,292	7,654	16.90%
Vermont	128,555	21,726	16.90%
Cheshire County, NH	61,700	8,885	14.40%
Sullivan County, NH	34,216	4,517	13.20%
New Hampshire	433,190	68,011	15.70%
United States	89,135,163	13,385,866	15.02%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2005-2011.

Fruit/Vegetable Consumption

	Total Pop age 18	Est Pop Inadequate Consumption	% Population Inadequate Consumption
Windham County, VT	34,716	23,815	68.60%
Windsor County, VT	45,450	31,588	69.50%
Vermont	185,036	129,340	69.90%
Cheshire County, NH	61,337	43,611	71.10%
Sullivan County, NH	33,422	24,732	74.00%
New Hampshire	258,492	184,822	71.50%
United States	116,676,632	88,508,989	75.86%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2005-2009.

Physical Inactivity

	Total Pop age 20	Population w/no Leisure Time Phys Activity	% Population w/no Leisure Time Phys Activity
Windham County, VT	33,940	5,634	15.80%
Windsor County, VT	44,332	8,955	19.10%
Vermont	474,092	91,806	18.74%
Cheshire County, NH	58,550	12,764	21.30%
Sullivan County, NH	32,769	8,520	25.00%
New Hampshire	995,797	215,660	21.28%
United States	223,602,200	53,553,398	23.67%

Source: CHNA.org - Centers for Disease Control and Prevention, National Diabetes Surveillance System, 2009.

Tobacco Usage (Current Smoker)

Percentage of adult smokers, age 18+, who self-report currently smoking cigarettes some days or every day.

	Total Pop age 18	Est Population Regularly Smoking	% Population Regularly Smoking Cigarettes
Windham County, VT	35,325	6,005	17.00%
Windsor County, VT	45,292	7,473	16.50%
Vermont	491,759	83,599	17.00%
Cheshire County, NH	61,700	11,353	18.40%
Sullivan County, NH	34,216	6,912	20.20%
New Hampshire	1,017,987	179,165	17.60%
United States	229,932,154	42,664,071	18.56%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2006-2010.

Tobacco Usage (Quit Attempt)

Number of adult smokers who attempted to quit smoking for at least 1 day in the past year.

	Total Pop age 18	Total Smokers w/ Quit Attempt w/i 12 mos	% Smokers w/Quit Attempt w/i past 12 mos
Windham County, VT	35,325	19,432	55.01%
Windsor County, VT	45,292	27,464	60.64%
Vermont	494,588	288,701	58.37%
Cheshire County, NH	61,700	39,545	64.09%
Sullivan County, NH	34,216	19,467	56.89%
New Hampshire	1,025,011	618,574	60.35%
United States	235,375,690	137,674,809	58.49%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2006-2010.

HEALTH OUTCOMES

Accident Mortality (unintentional injury per 100,000 population)

	Total Pop	Avg Annual Deaths 2006-2010	Crude Death Rate	Age adjusted
Windham County, VT	44,439	28	63.46	54.74
Windsor County, VT	56,895	35	60.81	52.39
Vermont	624,216	303	48.57	44.28
Cheshire County, NH	77,459	37	47.51	44.07
Sullivan County, NH	43,648	22	49.94	47.28
New Hampshire	1,313,881	495	37.66	36.15
United States	303,844,430	121,217	39.89	39.07
HP 2020 Target				<=36.0

Source: CHNA.org - Centers for Disease Control and Prevention, National Center for Health Statistics, Underlying Cause of Death, 2006-2010

Asthma Prevalence

Percentage of adults age 18+ who self-report they have ever been told by a doctor, nurse, or other health professional that they had asthma.

	Total Pop age 18	Total adults w/asthma	% adults w/asthma
Windham County, VT	35,325	5,683	16.09%
Windsor County, VT	45,292	7,097	15.67%
Vermont	494,588	74,728	15.11%
Cheshire County, NH	61,700	9,171	14.86%
Sullivan County, NH	34,216	5,620	16.43%
New Hampshire	1,025,011	157,051	15.32%
United States	235,375,690	31,061,484	13.20%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2006-2010.

Breast Cancer Incidence

Age adjusted incidence rate (cases per 100,000 population per year) of females with breast cancer.

	Total Pop ACS 2005-09	Annual Cancer Incidence 2005-2009 Average	Annual Incidence Rate Breast Cancer
Windham County, VT	43,627	60	136.80
Windsor County, VT	56,921	72	126.30
Vermont	620,414	803	129.40
Cheshire County, NH	77,174	99	128.10
Sullivan County, NH	42,641	52	121.80
New Hampshire	1,315,419	1,743	132.50
United States	301,461,536	367,783	122.00

Source: CHNA.org - Centers for Disease Control and Prevention, and the National Cancer Institute: State Cancer Profiles, 2005-2009

Cancer Mortality

Rate of death due to malignant neoplasm (cancer) per 100,000 population.

	Total Population	Avg. Annual Deaths 2006-2010	Crude Death Rate per 100,000 pop.	Age Adjusted Death Rate, Cancer
Windham County, VT	44,439	103	231.33	181.26
Windsor County, VT	56,895	136	238.34	171.55
Vermont	624,216	1,297	207.78	177.92
Cheshire County, NH	77,459	153	198.04	169.68
Sullivan County, NH	43,648	105	241.02	185.43
New Hampshire	1,313,881	2,561	194.93	177.20
United States	303,844,430	566,121	186.32	176.66
HP 2020 Target				<=160.6

Source: CHNA.org - Centers for Disease Control and Prevention, National Center for Health Statistics, Underlying Causes of Death, 2006-2010

Chlamydia Incidence (rate per 100,000 population)

	Total Population 2010	Reported Cases	Chlamydia Rate
Windham County, VT	44,513	58	134.30
Windsor County, VT	56,670	98	173.20
Vermont	625,741	1,186	190.91
Cheshire County, NH	77,117	134	173.60
Sullivan County, NH	43,742	99	232.40
New Hampshire	1,316,470	2,102	159.74
United States	308,730,677	1,236,680	406.89

Source: CHNA.org - Centers for Disease Control and Prevention, and the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2009

Colon and Rectum Cancer Incidence (rate per 100,000 population)

	Total Population	Annual Cancer Incidence 05-09 Avg	Annual Incidence Rate
Windham County, VT	43,627	18	40.60
Windsor County, VT	56,921	20	35.50
Vermont	620,414	269	43.30
Cheshire County, NH	77,174	33	42.80
Sullivan County, NH	42,641	19	45.10
New Hampshire	1,315,419	592	45.00
United States	301,461,536	121,188	40.20
HP 2020 Target			<= 38.6

Source: CHNA.org - Centers for Disease Control and Prevention, and the National Cancer Institute: State Cancer Profiles, 2005-2009.

Diabetes Prevalence

Percentage of adults age 20+ who have ever been told by a doctor that they have diabetes.

	Total Population age 20	Pop diagnosed w/diabetes	% Pop w/diagnosed diabetes
Windham County, VT	33,925	2,273	5.60%
Windsor County, VT	44,165	3,489	6.40%
Vermont	472,824	32,974	6.18%
Cheshire County, NH	58,432	5,142	7.80%
Sullivan County, NH	32,565	2,996	7.80%
New Hampshire	993,344	81,952	7.49%
United States	223,653,607	20,615,282	8.72%

Source: CHNA.org - Centers for Disease Control and Prevention, National Diabetes Surveillance System, 2009.

Gonorrhea Incidence

	Population age 18	Infections	Infection Rate (per 100,000 population)
Windham County, VT	44,513	0	0
Windsor County, VT	56,670	7	12.40
Vermont	625,741	58	9.27
Cheshire County, NH	77,117	13	16.90
Sullivan County, NH	43,742	8	18.30
New Hampshire	1,316,470	151	11.47
United States	308,744,685	307,929	99.74

Source: CHNA.org - Centers for Disease Control and Prevention, and the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2009

Heart Disease Mortality

	Total Population	Avg. Annual Deaths 2006-2010	Crude Death Rate per 100,000 population	Age Adjusted Rate per 100,000 population
Windham County, VT	44,439	63	140.87	109.68
Windsor County, VT	56,895	83	145.53	103.74
Vermont	624,216	888	142.32	121.00
Cheshire County, NH	77,459	111	142.79	120.98
Sullivan County, NH	43,648	74	168.62	130.73
New Hampshire	1,313,881	1,667	126.91	115.05
United States	303,844,430	432,552	142.36	134.65
HP 2020 Target				<= 100.8

Source: CHNA.org - Centers for Disease Control and Prevention, National Center for Health Statistics, Underlying Cause of Death, 2006-2010.

Heart Disease Prevalence

Percentage of adults age 18+ who have ever been told by a doctor that they have coronary heart disease or angina.

	Total Pop., age 18	Total Adults w/heart disease	Percent Adults w/heart disease
Windham County, VT	35,325	1,403	3.97%
Windsor County, VT	45,292	2,081	4.59%
Vermont	494,588	20,790	4.20%
Cheshire County, NH	61,700	2,781	4.51%
Sullivan County, NH	34,216	1,933	5.65%
New Hampshire	1,025,011	43,614	4.25%
United States	235,375,690	10,183,713	4.33%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Surveillance System, 2006-2010.

Infant Mortality

Rate of deaths to infants <1 yr per 1,000 births

	Total Births	Total Infant Deaths	Infant Mortality Rate per 1,000
Windham County, VT	3,015	12	3.98
Windsor County, VT	3,803	25	6.57
Vermont	44,956	241	5.36
Cheshire County, NH	5,222	26	4.98
Sullivan County, NH	3,270	12	3.67
New Hampshire	98,984	496	5.01
United States	58,600,996	393,074	6.71
HP 2020 Target			<= 6.0

Source: CHNA.org - Centers for Disease Control and Prevention, National Vital Statistics System, 2003-2009.

Low Birth Weight

Percent of total births that were low birth weight under 2500 g)

	Total Births	Number Low Birth Weight	Percent Low Birth Weight
Windham County, VT	3,035	152	5.01%
Windsor County, VT	3,827	254	6.64%
Vermont	45,151	2,977	6.59%
Cheshire County, NH	5,168	304	5.88%
Sullivan County, NH	3,324	257	7.73%
New Hampshire	99,911	6,566	6.57%
United States	29,126,451	2,359,843	8.10%

Source: CHNA.org - Centers for Disease Control and Prevention, National Vital Statistics Systems, 2003-2009

Lung Cancer Incidence

Number of cases per 100,000 population per year

	Total Pop. ACS 05-09	Annual Incidence 05-09 Avg.	Annual Incidence Rate
Windham County, VT	43,627	27	62.20
Windsor County, VT	56,921	41	72.20
Vermont	620,414	446	71.80
Cheshire County, NH	77,174	53	68.20
Sullivan County, NH	42,641	31	73.60
New Hampshire	1,315,419	922	70.00
United States	301,461,536	202,582	67.20

Source: CHNA.org - Centers for Disease Control and Prevention, National Cancer Institute; State Cancer Profiles, 2005-2009.

Lung Disease Mortality

Rate of death due to chronic lower respiratory disease per 100,000 population.

	Total Pop	Avg Ann. Deaths 06-10	Crude Death Rate	Age Adjusted
Windham County, VT	44,439	28	63.91	50.54
Windsor County, VT	56,895	29	51.67	37.66
Vermont	624,216	335	53.70	46.79
Cheshire County, NH	77,459	48	61.45	53.04
Sullivan County, NH	43,648	24	55.90	43.09
New Hampshire	1,313,881	633	48.15	45.01
United States	303,844,430	133,806	44.04	42.40

Source: CHNA.org - Centers for Disease Control and Prevention, National Center for Health Statistics, Underlying Cause of Death, 2006-2010.

Motor Vehicle Crash Death

Reports the rate of death per 100,000 population, which includes collisions with another motor vehicle, a nonmotorist, a fixed object, and a non-fixed object, an overturn, and any other non-collision.

	Total Pop	Avg Ann. Deaths 06-10	Crude Death Rate	Age Adjusted
Windham County, VT	44,439	7	14.85	15.03
Windsor County, VT	56,895	7	12.65	13.12
Vermont	624,216	79	12.59	12.04
Cheshire County, NH	77,459	11	14.72	13.94
Sullivan County, NH	43,648	7	16.50	17.55
New Hampshire	1,313,881	133	10.12	9.86
United States	303,844,430	40,120	13.20	13.04

Source: CHNA.org - Centers for Disease Control and Prevention, National Center for Health Statistics, Underlying Cause of Death, 2006-2010.

Obesity (Adult)

Percent of adults age 20+ who self-report they have a body mass index greater than 30 (obese).

	Total Pop age 20	% Population w/BMI > 30	% Population w/BMI > 30 (obese)
Windham County, VT	33,802	7,842	23.10%
Windsor County, VT	44,289	10,718	24.20%
Vermont	474,224	114,429	23.95%
Cheshire County, NH	58,708	16,497	28.20%
Sullivan County, NH	32,741	9,364	28.80%
New Hampshire	994,911	264,491	26.43%
United States	223,576,989	61,460,308	27.35%

Source: CHNA.org - Centers for Disease Control and Prevention, National Diabetes Surveillance System, 2009.

Overweight (Adult)

Percent of adults age 18+ who self-report they have a body mass index between 25.0 and 30.0 (overweight).

	Total Pop age 18	Total Adults Overweight	Percent Adults Overweight
Windham County, VT	35,325	11,979	33.91%
Windsor County, VT	45,292	15,221	33.61%
Vermont	494,588	174,416	35.26%
Cheshire County, NH	61,700	21,470	34.80%
Sullivan County, NH	34,216	12,811	37.44%
New Hampshire	1,025,011	383,988	37.46%
United States	235,375,690	85,495,735	36.32%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2006-2010.

Poor Dental Health

Percentage of adults 18+ self report 6+ of permanent teeth have been removed due to decay, disease, infection.

	Total Pop age 18	Est Pop w/Poor Dental Health	% Pop w/Poor Dental Health
Windham County, VT	35,325	6,086	17.23%
Windsor County, VT	45,292	7,423	16.39%
Vermont	494,588	78,398	15.85%
Cheshire County, NH	61,700	9,900	16.05%
Sullivan County, NH	34,216	6,794	19.86%
New Hampshire	1,025,011	148,774	14.51%
United States	235,375,690	36,842,620	15.65%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2006-2010.

Poor General Health

Percentage of adults 18+, self report having poor or fair health.

	Total Pop age 18	Est Pop w/Poor/Fair Health	% Pop w/Poor/Fair Health
Windham County, VT	35,325	4,098	11.60%
Windsor County, VT	45,292	4,801	10.60%
Vermont	491,759	53,602	10.90%
Cheshire County, NH	61,700	7,713	12.50%
Sullivan County, NH	34,216	4,037	11.80%
New Hampshire	1,017,987	115,033	11.30%
United States	229,932,154	36,429,871	15.84%

Source: CHNA.org - Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2005-2011.

Population with any Disability

Percentage of total civilian non-institutionalized population with a disability.

	Pop w/Disability Status	Total Pop w/a Disability	% Pop w/a Disability
Windham County, VT	44,398	6,757	15.36%
Windsor County, VT	56,672	9,386	16.81%
Vermont	625,717	82,325	13.16%
Cheshire County, NH	77,097	9,169	12.00%
Sullivan County, NH	43,638	6,524	15.09%
New Hampshire	1,317,033	147,129	11.17%
United States	309,231,232	36,499,048	12.00%

Source: CHNA.org - U.S. Census Bureau, 2008-2010 American Community Survey 3-year Estimates.

Premature Death

Years potential life lost before age 75 per 100,000 population for all causes of death.

	Total Pop 2008-10 Avg	Total Premature Deaths	Total YPLL 2008-2010 avg	YPLL Rate
Windham County, VT	44,266	176	2,734	6,176
Windsor County, VT	56,666	199	3,170	5,593
Vermont	626,431	2,014	33,804	5,396
Cheshire County, NH	76,918	253	4,371	5,682
Sullivan County, NH	43,462	166	2,733	6,288
New Hampshire	1,318,194	4,050	70,009	5,311
United States	311,616,188	1,074,667	21,327,690	6,851

Source: CHNA.org - Centers for Disease Control and Prevention, National Vital Statistics System, 2008-2010 (As reported by County Health Rankings)

Prostate Cancer Incidence

Age adjusted incidence rate of males with prostate cancer, age adjusted to 2000 U.S. standard population age groups.

	Total Pop ACS 2005-09	Annual Cancer Incidence 2005-2009 Avg	Annual Incidence Rate Prostate Cancer per 100,000 population
Windham County, VT	43,627	65	149.80
Windsor County, VT	56,921	94	165.90
Vermont	620,414	936	150.80
Cheshire County, NH	77,174	101	131.10
Sullivan County, NH	42,641	57	135.40
New Hampshire	1,315,419	2,040	155.00

Source: CHNA.org - The Centers for Disease Control and Prevention, and the National Cancer Institute: State Cancer Profiles, 2005-2009.

Stroke Mortality

	Total Pop	Average Annual Deaths 2006-2010	Crude Death Rate per 100,000 population	Age Adjusted Death Rate Stroke Mortality per 100,000 pop.
Windham County, VT	44,439	19	43.66	35.22
Windsor County, VT	56,895	29	50.27	35.29
Vermont	624,216	260	41.65	35.84
Cheshire County, NH	77,459	31	39.76	33.77
Sullivan County, NH	43,648	21	48.11	37.84
New Hampshire	1,313,881	493	37.54	34.49
United States	303,844,430	133,107	43.81	41.78

Source: CHNA.org - Centers for Disease Control and Prevention, National Center for Health Statistics, Underlying Cause of Death, 2006-2010.

Suicide

Reports the rate of death due to intentional self-harm (suicide) per 100,000 population.

	Total Pop	Average Annual Deaths 2006-2010	Crude Death Rate per 100,000 population	Age Adjusted Death Rate Suicide per 100,000 pop.
Windham County, VT	44,439	7	15.30	15.06
Windsor County, VT	56,895	8	14.41	12.75
Vermont	624,216	91	14.64	13.80
Cheshire County, NH	44,439	10	13.17	13.18
Sullivan County, NH	56,895	7	15.12	15.31
New Hampshire	1,313,881	170	12.94	12.30
United States	303,844,430	35,841	11.80	11.57
HP 2020 Target				<= 10.2

Source: CHNA.org - Centers for Disease Control and Prevention, National Center for Health Statistics, Underlying Cause of Death, 2006-2010.

COMMUNITY INPUT

Tab 1 - Survey Monkey Survey Results

Tab 2 - Survey Monkey Questionnaire and Distribution

Tab 3 - Community Health Team Questionnaire and Summary

Tab 4 - Focus Group Executive Summary - Springfield - and Invitation List

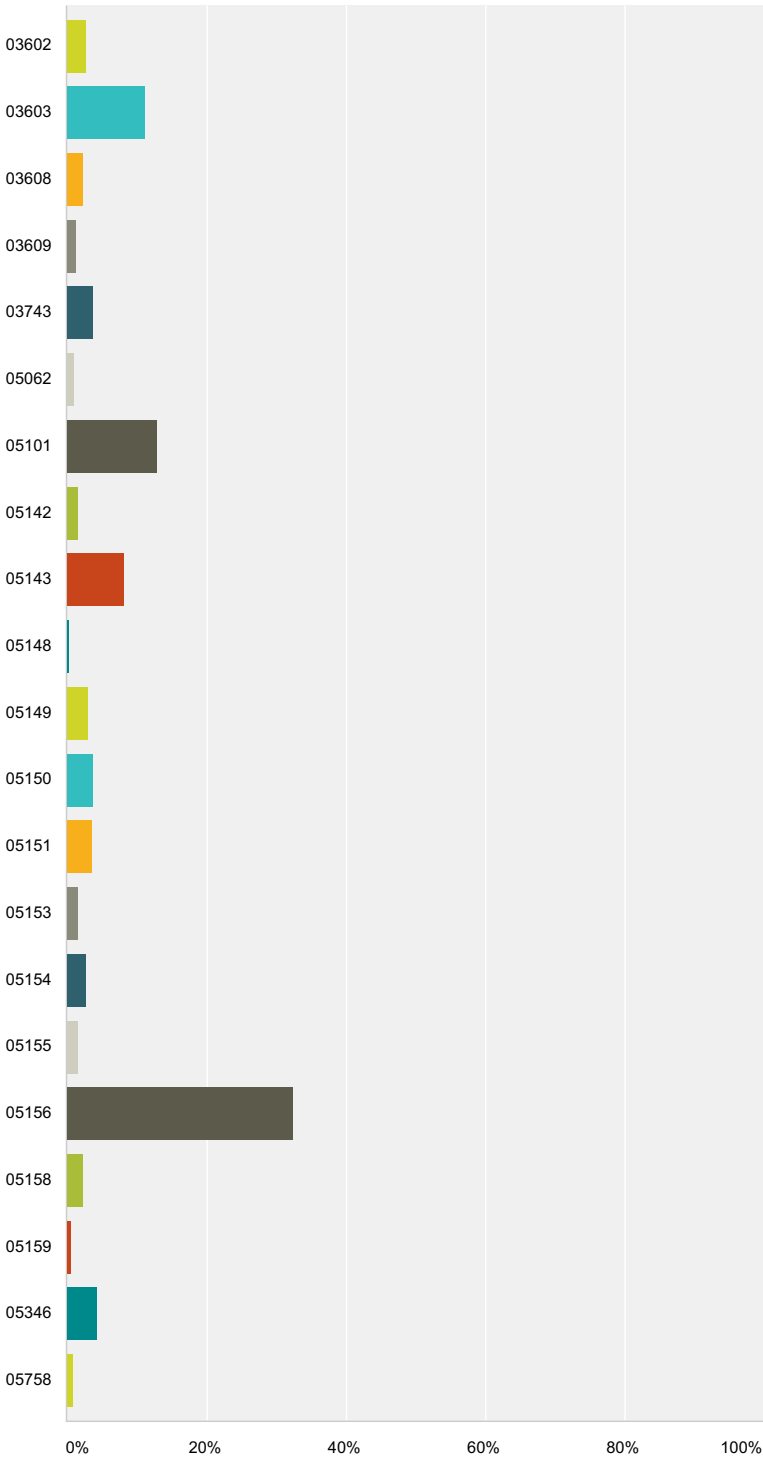
Tab 5 - Medical Staff Summary

Tab 6 - Community Members Personal Interview Contact List

2013 Community Health Needs Assessment

Q1 Please identify your zip code.

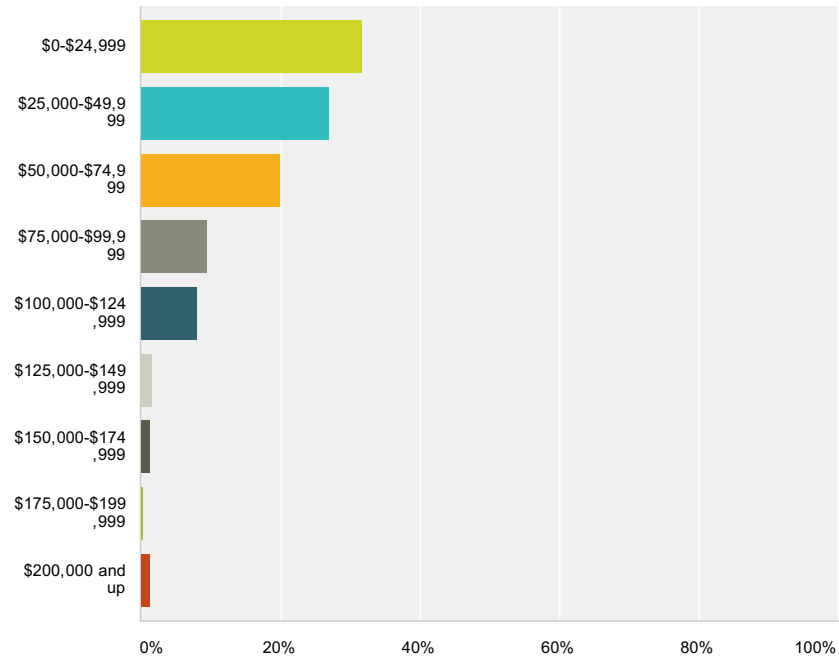
Answered: 405 Skipped: 35



2013 Community Health Needs Assessment

Q2 What is your approximate average household income?

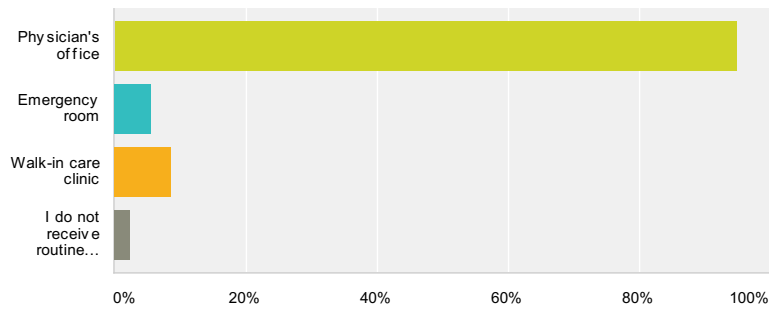
Answered: 413 Skipped: 27



Answer Choices	Responses
\$0-\$24,999	31.72% 131
\$25,000-\$49,999	26.88% 111
\$50,000-\$74,999	19.85% 82
\$75,000-\$99,999	9.44% 39
\$100,000-\$124,999	7.99% 33
\$125,000-\$149,999	1.45% 6
\$150,000-\$174,999	1.21% 5
\$175,000-\$199,999	0.24% 1
\$200,000 and up	1.21% 5
Total	413

Q3 Where do you go for your health check ups or medical care needs?

Answered: 429 Skipped: 11

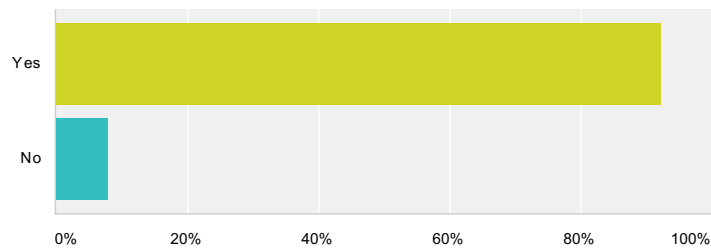


Answer Choices	Responses
Physician's office	94.87% 407
Emergency room	5.59% 24
Walk-in care clinic	8.62% 37
I do not receive routine healthcare	2.33% 10
Total Respondents: 429	

#	Other (please specify)	Date
1	Charlestown Family Medicine	7/29/2013 4:22 PM
2	VA medical center	7/26/2013 11:00 AM
3	CT	7/26/2013 10:43 AM
4	https://www.surveymonkey.com/i/t.gif	7/26/2013 10:04 AM
5	VA	7/15/2013 11:41 AM
6	DHMC	6/26/2013 4:37 PM
7	Sojourns	6/22/2013 12:48 PM
8	Veterans Affairs Medical Center	6/18/2013 3:46 PM
9	free clinic	6/18/2013 1:08 AM
10	When they have a opening	6/17/2013 1:23 PM
11	I am afraid to go.	6/17/2013 9:34 AM

Q4 Are you able to visit a doctor or other health care professional when needed?

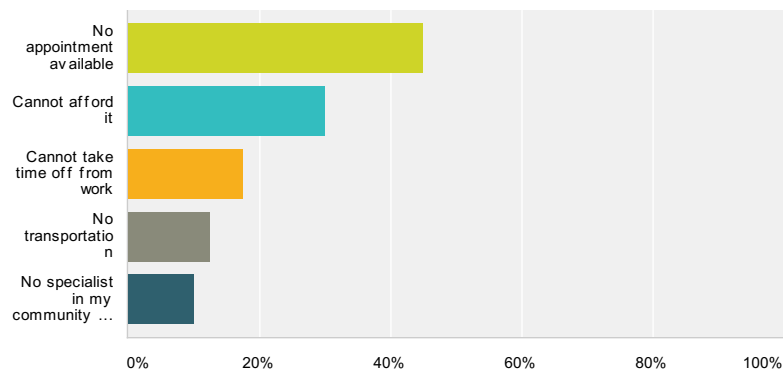
Answered: 436 Skipped: 4



Answer Choices	Responses
Yes	92.20% 402
No	7.80% 34
Total	436

Q5 If you answered "no" to question 4, please choose all that apply.

Answered: 40 Skipped: 400

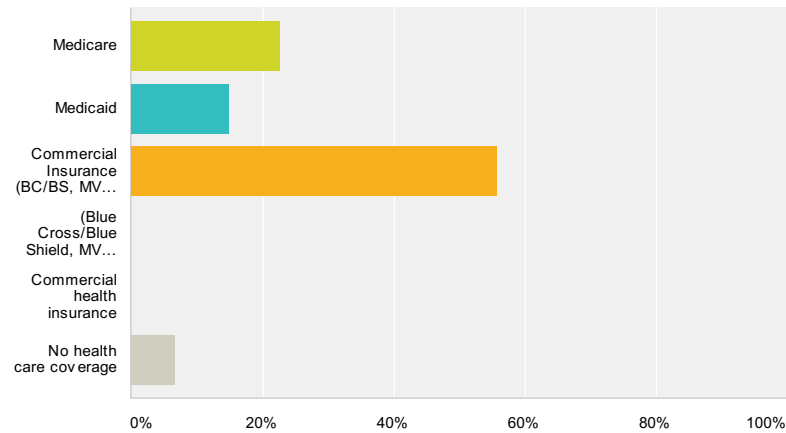


Answer Choices	Responses	
No appointment available	45%	18
Cannot afford it	30%	12
Cannot take time off from work	17.50%	7
No transportation	12.50%	5
No specialist in my community for my condition	10%	4
Total Respondents: 40		

#	Other (please specify)	Date
1	I have to wait 72 hrs ahead of time to make an appt!!!	7/29/2013 4:19 PM
2	I just walk in to Dr	7/14/2013 1:07 PM
3	most of the time, wait 6 weeks for an appointment, even my regular caregiver.	7/5/2013 2:10 PM
4	tried to make an appt for a tick bite and was told I had to wait 3 weeks to become a new patient	6/22/2013 12:48 PM
5	Sometimes hard to get time off when appointment scheduled, sometimes have to plan co pay s	6/18/2013 11:59 AM
6	Nurses very quickly refer you to the ED	6/17/2013 1:23 PM

Q6 What type of insurance coverage do you have?

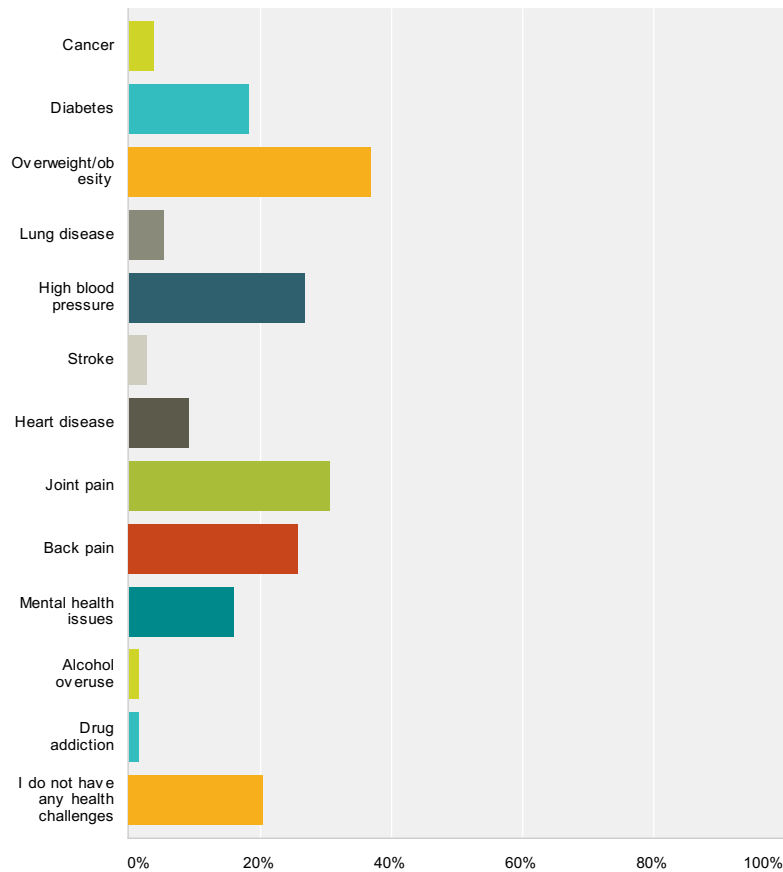
Answered: 423 Skipped: 17



Answer Choices	Responses	
Medicare	22.70%	96
Medicaid	14.89%	63
Commercial Insurance (BC/BS, MVP, Tricare, etc.)	55.79%	236
(Blue Cross/Blue Shield, MVP, Tricare, etc.)	0%	0
Commercial health insurance	0%	0
No health care coverage	6.62%	28
Total		423

Q7 Please select the top 3 health challenges you face

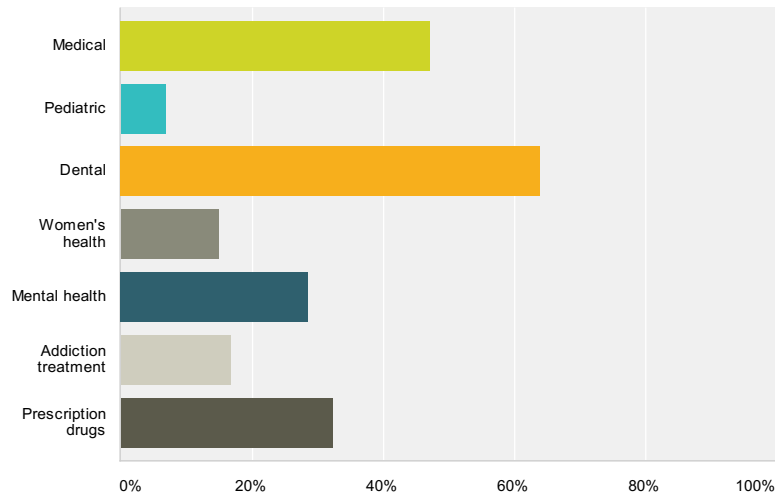
Answered: 395 Skipped: 45



Answer Choices	Responses	
Cancer	3.80%	15
Diabetes	18.23%	72
Overweight/obesity	36.96%	146
Lung disease	5.32%	21
High blood pressure	26.84%	106
Stroke	2.78%	11
Heart disease	9.11%	36
Joint pain	30.63%	121
Back pain	25.82%	102
Mental health issues	15.95%	63
Alcohol overuse	1.52%	6

Q8 In the last year, I or someone I know was NOT able to get the following care when needed:

Answered: 161 Skipped: 279

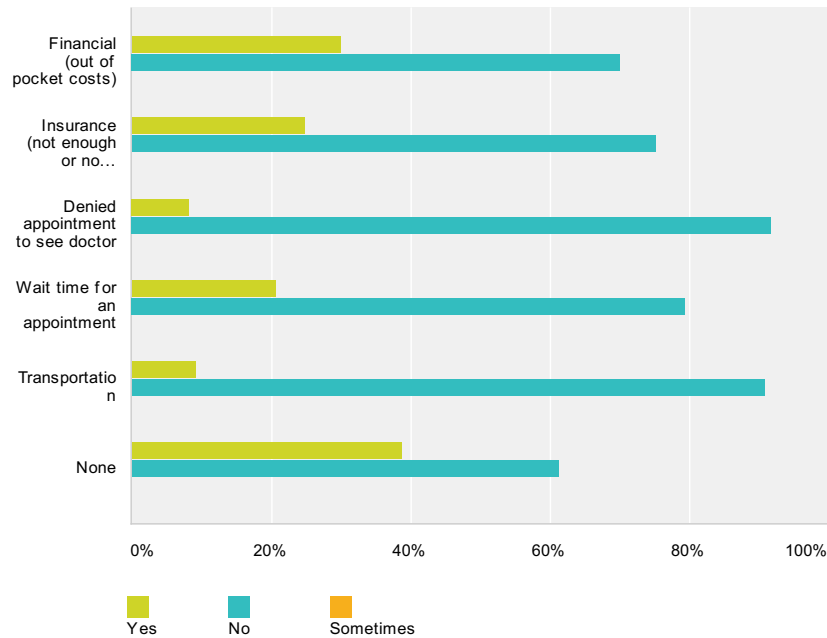


Answer Choices	Responses
Medical	47.20% 76
Pediatric	6.83% 11
Dental	63.98% 103
Women's health	14.91% 24
Mental health	28.57% 46
Addiction treatment	16.77% 27
Prescription drugs	32.30% 52
Total Respondents: 161	

#	Other (please specify)	Date
1	none	7/29/2013 5:17 PM
2	eye exam	7/29/2013 5:11 PM
3	I work with clients for whom all these are applicable	7/29/2013 4:01 PM
4	NA	7/26/2013 10:44 AM
5	NA	7/26/2013 10:43 AM
6	NA	7/26/2013 10:40 AM
7	NA	7/26/2013 10:29 AM
8	No	7/26/2013 10:21 AM
9	N/A	7/26/2013 10:12 AM
10	due to bus requiring 48 hr notice - person needed sooner	7/14/2013 1:10 PM
11	eye care	6/30/2013 3:21 PM
12	local wound or ostomy care	6/30/2013 11:45 AM

Q9 In the last year, have any of these prevented you from receiving health care services?

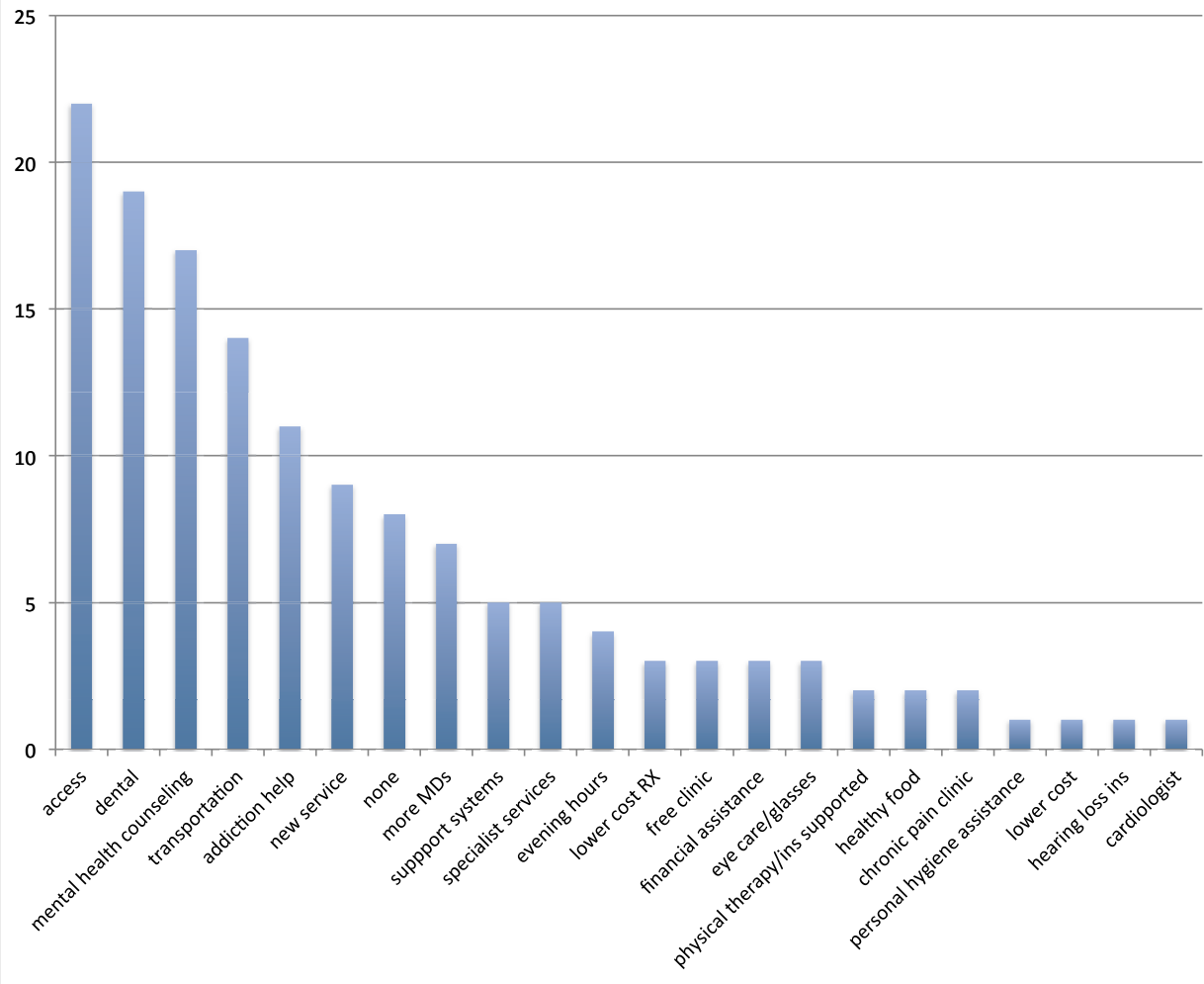
Answered: 390 Skipped: 50



	Yes	No	Sometimes	Total
Financial (out of pocket costs)	29.90% 93	70.10% 218	0% 0	311
Insurance (not enough or no coverage)	24.83% 72	75.17% 218	0% 0	290
Denied appointment to see doctor	8.21% 22	91.79% 246	0% 0	268
Wait time for an appointment	20.58% 57	79.42% 220	0% 0	277
Transportation	9.12% 25	90.88% 249	0% 0	274
None	38.71% 72	61.29% 114	0% 0	186

#	Other (please specify)	Date
1	dental and eye - no insurance	7/29/2013 5:11 PM
2	Improved appt availability it seems 2-4 week waiting period to see physicians even with a medical issue!!!	7/22/2013 4:58 AM
3	needed wart removed - medication not paid for by Medicaid	7/14/2013 1:12 PM
4	no, I have not had any trouble getting what I need	7/14/2013 1:07 PM
5	having no specialist in the SMCS network	7/14/2013 12:48 PM
6	trying to balance with work	7/14/2013 12:46 PM
7	financial issues are always a big concern for appointments, drugs, OTC medications	7/5/2013 2:10 PM
8	I have been in jail for 12 years - just got out. Working with HCRS once a month. I am a DS client.	6/29/2013 2:08 PM

What additional services need to be offered to meet the health care needs in your community? **Community Survey - 2013**





Springfield
Medical Care Systems, Inc.

Where People Come First

2013 COMMUNITY HEALTH NEEDS ASSESSMENT

Please complete by July 9, 2013

Complete and return to: Marketing Dept, Springfield Medical Care Systems, 25 Ridgewood Rd., Springfield, VT 05156

*1. Please identify your zip code.

- | | | |
|--------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> 03602 | <input type="checkbox"/> 05142 | <input type="checkbox"/> 05154 |
| <input type="checkbox"/> 03603 | <input type="checkbox"/> 05143 | <input type="checkbox"/> 05155 |
| <input type="checkbox"/> 03608 | <input type="checkbox"/> 05148 | <input type="checkbox"/> 05156 |
| <input type="checkbox"/> 03609 | <input type="checkbox"/> 05149 | <input type="checkbox"/> 05158 |
| <input type="checkbox"/> 03743 | <input type="checkbox"/> 05150 | <input type="checkbox"/> 05159 |
| <input type="checkbox"/> 05062 | <input type="checkbox"/> 05151 | <input type="checkbox"/> 05346 |
| <input type="checkbox"/> 05101 | <input type="checkbox"/> 05153 | <input type="checkbox"/> 05758 |

Other (please specify)

2. What is your approximate average household income?

- | | | |
|---|---|---|
| <input type="radio"/> \$0-\$24,999 | <input type="radio"/> \$75,000-\$99,999 | <input type="radio"/> \$150,000-\$174,999 |
| <input type="radio"/> \$25,000-\$49,999 | <input type="radio"/> \$100,000-\$124,999 | <input type="radio"/> \$175,000-\$199,999 |
| <input type="radio"/> \$50,000-\$74,999 | <input type="radio"/> \$125,000-\$149,999 | <input type="radio"/> \$200,000 and up |

3. Where do you go for your health check ups or medical care needs?

- | | |
|---|--|
| <input type="checkbox"/> Physician's office | <input type="checkbox"/> Walk-in care clinic |
| <input type="checkbox"/> Emergency room | <input type="checkbox"/> I do not receive routine healthcare |

Other (please specify)

4. Are you able to visit a doctor or other health care professional when needed?

- | | |
|---------------------------|--------------------------|
| <input type="radio"/> Yes | <input type="radio"/> No |
|---------------------------|--------------------------|

5. If you answered "no" to question 4, please choose all that apply.

- | | | |
|---|---|---|
| <input type="checkbox"/> No appointment available | <input type="checkbox"/> Cannot take time off from work | <input type="checkbox"/> No specialist in my community for my condition |
| <input type="checkbox"/> Cannot afford it | <input type="checkbox"/> No transportation | |

Other (please specify)

6. What type of insurance coverage do you have?

- | | |
|--------------------------------|--|
| <input type="radio"/> Medicare | <input type="radio"/> Commercial Insurance (BC/BS, MVP, Tricare, etc.) |
| <input type="radio"/> Medicaid | <input type="radio"/> No health care coverage |

Other (please specify)

7. Please select the top 3 health challenges you face

- | | | |
|--|---|--|
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Stroke | <input type="checkbox"/> Alcohol overuse |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Heart disease | <input type="checkbox"/> Drug addiction |
| <input type="checkbox"/> Overweight/obesity | <input type="checkbox"/> Joint pain | <input type="checkbox"/> I do not have any health challenges |
| <input type="checkbox"/> Lung disease | <input type="checkbox"/> Back pain | |
| <input type="checkbox"/> High blood pressure | <input type="checkbox"/> Mental health issues | |

Other (please specify)

8. In the last year, I or someone I know was NOT able to get the following care when needed:

- | | | |
|------------------------------------|--|---|
| <input type="checkbox"/> Medical | <input type="checkbox"/> Women's health | <input type="checkbox"/> Prescription drugs |
| <input type="checkbox"/> Pediatric | <input type="checkbox"/> Mental health | |
| <input type="checkbox"/> Dental | <input type="checkbox"/> Addiction treatment | |

Other (please specify)

9. In the last year, have any of these prevented you from receiving health care services?

	Yes	No
Financial (out of pocket costs)	<input type="radio"/>	<input type="radio"/>
Insurance (not enough or no coverage)	<input type="radio"/>	<input type="radio"/>
Denied appointment to see doctor	<input type="radio"/>	<input type="radio"/>
Wait time for an appointment	<input type="radio"/>	<input type="radio"/>
Transportation	<input type="radio"/>	<input type="radio"/>
None	<input type="radio"/>	<input type="radio"/>

Other (please specify)

10. What additional services need to be offered to meet the health care needs in your community? **** Please attach additional paper if needed.****

**** Please return completed survey to: ****
Marketing Dept, Springfield Medical Care Systems, 25 Ridgewood Rd., Springfield, VT 05156

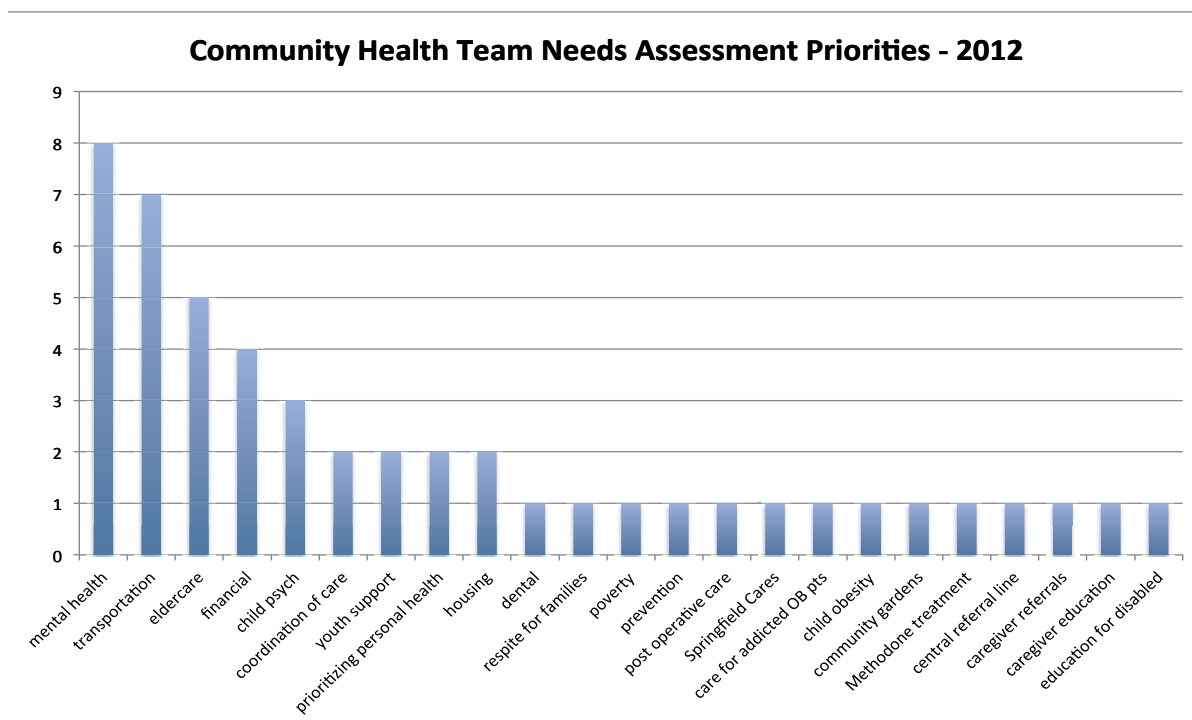
COMMUNITY HEALTH TEAM INPUT

The Springfield Community Health Team meets the first Friday of each month. The team consists of 80+ members and, while all members do not attend every month, all are on the mailing list and receive all meeting notices and minutes.

The Community Health Team held a needs assessment focus group on May 4, 2012, facilitated by Sarah Kemble, MD, MPH, to obtain input on unmet needs and perceived barriers.

In addition, all members of the Community Health Team were asked to help distribute our community survey among their mailing lists and constituents.

The following summarizes the Community Health Team's prioritized needs:



COMMUNITY HEALTH TEAM CONTACTS

SPRINGFIELD HSA COMMUNITY			
Name		Title	Agency
Armstrong	Deb		Chester Community Cares
Ayer	Sharon		Edgar May Recreation Center
Balla	Brittany	Care Coordinator	FMA
Barbeau	Delores	MD Health Educator	Neighborhood Connections
Barlow	Callin	Care Coordinator	Pediatrics/FMA
Bartley	Jim	Challenge for Change	HCRS/Outpatient
Bayer	David	Social Worker	VNA/VNH
Beardsley	Karen	Finance Manager	Southern Vermont Health Education Center
Bickel	Robin	Family Support Worker	Spfld School District-Elm/Union
Bohen	Joanne	Director of Adult Day	ADC Director
Bolster	Betty	RN	Home Healthcare, Hospice and Comm
Boreham	Lauren	Care Coordinator	Charlestown Family Medicine
Boyle	Lynn	Field Director	Agency of Human Services
Brothers	Beth	Health Careers Manager	SVAHEC
Burke-adhoc	Patricia	Director	SEVCA
Bussino	Mindi	Outreach worker	SEVCA
Bye	Barbara	RD/Diabetes Educator	SMCS
Carlson-Allen	Anita	Central Elementary	WNESU
Chaffee	Kaylie	Blueprint Project Manager	SMCS
CodyMcNaughton	Laura	Prevention Consultant	VDH-Alcohol and Drug Abuse Programs
Collins	Gladys	Public Pre-k	Springfield School District
Corey	Sarah	Grant Manager	Senior Solutions
Craig	Christian	Executive Director	Edgar May Recreation Center
Dakin	Leigh	State House Representative	Vermont Legislator
Dawson	Gloria	Coordinator	Neighborhood Connections
Donohue	Andria	RN/Care Coordinator	Ludlow Health Center
Dufresne	Josh	Director of Practice Operations	SMCS
Duhamel	Kathy	Coordinator/Clinician Elder Care	HCRS
Etter	Jean	Psych Private Practice	49 Village Square, BF
Fillault	Sandy	VA Case Manager	
Finck	Kathleen	RN Nurse Case Manager	BCBSVT
Foster	Sherri	Care Coordinator	Adult Day
Francis	Bruce	L&M Family Care Givers	Springfield
Freedman	Ronnie	Director	Westminster Cares
Gibson	Stephanie	Director	Springfield Family Center
Hammond	Marty	Executive Director	Southern Vermont Health Education Center
Hatt	Sherry	Children's Integrated Services Provider	Children's Integrated Services
Heybryne	Brian	Director of Respiratory Therapy	Springfield Hospital
Howard	Ray	LICSW	SMCS
Husband	Linda	Program Manager	RSVP
Johnson	Bruce	Alt Jerard Gunnell	Springfield Area Public Access
Karabakakis	George	COO	HCRS
Katchen	Eileen	Chronic Disease Prevention Specialist	Vt Dept of Health
Kuusela	Michelle	Blueprint Regional Coordinator/ Tobacco Treatment Specialist	SMCS
Laham	Alex	SMCS Corporate Compliance Officer	Springfield Hospital
Lechthaler	Carole	RN, VNA Facility Liason	VNA
Lillie	Ali	DocSite Superuser	FMA
London-Oshkelo	Stacey	RD	SMCS
Luse	Deb	SASH Coordinator	SASH
Mair	Bart		Lincoln Street
Maresca	John	Adult Case Manager	HCRS
McNamara	Robin	SASH Coordinator	SASH
Meinelt	Marlene	MSW	SMCS
Mieg	Patricia	Business Development Mgr	VNA
Moore	Cynthia	Executive Director	Sojourns
Morlock	Bill		Springfield Housing Authority
Muther	kathy	Health/Nutrition Manager	SEVCA Windsor County Head Start
Noonan	Carrie	Care Coordinator	BCBSVT
NortonWeber	Susan	RAIM Care Coordinator/ Tobacco Treatment Specialist	Ridgewood Assoc of Internal Med
O'Neill	Sharon	SHIP Coordinator	Senior Solutions
Ovitt	Michelle	Current	Current transportation
Paradis	Trisha	Intake Coordinator	Lincoln Street, Inc
Peck	Lara	RD, CDE	CHT
Pelton	Wilda	Executive Director	Valley Health Connections
Pendlebury	William		Voc-Rehab
Pollard	Sue	RN, Clinical Case Mgr	SMCS
Read-Smith	Susan	DVHA Care Coordinator	Vt Dept of Health Access (Medicaid)
Reifenrath	Kristin	LICSW	SMCS
Richotte	Paula	Case Management Program Director	Senior Solutions
Ridzon	Susan	Medical Integration Program Mgr	Blue Cross/Blue Shield Vermont
Sanctuary	Cheryl	Director of Practice Operations/Blueprint Admin-	
Schaefer	Nancy	30-5 Program Coordinator	Healthier Living Workshops
Schillingford	Amelia	Nurse Practitioner	SMCS
Shuster	Kathy	Care Coordinator	Dept of Health Access
Semans	Catherine	Director of Homeownership Programs	Windham & Windsor Housing Trust
Shattuck	Maureen	Care Coordinator & Diabetic Educator	Family Medicine Assoc
Sherwood	Brook	Care Coordinator	Rockingham Medical Group
Smith	Anna	SMCS Community Relations	SMCS
Gibson	Stephanie	Director	Springfield Family Center
Spiro	Jill	Director of Development & Community Rela-	Windham & Windsor Housing Trust
Sweeney	Erica	Blueprint Project Support Staff	Springfield Med Care Systems
Tanzman	Beth	Assitant Director,	Blueprint for Health
Ternes	Barbara	Director	Parks Place
Thibodeau	Nancy	SMCS Blueprint Project Manager	Springfield Med Care Systems
Thomas	Becky	Health Services District Director	Vt Dept of Health
Thomas	Karin	Business Account Manager	Creative Workforce Solutions
Thorsen	Leslie	Community member	
Thrall	Sherry	Executive Director	Lincoln Street
Tier	Jennifer	Care Coordinator	Chester Family Medicine
Tomberg	Amanda	Care Coordinator	Womens Health
Tonkovich	Jim	Regional Resource Mgr	Vermont 211
Walsh	Jim	PMH-NP	Springfield Hospital
Waterman	Bruce	Manager	Current transportation
White	Jeanette		SASH
White	Susan	Education Coordinator	SVAHEC
Wilcox	Linda	Social Worker	SMCS
Young	d	Creative Workforce Solutions	
Young	Darlene		Windham & Windsor Housing Trust
Young	Mark		HCRS
Young	Pamela		HCRS

SPRINGFIELD - COMMUNITY NEEDS ASSESSMENT

FOCUS GROUP DISCUSSION RESULTS

Community: Springfield VT
Date: 29 May 2012, 3-5 pm
Facilitator: Dr. Sarah Kemble
No. of Participants: 12

Process:

Introduction of nature, purpose and process of focus group discussion by Anna Smith
 Brief self-introductions
 “Silent time” wherein participants wrote down their individual answers to the discussion questions
 Verbal sharing of answers to Question 1; responses tabulated in flip chart paper
 Verbal sharing of answers to Question 2; responses tabulated in flip chart paper
 Prioritization of answers to Questions 1 and 2
 Verbal sharing of answers to Question 3; responses tabulated in flip chart paper
 Verbal sharing of answers to Question 4; responses tabulated in flip chart paper
 Verbal sharing of answers to Question 5; responses tabulated in flip chart paper
 Meeting adjourned at 5:00pm

QUESTION 1: “What do you wish could change in your town that would most benefit the health, education, and economic well-being *of your neighbors, friends, and family?*”

Answers	Priority Points (for both Q1 & Q2)	Priority Ranking
Access to affordable dental services	4	
Affordable housing; alternative housing	1	
Expand employment opportunities; job training	9	1 st
Individual community participation; social awareness/responsibility	1	
Awareness of drug abuse; aggression; lack of education	8	2 nd – 3 rd
More primary care practitioners	1	
School-based social workers	2	
Walk-in community health center; women’s health	0	
Communication system (for community projects)	0	
Senior assistance (they’re alone)	1	
Therapy for low-income population	3	
Recreation options; youth programs	4	
Access to transportation (non-Medicaid/rural; like Community Alliance on Demand)	8	2 nd – 3 rd

QUESTION 2: “What things most get in the way of the health, safety, education, and economic well-being *for you and your family?*”

Answers	Priority Points (for both Q1 & Q2)	Priority Ranking
Transportation	4	
Times programs are available	0	
Lack of adequate health insurance	1	
Funding (lack of community opposition)	1	
Acceptance vs. denial	0	
Staffing (volunteerism declining, demand increasing; model antiquated)	0	
Education is essential; needs perceived value	10	1 st
Family dysfunction (economic issues; split families; domestic violence; addiction; mental health)	0	
System of accountability; increased pride vs. hopelessness	9	2 nd
Lack of strategic planning (community resp. for planning regional?)	0	
Time/commitment	0	
Personal, community, cultural and environmental sensitivity (ask rights questions; CHC practices)	0	
Navigators/social workers	4	
Erosion of social contract (taxes vs. programs)	0	
Tax system does not support needed benefits	8	3 rd
Tax system needs revision; need incentives to succeed; compassion; lack of continuity of programs; politics	2	
Need business base/benefits; economic development	0	

Top 3 (Question 1):

Expand employment opportunity; job trainings
 Awareness regarding drug abuse
 Access to transportation

Top 3 (Question 2):

Education (lack of perceived value)
 Tax system not supporting benefits; tax system not providing adequate funding
 System of accountability; pride vs. hopelessness

Question 3: What barriers get in the way of the people in your town being able to access services/jobs/education that would improve their health and wellbeing?

Knowledge of what is available; community partnership; Workforce Investment Board (good)
 Training does not match jobs demanded
 Lack of family supports
 Awareness of jobs available to train for
 Education
 Schools: need more resources for case management; very time-consuming
 Family dysfunction; be proactive
 Lack of school policy regarding attendance
 Collaboration between school and police department and other services
 Money
 Strategic planning
 Technology upgrades
 Infrastructure barriers
 Make education culturally attractive
 Community investment
 “No reason for me to get education”
 Promote healthy lifestyles; role model that glamorizes health
 Lack of innovative thinking; Civilian Conservation Corps
 Education vs. resources; value vs. disruption

Question 4: Are there parts of your town (i.e. “North Street”) or groups of people (i.e. “young, single moms,” “home-bound elders”) in your town who really need assistance but for some reason can’t seem to get the help they need?

Youth: educational needs
Dental needs-population
Working poor; struggling two-parents working
Seniors
Mental health issues
Single-parent households
Think of LEAP Program as good example
After-school older kids?
No late bus after-school

Question 5: What most helps you and people in your town to be healthy, safe, and able to enjoy life?

Trails, bike paths, walking area
Recreation Center
Individual commitment and involvement; personal choice
Adult Day Program
Unsung heroes
Revitalization of community
“My interactions with community”
SAPA churches – lots of groups
Positive choices

Documented by: Jolan Rivera

SPRINGFIELD FOCUS GROUP INVITATION LIST
5/29/12 - Community Health Needs Assessment

Russ Thompson
Springfield Fire Chief
Springfield, VT

Douglas Johnston
Police Chief
Springfield, VT

George Karabakakis
Chief Operating Officer
HCRS

Marty Hammond
Exec Director
Southern VT Health Educ Center

Steve Geller, Executive Director
Mindi Bussino, Outreach Worker
SEVCA

Wilda Pelton, Director
Valley Health Connections

Cathy Howland, Nurse Mgr.
Emergency Department
Springfield Hospital

Joyce Lemire, Executive Director
Senior Solutions
Springfield, VT 05156

Terri Emerson, Director
Springfield Senior Center
Springfield, VT 05156

Jenny Anderson
Union Street School Nurse

Terri Fisk, Executive Director
New Beginnings
(domestic violence resource)

Betty Kinsman
Springfield Area Parent Child Center
N. Springfield, VT

Carol Cole, Director
Chamber of Commerce

Wendy Regier, Director
Green Mountain RSVP Center

Linda Wilcox, Social Worker
Case Management
Springfield Hospital

Michelle Ovitt
The Current (Transportation)

Christian Craig, Executive Director
Edgar May Health & Rec Center

Andy Bladyka, Director
Springfield Park & Rec
Springfield, VT 05156

Sherry Hatt
Children's Integrated Services
VT Department Children & Families

Bill Morlock
Laura Ryan, Office Mgr will attend
Springfield Housing Authority
Springfield, VT

Gloria Dawson
Neighborhood Connections
Londonderry, VT

Dr.Barbeau
Neighborhood Connections
Londonderry, VT

Bob Thibault, Principal
Springfield High School
Springfield, VT

Becky Read, Principal
Riverside Middle School

Audrey Bridge
Black River Good Neighbors
Ludlow, VT

Stephanie Gibson
Springfield Family Center
Springfield, VT

Rev. George Keeler
Association of Springfield Area
Churches

Community Health Needs Assessment Medical Staff Feedback Summary January 2013

Chronic Pain

- Chronic Pain/Narcotic use problems
- Conflicts between what people want (e.g. addictions) and what medically may seem to be what they will benefit from.

Cost

- Patients cannot afford care - co-pays and deductibles are so high that its like some people have no insurance. They are refusing care.
- Cost of care - cost of medications
- Cost of RX
- Funds for basic care/meds

Mental Health

- Working with psych patients in the community - many are living on the edge
- Access to psychological/psychiatric care

Access

- Specific areas, i.e., dental
- Not enough appointment times to get people in
- Access to seeing their actual primary care providers for follow up and acute problems

Transportation

Transportation

Transportation to healthcare resources

Transportation system for patients regarding healthcare

Education

- Dietary Education
- Info about basic health matters

Support

- Support services in the home
- Navigating the system
- More social work

QUICK FACTS - WINDSOR COUNTY, VT

Windsor County QuickFacts from the US Census Bureau

9/3/13 1:20 PM

U.S. Department of Commerce

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State & County QuickFacts

Windsor County, Vermont

People QuickFacts	Windsor County	Vermont
Population, 2012 estimate	56,211	626,011
Population, 2010 (April 1) estimates base	56,670	625,741
Population, percent change, April 1, 2010 to July 1, 2012	-0.8%	Z
Population, 2010	56,670	625,741
Persons under 5 years, percent, 2012	4.6%	4.9%
Persons under 18 years, percent, 2012	19.0%	19.8%
Persons 65 years and over, percent, 2012	19.3%	15.7%
Female persons, percent, 2012	51.0%	50.7%
<hr/>		
White alone, percent, 2012 (a)	96.6%	95.4%
Black or African American alone, percent, 2012 (a)	0.6%	1.1%
American Indian and Alaska Native alone, percent, 2012 (a)	0.3%	0.4%
Asian alone, percent, 2012 (a)	1.0%	1.4%
Native Hawaiian and Other Pacific Islander alone, percent, 2012 (a)	Z	Z
Two or More Races, percent, 2012	1.5%	1.7%
Hispanic or Latino, percent, 2012 (b)	1.3%	1.6%
White alone, not Hispanic or Latino, percent, 2012	95.5%	94.0%
<hr/>		
Living in same house 1 year & over, percent, 2007-2011	87.0%	86.2%
Foreign born persons, percent, 2007-2011	3.0%	3.9%
Language other than English spoken at home, percent age 5+, 2007-2011	3.7%	5.2%
High school graduate or higher, percent of persons age 25+, 2007-2011	92.4%	91.0%
Bachelor's degree or higher, percent of persons age 25+, 2007-2011	33.4%	33.8%
Veterans, 2007-2011	5,783	51,981
Mean travel time to work (minutes), workers age 16+, 2007-2011	21.6	21.7
<hr/>		
Housing units, 2011	34,180	324,389
Homeownership rate, 2007-2011	71.6%	71.4%
Housing units in multi-unit structures, percent, 2007-2011	23.7%	23.0%
Median value of owner-occupied housing units, 2007-2011	\$213,500	\$213,000
Households, 2007-2011	24,863	256,711
Persons per household, 2007-2011	2.24	2.34
Per capita money income in the past 12 months (2011 dollars), 2007-2011	\$30,236	\$28,376
Median household income, 2007-2011	\$53,129	\$53,422
Persons below poverty level, percent, 2007-2011	10.3%	11.3%
<hr/>		
Business QuickFacts	Windsor County	Vermont
Private nonfarm establishments, 2011	2,077	21,190 ¹
Private nonfarm employment, 2011	28,136	264,208 ¹
Private nonfarm employment, percent change, 2010-2011	-0.3%	0.0% ¹
Nonemployer establishments, 2011	6,130	60,067
<hr/>		
Total number of firms, 2007	8,768	78,729
Black-owned firms, percent, 2007	F	S
American Indian- and Alaska Native-owned firms, percent, 2007	S	0.5%
Asian-owned firms, percent, 2007	S	0.8%
Native Hawaiian and Other Pacific Islander-owned firms,		

<http://quickfacts.census.gov/qfd/states/50/50027.html>

Page 1 of 2

QUICK FACTS - WINDSOR COUNTY, VT

percent, 2007	F	S
Hispanic-owned firms, percent, 2007	0.3%	0.6%
Women-owned firms, percent, 2007	24.5%	26.0%
<hr/>		
Manufacturers shipments, 2007 (\$1000)	406,465	10,751,461
Merchant wholesaler sales, 2007 (\$1000)	327,739	5,121,694
Retail sales, 2007 (\$1000)	691,702	9,310,119
Retail sales per capita, 2007	\$12,147	\$15,005
Accommodation and food services sales, 2007 (\$1000)	154,409	1,367,630
Building permits, 2012	48	1,301
Geography QuickFacts	Windsor County	Vermont
Land area in square miles, 2010	969.34	9,216.66
Persons per square mile, 2010	58.5	67.9
FIPS Code	027	50
Metropolitan or Micropolitan Statistical Area	Lebanon, NH-VT Micro Area	

1: Includes data not distributed by county.

- (a) Includes persons reporting only one race.
(b) Hispanics may be of any race, so also are included in applicable race categories.
- D: Suppressed to avoid disclosure of confidential information
F: Fewer than 25 firms
FN: Footnote on this item for this area in place of data
NA: Not available
S: Suppressed; does not meet publication standards
X: Not applicable
Z: Value greater than zero but less than half unit of measure shown

Source U.S. Census Bureau: State and County QuickFacts. Data derived from Population Estimates, American Community Survey, Census of Population and Housing, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits
Last Revised: Thursday, 27-Jun-2013 14:33:26 EDT

QUICK FACTS - WINDHAM COUNTY, VT

Windham County QuickFacts from the US Census Bureau

9/3/13 1:21 PM

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State & County QuickFacts

Windham County, Vermont

People QuickFacts	Windham County	Vermont
Population, 2012 estimate	43,985	626,011
Population, 2010 (April 1) estimates base	44,513	625,741
Population, percent change, April 1, 2010 to July 1, 2012	-1.2%	Z
Population, 2010	44,513	625,741
Persons under 5 years, percent, 2012	4.6%	4.9%
Persons under 18 years, percent, 2012	19.1%	19.8%
Persons 65 years and over, percent, 2012	17.6%	15.7%
Female persons, percent, 2012	50.7%	50.7%
White alone, percent, 2012 (a)	95.6%	95.4%
Black or African American alone, percent, 2012 (a)	1.1%	1.1%
American Indian and Alaska Native alone, percent, 2012 (a)	0.3%	0.4%
Asian alone, percent, 2012 (a)	1.1%	1.4%
Native Hawaiian and Other Pacific Islander alone, percent, 2012 (a)	0.1%	Z
Two or More Races, percent, 2012	1.9%	1.7%
Hispanic or Latino, percent, 2012 (b)	2.0%	1.6%
White alone, not Hispanic or Latino, percent, 2012	93.9%	94.0%
Living in same house 1 year & over, percent, 2007-2011	87.9%	86.2%
Foreign born persons, percent, 2007-2011	3.6%	3.9%
Language other than English spoken at home, percent age 5+, 2007-2011	4.5%	5.2%
High school graduate or higher, percent of persons age 25+, 2007-2011	91.6%	91.0%
Bachelor's degree or higher, percent of persons age 25+, 2007-2011	35.0%	33.8%
Veterans, 2007-2011	4,096	51,981
Mean travel time to work (minutes), workers age 16+, 2007-2011	20.3	21.7
Housing units, 2011	29,943	324,389
Homeownership rate, 2007-2011	70.2%	71.4%
Housing units in multi-unit structures, percent, 2007-2011	22.3%	23.0%
Median value of owner-occupied housing units, 2007-2011	\$206,400	\$213,000
Households, 2007-2011	19,527	256,711
Persons per household, 2007-2011	2.20	2.34
Per capita money income in the past 12 months (2011 dollars), 2007-2011	\$28,131	\$28,376
Median household income, 2007-2011	\$48,953	\$53,422
Persons below poverty level, percent, 2007-2011	10.7%	11.3%
Business QuickFacts	Windham County	Vermont
Private nonfarm establishments, 2011	1,769	21,190 ¹
Private nonfarm employment, 2011	21,387	264,208 ¹
Private nonfarm employment, percent change, 2010-2011	0.1%	0.0% ¹
Nonemployer establishments, 2011	5,247	60,067
Total number of firms, 2007	6,393	78,729
Black-owned firms, percent, 2007	S	S
American Indian- and Alaska Native-owned firms, percent, 2007	F	0.5%
Asian-owned firms, percent, 2007	1.2%	0.8%
Native Hawaiian and Other Pacific Islander-owned firms,		

<http://quickfacts.census.gov/qfd/states/50/50025.html>

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QUICK FACTS - WINDHAM COUNTY, VT

Windham County QuickFacts from the US Census Bureau

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percent, 2007	F	S
Hispanic-owned firms, percent, 2007	0.9%	0.6%
Women-owned firms, percent, 2007	30.2%	26.0%
<hr/>		
Manufacturers shipments, 2007 (\$1000)	375,077	10,751,461
Merchant wholesaler sales, 2007 (\$1000)	867,141	5,121,694
Retail sales, 2007 (\$1000)	660,735	9,310,119
Retail sales per capita, 2007	\$15,120	\$15,005
Accommodation and food services sales, 2007 (\$1000)	138,405	1,367,630
Building permits, 2012	65	1,301
<hr/>		
Geography QuickFacts	Windham County	Vermont
Land area in square miles, 2010	785.31	9,216.66
Persons per square mile, 2010	56.7	67.9
FIPS Code	025	50
Metropolitan or Micropolitan Statistical Area	None	

1: Includes data not distributed by county.

(a) Includes persons reporting only one race.
(b) Hispanics may be of any race, so also are included in applicable race categories.

D: Suppressed to avoid disclosure of confidential information
F: Fewer than 25 firms
FN: Footnote on this item for this area in place of data
NA: Not available
S: Suppressed; does not meet publication standards
X: Not applicable
Z: Value greater than zero but less than half unit of measure shown

Source U.S. Census Bureau: State and County QuickFacts. Data derived from Population Estimates, American Community Survey, Census of Population and Housing, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits
Last Revised: Thursday, 27-Jun-2013 14:33:26 EDT

QUICK FACTS - SULLIVAN COUNTY, NH

Sullivan County QuickFacts from the US Census Bureau

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State & County QuickFacts

Sullivan County, New Hampshire

People QuickFacts	Sullivan County	New Hampshire
Population, 2012 estimate	43,074	1,320,718
Population, 2010 (April 1) estimates base	43,742	1,316,469
Population, percent change, April 1, 2010 to July 1, 2012	-1.5%	0.3%
Population, 2010	43,742	1,316,470
Persons under 5 years, percent, 2012	5.0%	5.0%
Persons under 18 years, percent, 2012	20.1%	20.8%
Persons 65 years and over, percent, 2012	17.7%	14.7%
Female persons, percent, 2012	50.6%	50.6%
White alone, percent, 2012 (a)	97.1%	94.4%
Black or African American alone, percent, 2012 (a)	0.5%	1.4%
American Indian and Alaska Native alone, percent, 2012 (a)	0.3%	0.3%
Asian alone, percent, 2012 (a)	0.6%	2.4%
Native Hawaiian and Other Pacific Islander alone, percent, 2012 (a)	Z	Z
Two or More Races, percent, 2012	1.4%	1.5%
Hispanic or Latino, percent, 2012 (b)	1.3%	3.0%
White alone, not Hispanic or Latino, percent, 2012	96.0%	91.9%
Living in same house 1 year & over, percent, 2007-2011	87.0%	86.6%
Foreign born persons, percent, 2007-2011	2.6%	5.2%
Language other than English spoken at home, percent age 5+, 2007-2011	3.1%	7.9%
High school graduate or higher, percent of persons age 25+, 2007-2011	90.1%	91.2%
Bachelor's degree or higher, percent of persons age 25+, 2007-2011	25.8%	33.1%
Veterans, 2007-2011	4,599	118,313
Mean travel time to work (minutes), workers age 16+, 2007-2011	24.4	26.0
Housing units, 2011	22,428	617,704
Homeownership rate, 2007-2011	73.2%	72.5%
Housing units in multi-unit structures, percent, 2007-2011	20.2%	25.4%
Median value of owner-occupied housing units, 2007-2011	\$182,700	\$250,000
Households, 2007-2011	18,156	514,869
Persons per household, 2007-2011	2.37	2.48
Per capita money income in the past 12 months (2011 dollars), 2007-2011	\$27,223	\$32,357
Median household income, 2007-2011	\$51,678	\$64,664
Persons below poverty level, percent, 2007-2011	10.4%	8.0%
Business QuickFacts	Sullivan County	New Hampshire
Private nonfarm establishments, 2011	974	37,031 ¹
Private nonfarm employment, 2011	10,768	554,001 ¹
Private nonfarm employment, percent change, 2010-2011	0.3%	-1.5% ¹
Nonemployer establishments, 2011	3,371	102,712
Total number of firms, 2007	4,103	137,815
Black-owned firms, percent, 2007	F	0.5%
American Indian- and Alaska Native-owned firms, percent, 2007	S	0.4%
Asian-owned firms, percent, 2007	F	1.6%
Native Hawaiian and Other Pacific Islander-owned firms,		

<http://quickfacts.census.gov/qfd/states/33/33019.html>

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QUICK FACTS - SULLIVAN COUNTY, NH

Sullivan County QuickFacts from the US Census Bureau

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percent, 2007	F	0.0%
Hispanic-owned firms, percent, 2007	F	1.0%
Women-owned firms, percent, 2007	24.8%	25.8%
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Manufacturers shipments, 2007 (\$1000)	640,776	18,592,406
Merchant wholesaler sales, 2007 (\$1000)	D	14,564,458
Retail sales, 2007 (\$1000)	562,392	25,353,874
Retail sales per capita, 2007	\$13,154	\$19,246
Accommodation and food services sales, 2007 (\$1000)	32,307	2,630,968
Building permits, 2012	48	2,296
Geography QuickFacts	Sullivan County	New Hampshire
Land area in square miles, 2010	537.31	8,952.65
Persons per square mile, 2010	81.4	147.0
FIPS Code	019	33
Metropolitan or Micropolitan Statistical Area	Claremont, NH Micro Area	

1: Includes data not distributed by county.

- (a) Includes persons reporting only one race.
(b) Hispanics may be of any race, so also are included in applicable race categories.
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Source U.S. Census Bureau: State and County QuickFacts. Data derived from Population Estimates, American Community Survey, Census of Population and Housing, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits
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QUICK FACTS - CHESHIRE COUNTY, NH

Cheshire County QuickFacts from the US Census Bureau

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State & County QuickFacts

Cheshire County, New Hampshire

People QuickFacts	Cheshire County	New Hampshire
Population, 2012 estimate	76,851	1,320,718
Population, 2010 (April 1) estimates base	77,117	1,316,469
Population, percent change, April 1, 2010 to July 1, 2012	-0.3%	0.3%
Population, 2010	77,117	1,316,470
Persons under 5 years, percent, 2012	4.8%	5.0%
Persons under 18 years, percent, 2012	19.0%	20.8%
Persons 65 years and over, percent, 2012	15.9%	14.7%
Female persons, percent, 2012	51.3%	50.6%
White alone, percent, 2012 (a)	96.3%	94.4%
Black or African American alone, percent, 2012 (a)	0.7%	1.4%
American Indian and Alaska Native alone, percent, 2012 (a)	0.3%	0.3%
Asian alone, percent, 2012 (a)	1.3%	2.4%
Native Hawaiian and Other Pacific Islander alone, percent, 2012 (a)	Z	Z
Two or More Races, percent, 2012	1.4%	1.5%
Hispanic or Latino, percent, 2012 (b)	1.6%	3.0%
White alone, not Hispanic or Latino, percent, 2012	95.0%	91.9%
Living in same house 1 year & over, percent, 2007-2011	85.1%	86.6%
Foreign born persons, percent, 2007-2011	3.1%	5.2%
Language other than English spoken at home, percent age 5+, 2007-2011	3.4%	7.9%
High school graduate or higher, percent of persons age 25+, 2007-2011	90.0%	91.2%
Bachelor's degree or higher, percent of persons age 25+, 2007-2011	30.2%	33.1%
Veterans, 2007-2011	7,314	118,313
Mean travel time to work (minutes), workers age 16+, 2007-2011	21.1	26.0
Housing units, 2011	34,901	617,704
Homeownership rate, 2007-2011	70.8%	72.5%
Housing units in multi-unit structures, percent, 2007-2011	23.4%	25.4%
Median value of owner-occupied housing units, 2007-2011	\$202,600	\$250,000
Households, 2007-2011	30,141	514,869
Persons per household, 2007-2011	2.40	2.48
Per capita money income in the past 12 months (2011 dollars), 2007-2011	\$27,459	\$32,357
Median household income, 2007-2011	\$55,241	\$64,664
Persons below poverty level, percent, 2007-2011	9.9%	8.0%
Business QuickFacts	Cheshire County	New Hampshire
Private nonfarm establishments, 2011	1,907	37,031 ¹
Private nonfarm employment, 2011	27,870	554,001 ¹
Private nonfarm employment, percent change, 2010-2011	-1.3%	-1.5% ¹
Nonemployer establishments, 2011	5,836	102,712
Total number of firms, 2007	8,144	137,815
Black-owned firms, percent, 2007	S	0.5%
American Indian- and Alaska Native-owned firms, percent, 2007	F	0.4%
Asian-owned firms, percent, 2007	S	1.6%
Native Hawaiian and Other Pacific Islander-owned firms,		

<http://quickfacts.census.gov/qfd/states/33/33005.html>

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QUICK FACTS - CHESHIRE COUNTY, NH

Cheshire County QuickFacts from the US Census Bureau

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percent, 2007	F	0.0%
Hispanic-owned firms, percent, 2007	0.6%	1.0%
Women-owned firms, percent, 2007	22.6%	25.8%
Manufacturers shipments, 2007 (\$1000)	1,095,187	18,592,406
Merchant wholesaler sales, 2007 (\$1000)	D	14,564,458
Retail sales, 2007 (\$1000)	1,649,001	25,353,874
Retail sales per capita, 2007	\$21,293	\$19,246
Accommodation and food services sales, 2007 (\$1000)	110,289	2,630,968
Building permits, 2012	93	2,296
Geography QuickFacts	Cheshire County	New Hampshire
Land area in square miles, 2010	706.66	8,952.65
Persons per square mile, 2010	109.1	147.0
FIPS Code	005	33
Metropolitan or Micropolitan Statistical Area	Keene, NH Micro Area	

1: Includes data not distributed by county.

(a) Includes persons reporting only one race.
(b) Hispanics may be of any race, so also are included in applicable race categories.

D: Suppressed to avoid disclosure of confidential information
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