
2015

Oak Valley Hospital

Community Health Needs Assessment



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Introduction

Background and Purpose

The California legislature in 1945 authorized voter approval to form special tax districts that allowed the commissioning and operation of public non-profit hospitals. In 1968, voters in eastern Stanislaus County formed the Oak Valley Hospital District to serve residents of Oakdale, Knights Ferry, Valley Home, Waterford, Riverbank and the surrounding areas.

As part of the Oak Valley Hospital District, Oak Valley Hospital is a 35-bed, full service, non-profit public hospital created to provide residents of Oakdale and the surrounding rural communities with access to superior quality medical information, treatment, and care. Our unwavering dedication to providing premium medical service in the greater Oakdale area drives every decision we make. Our ongoing commitment is to the health and well-being of the Oakdale population. For more than 45 years, we have remained true to our mission to safeguard the health and well-being of the Oakdale community.

The passage of the Patient Protection and Affordable Care Act requires tax-exempt hospitals, including government hospital organizations, to conduct Community Health Needs Assessments every three years, and adopt Implementation Strategies to meet the health needs identified through the assessment. A Community Health Needs Assessment identifies unmet health needs in the service area, provides information to select priorities for action and target geographical areas, and serves as the basis for community benefit programs. This assessment incorporates components of primary data collection and secondary data analysis that focus on the health and social needs of the service area.

Service Area

Oak Valley Hospital is a designated Rural Hospital in Stanislaus County and is located at 350 South Oak Avenue, Oakdale, CA 95361. The primary service area for Oak Valley Hospital is:

City	Zip Code
Escalon	95320
Oakdale	95361
Riverbank	95367
Waterford	95386

Oak Valley tracks Zip codes of origin for all patient admissions and includes all who received care without regard to insurance coverage or eligibility for financial assistance. The service area was determined from Zip codes that reflect over 70% of patient admissions.

Oak Valley District
350 South Oak Street
Oakdale, CA 95361

Biel Consulting, Inc. conducted the Community Health Needs Assessment. Biel Consulting, Inc. is an independent consulting firm that works with hospitals, clinics and community-based nonprofit organizations. Biel Consulting, Inc. is headed by Dr. Melissa Biel who has 20 years of experience conducting hospital Community Health Needs Assessments. For this assessment she was joined by Deborah Silver, MS. Deborah Silver has an extensive background in community-based strategic planning, facilitation, coalition building, organizational development, and resource development.

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Methods

Secondary Data Collection

Secondary data were collected from a variety of local, county, and state sources to present a community profile, social and economic factors, health access, birth characteristics, leading causes of death, chronic disease, and health behaviors. When available, these data sets are presented in the context of Stanislaus County and California, framing the scope of an issue as it relates to the broader community.

Analyses were conducted at the most local level possible for the hospital primary service area, given the availability of the data. For example, some data sets are based on Zip codes and/or places. Other data are only available by county. The report includes benchmark comparison data, comparing Oak Valley Hospital community data findings with Healthy People 2020 objectives (Attachment 1).

Primary Data Collection

Oak Valley Hospital conducted targeted interviews to gather information and opinions from persons who represent the broad interests of the community served by the hospital. Seven interviews were completed during August 2015.

Community stakeholders, identified by the hospital, were contacted and asked to participate in the needs assessment. Interview participants included leaders and representatives of medically underserved, low-income, and minority populations, as well as the local health department that has “current data or information relevant to the health needs of the community served by the hospital facility,” per IRS requirements. The interviews took into account input from persons located in or serving the community including, nonprofit and community-based organizations, local school districts, health care providers and community health centers. The list of the stakeholder interview respondents can be found in Attachment 2.

The Needs Assessment interviews were structured to obtain greater depth and richness of information on significant health needs identified through a review of the secondary health data collected and analyzed prior to the interviews. Interview participants were also asked to rate the impact and importance of each health need on a brief survey prior to participating in the telephone interviews. These results were used to help guide the interviews. During the interviews, participants were asked to share their perspectives on the issues, challenges and barriers relative to the identified health needs (i.e., What makes each health need a significant issue in the community? What are the challenges people face in addressing these needs?), along with identifying known resources to address these health needs, such as services, programs and/or community efforts.

The health needs focused on for the interviews were:

- 1) Access to Health Care
- 2) Behavioral Health, including Mental Health and Substance Use Disorders
- 3) Chronic Disease, including Heart Disease, Diabetes and Respiratory Disease
- 4) Overweight and Obesity
- 5) Tobacco Use/Smoking
- 6) Injuries, including both intended and unintended injuries

Interview participants were asked to share community concerns or health issues and provide additional comments to share with Oak Valley Hospital. The responses are included in the following Community Health Needs Assessment chapters.

Public Comment

In compliance with IRS regulations 501r for charitable hospitals, a hospital Community Health Needs Assessment (CHNA) and Implementation Strategy are to be made widely available to the public and public comment on the CHNA and Implementation Strategy are to be solicited. However, this is Oak Valley Hospital's first CHNA. There is no previous CHNA or Implementation Strategy to draw public comment from.

Identification of Significant Health Needs

Based on the results of the primary and secondary data collection, significant health needs were identified. The health needs were based on the size of the problem (relative portion of population afflicted by the problem); or the seriousness of the problem (impact at individual, family, and community levels). To determine size or seriousness of a problem, the health needs identified in the secondary data were measured against benchmark data, specifically county and state rates, and Healthy People 2020 objectives. Indicators related to the health needs that performed poorly against these benchmarks were considered to have met the size or seriousness criteria. Additionally, primary data sources were asked to identify and validate community and health issues based on the perceived size or seriousness of a problem.

Significant Health Needs

The following significant health needs were determined:

- Access to care
- Behavioral health/mental health
- Diabetes
- Heart disease
- Injury prevention
- Overweight/obesity (including healthy eating/physical activity)
- Respiratory disease
- Smoking

Resources to Address Significant Needs

Community input was solicited to identify resources available to address the significant health needs.

Significant Health Needs	Community Resources
Access to Health Care	<ul style="list-style-type: none">• Hospital-operated community clinics are located in various parts of the County, including: Oakdale, Escalon, Riverbank and Waterford. In addition to primary care, women's health, adult and pediatric dental services are available in the Oakdale Community Health Center.• Hospital and community clinics serve the uninsured and enroll people into insurance coverage programs. Sliding fee scale is available in all health centers for qualified patients without health insurance.• Oak Valley Community Health Center.• Stanislaus County offers Healthy Cubs program to provide health access for uninsured children if family is below 300% of the Federal Poverty Level (FPL).

	<ul style="list-style-type: none"> • Oak Valley Hospital. • Private doctors with independent practices in Oakdale, many are linked to the hospital. • Oakdale School District offers health screenings (e.g., vision, hearing, and scoliosis) and dental screenings. Many dentists in town help to meet the needs of children in the District, sometimes on a volunteer basis. • The County has an office located in Oakdale where people can go to apply for Medi-Cal, food stamps, etc. • The Oakdale Rescue Mission works to provide food, transportation to medical appointments, and other services to the homeless in Oakdale. • The Casa Del Rio Family Resource Center at Riverbank School District has partnerships and affiliations with medical services in Modesto to serve their families, but transportation is still often a barrier.
Behavioral Health Mental Health	<ul style="list-style-type: none"> • Behavioral Health Recovery Services (BHRS) is a county-run agency that helps to address both mental health and SUD problems. BHRS also has a program to improve emotional health and well-being within the county area, called “Stan-Up for Wellness.” • BHRS does not have a site in Riverbank, but provides some funding to the Riverbank School District for prevention and early intervention services and also to provide some counseling services to students both onsite and via contracted agencies. • Oakdale School District has a system in place to address mental health and substance abuse issues that are identified. The District responds quickly when they receive calls from parents with concerns about student behavior. The School District takes all symptoms and issues very seriously and investigates them. • Riverbank School District holds Red Ribbon activities in October with the student population and the larger community, including an annual health fair that was attended last year by 750-800 people. • Clergy and lay clergy are responsive and available to help families. • Center for Human Services in Oakdale offers behavioral health services and is located in walking distance from the High School. Center for Human Services offers the following services: <ul style="list-style-type: none"> ○ Counseling services to kids aged 5-18 with Medi-Cal. ○ Sliding fee scale mental health clinic for families, individuals and couples, though sometimes if they do not have insurance the cost is still too high. ○ Intensive outpatient drug and alcohol treatment for adults three nights per week. • National Association of Mentally Ill (NAMI) offers support groups for family members of mentally ill people. • Golden Valley Health Center was convening a Behavioral Health Advisory Group and providing some services, but their grant funding recently ended.

Diabetes	<ul style="list-style-type: none"> • Oak Valley Hospital offers a number of diabetes programs, including diabetes education. Some Health Plans (e.g., Health Net) also offer diabetes education. • There are primary care physicians (PCPs) that help patients manage chronic disease. • A dietician at Oak Valley Hospital periodically visits schools with a local pediatrician to conduct weight checks and provide nutrition education. The dietician also provides nutrition education within the hospital.
Heart Disease	<ul style="list-style-type: none"> • The Heart Coalition is a County-led coalition comprised of multiple partners in the community with the aim of reducing cardiovascular disease risk factors and improving the health status of Stanislaus County residents. The Coalition meets quarterly. • Primary care physicians (PCPs) located in the community help patients manage their chronic diseases.
Injury Prevention	<ul style="list-style-type: none"> • The Riverbank School District is working with the City of Riverbank, Stanislaus County, Stanislaus County Children and Families Commission, the Sheriff's Department and other local agencies to prevent pedestrian accidents. They have organized Walk-to-School events to create awareness among children and families of safe behavior and have established a committee that is working on recommendations to the City Council to advocate for adding sidewalks and widening crosswalks. • Stanislaus County Public Health Department has a Keep Baby Safe community car seat program that offers education and free car seats. • First responders in Oakdale – including the police department, fire department and hospital – work well to respond to incidents both in the community and in the schools. • The schools address injuries that occur at school quickly to promote healing and prevent complications. • Several medical practices in Oakdale (including physicians, chiropractors and physical therapists) are responsive to the needs of children who are injured at school. • Oak Valley Hospital is the first line of emergency response to injuries, but patients are transported when there is more significant trauma. • Doctors and pediatricians talk with families about safety issues for children, including car seat use and safety around swimming pools.
Overweight and Obesity	<ul style="list-style-type: none"> • Stanislaus County Public Health Department has several programs underway to reduce overweight and obesity including: <ul style="list-style-type: none"> ○ Thriving Stanislaus, an initiative to address broad determinants of health including the built environment. Efforts include increasing the number of bike lanes and parks, improving transportation and shortening commute times. ○ A Nutrition, Education and Obesity Prevention Program (NEOP) to improve the health status of low-income

	<p>individuals by increasing consumption of fresh fruits and vegetables and increasing physical activity. This is a State program that is operated locally by County health departments.</p> <ul style="list-style-type: none"> ○ A “Re-Think Your Drink” campaign to reduce intake of sugary beverages and replace them with healthier options such as water or less sugary juices. • Oakdale School District is assuring that the nutrition system in the schools (serve 5,300 students) meets all state-mandated guidelines relative to fats, trans-fats, calories and sugar content. School meals are regulated by the State to control for these factors. • Oakdale School District also provides physical education in the school for kids from Kindergarten through 12th grade. • Oakdale is a “sports-minded community” with a multitude of activities for kids to get involved in, including dance, martial arts, swimming, traditional sports, etc. These are available through the school district and in the community. • Oak Valley Hospital provides space for Zumba classes and Weight Watchers for area residents. Hospital is also conducting incentive programs for employees (e.g., most steps taken in the month). • Family Support Network offers nutrition sessions in both Spanish and English as part of their parenting classes. Family Support Network also promotes outside play and fun for kids 3-18 at a local park. • Local pediatrician and hospital dietician check weight of High School students and provide education about nutrition. • Center for Human Services provides nutrition classes and helps people learn how to use their food stamps to access healthier choices rather than junk food.
Respiratory Disease Smoking	<ul style="list-style-type: none"> • Oak Valley Hospital connects people with smoking cessation resources. • Family Support Network finds resources to assist anyone interested in quitting smoking. • The Stanislaus County Public Health Department has a tobacco education program and also refers people to the State Smoker’s Helpline (1-800-No-Butts) to help with tobacco-use cessation. • Education on alcohol, tobacco and other drug use is provided to students every other year at the Oakdale School District. A Character Education program is also offered in grades 4-6. • Riverbank School District has a Tobacco Use Prevention/Education (TUPE) grant that provided prevention/education around tobacco use and nicotine. The TUPE grant also offers cessation services to students.

Priority Health Needs

The identified significant health needs were prioritized with input from the community. A survey was used to gather input and prioritize the identified health needs. The survey was included as a component of the community stakeholder Interviews.

The following criteria were used to prioritize the health needs:

- Severity – the perceived impact of the health need on the community.
- Change over time – determination if the health need has improved, stayed the same or worsened.
- Resources – availability of resources in the community to address the health need.

Each of the stakeholders to be interviewed was sent a link to an electronic survey (Survey Monkey) in advance of the interview. The stakeholders were asked to rank each identified health need. The percentage of responses were noted as those that identified the need as having severe or very severe impact on the community, had worsened over time, and had a shortage or absence of resources available in the community. Not all survey respondents answered every question, therefore, the response percentages were calculated based on respondents only and not on the entire sample size. Behavioral health/mental health and overweight/obesity had the highest scores in the survey indicating severe impact in the community, a worsening of the issue over time and a shortage or absence available in the community to address these needs. These results are listed in the table below.

Significant Health Need	Severe and Very Severe Impact on the Community	Worsened over Time	Absence of or Insufficient Resources in the Community
Access to health care	33.4%	50.0%	16.7%
Behavioral health Mental health	57.2%	50.0%	66.7%
Diabetes	28.6%	66.7%	16.7%
Heart disease	16.7%	16.7%	33.3%
Injuries	0%	33.3%	16.7%
Overweight and obesity	57.1%	66.7%	50.0%
Respiratory disease	28.6%	33.3%	33.3%
Tobacco use	33.3%	33.3%	33.4%

The stakeholder interviewees were also asked to rank order the health needs according to highest level of importance in the community. The total score for each health need (possible score of 4) was divided by the total number of surveys for which data were provided, resulting in an overall average for each health need. The top three rated significant health needs identified on the community survey, in order of priority were: access to health care, overweight/obesity, and behavioral health/mental health. The

calculations of the community stakeholder survey resulted in the following prioritization of the significant health needs:

Significant Health Need	Rank Order Score (Total Possible Score of 4)
Access to health care	4.0
Overweight and obesity	3.9
Behavioral health/mental health	3.7
Tobacco use	3.5
Diabetes	3.3
Injuries	3.3
Heart disease	3.1
Respiratory disease	3.1

Evaluation of Impact

The IRS rules for charitable hospitals require the CHNA report to include an evaluation of the impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA. As this is Oak Valley Hospital's first CHNA, there is no previous CHNA and, therefore, no evaluation of impact was possible.

Community Profile

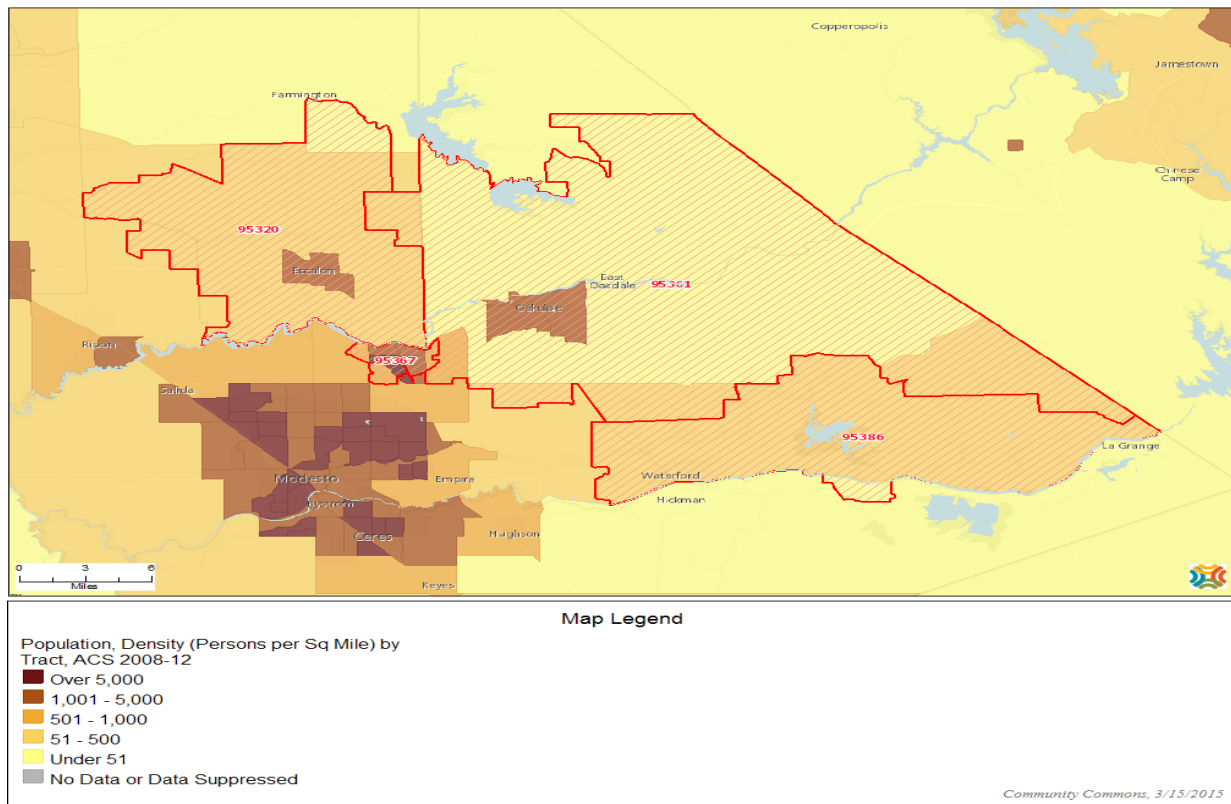
Population

Based on population estimates from the U.S. Census American Community Survey, the population in the Oak Valley Hospital District service area is 77,596. Population density ranges from the Riverbank area (at 5,578 persons per square mile) to the more sparsely populated Zip code areas of Escalon, Oakdale, and Waterford.

Population of the Service Area

Population Area (Zip Code)	Total Population	Total Land Area (Square Miles)	Population Density (Per Square Mile)
Escalon (95320)	13,000	86.68	149.98
Oakdale (95361)	32,374	162.5	199.22
Riverbank (95367)	23,428	4.20	5,578.10
Waterford (95386)	9,794	67.64	144.80
Oak Valley Hospital District	78,596	321.02	244.83
Stanislaus County	518,321	1,494.37	346.85

Source: U.S. Census Bureau, American Community Survey, 2009-2013. <http://factfinder.census.gov>



The area served by the Oak Valley Hospital District has experienced dramatic growth of 23.2% in just over 10 years, higher than the county (16%) or state (11%). This growth was concentrated in Oakdale and Riverbank.

Population Growth by Area

Geographic Area	Total Population, 2000 Census	Current Population Estimate	Total Population Change (2000 to Current)	Percent Population Change (2000 to Current)
Escalon (95320)	11,233	13,000	1,767	15.7%
Oakdale (95361)	25,411	32,374	6,963	27.4%
Riverbank (95367)	18,187	23,428	5,241	28.8%
Waterford (95386)	8,970	9,794	824	9.2%
Oak Valley Hospital District	63,801	78,596	14,795	23.2%
Stanislaus County	446,997	518,321	71,324	16.0%
California	33,871,648	37,659,181	3,787,533	11.2%

Source: U.S. Census Bureau, Census 2000, American Community Survey, 2009-2013. <http://factfinder.census.gov>

Children and youth, ages 0-17 make up 28.1% of the population; 9.8% are 18-24 years of age; 26.1% are 25-44; 24.3% are 45-64; and 11.7% of the population are seniors, 65 years of age and older. The service area age distribution closely matches that of Stanislaus County.

Population by Age

Age Group	Oak Valley Hospital District		Stanislaus County		California	
	Number	Percent	Number	Percent	Number	Percent
Age 0-4	5,704	7.2%	39,601	7.6%	2,527,752	6.7%
Age 5-17	16,413	20.9%	106,683	20.6%	6,714,466	17.8%
Age 18-24	7,703	9.8%	54,323	10.5%	3,961,953	10.5%
Age 25-44	20,534	26.1%	137,684	26.6%	10,592,531	28.1%
Age 45-64	19,075	24.3%	122,821	23.7%	9,415,614	25.0%
Age 65+	9,167	11.7%	57,209	11.0%	4,446,865	11.8%
Total	78,596	100.0%	518,321	100.0%	37,659,181	100.0%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, DP05. <http://factfinder.census.gov>

When the population is examined by Zip code, Riverbank (29.9%) and Waterford (31.1%) have the highest concentration of children and youth in the service area. In contrast, Oakdale (14%) and Escalon (13%) have the highest percentage of seniors in the service area.

Population by Age and Zip Code

Geographic Area	Zip Code	Ages 0-17	Ages 18-64	Ages 65+	Median Age
Escalon	95320	24.8%	62.2%	13.0%	38.8
Oakdale	95361	27.2%	58.8%	14.0%	37.3
Riverbank	95367	29.9%	60.5%	9.6%	30.9
Waterford	95386	31.3%	61.5%	7.2%	33.7
Oak Valley Hospital District		28.1%	60.2%	11.7%	N/A
Stanislaus County		28.2%	60.7%	11.0%	33.0
California		24.5%	63.7%	11.8%	35.4

Source: U.S. Census Bureau, American Community Survey, 2009-2013, DP05. <http://factfinder.census.gov>

Gender

Of the area population, 50.5% are male and 49.5% are female. The service area consists of a higher percentage of males than found in the state (49.7%).

Population by Gender

Gender	Oak Valley Hospital District	Stanislaus County	California
Male	50.5%	49.5%	49.7%
Female	49.5%	50.5%	50.3%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, DP05. <http://factfinder.census.gov>

Race/Ethnicity

The population race/ethnicity in the hospital service area is 59.5% White and 35.1% Hispanic or Latino. The remaining 5.4% of the population is distributed across other ethnic groups (Asian, Black/African American, Native Americans, Hawaiians, multiple, or other races). The area has a much larger percentage of Whites and a smaller percentage of Latinos than compared to Stanislaus County or California.

Race/Ethnicity

Race and Ethnicity	Oak Valley Hospital District		Stanislaus County		California	
	Number	Percent	Number	Percent	Number	Percent
Hispanic or Latino	27,602	35.1%	220,267	42.5%	14,270,345	37.9%
Asian	1,282	1.6%	26,349	5.1%	4,938,488	13.1%
White	46,758	59.5%	238,928	46.1%	14,937,880	39.7%
Black or African American	735	0.9%	13,305	2.6%	2,153,341	5.7%
Native HI / Pacific Islander	434	0.6%	3,423	0.7%	136,053	0.4%
American Indian/AK Native	478	0.6%	2,633	0.5%	146,496	0.4%
Other or Multiple	1,307	1.7%	13,416	2.6%	1,076,578	2.9%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, DP05. <http://factfinder.census.gov>

When examined by Zip code, over 70% of the populations of Oakdale and Escalon are White. The largest populations of Latinos are found in Riverbank (54.2%) and Waterford (42.9%), compared to 35% across the service area.

Population by Race and Ethnicity and Zip Code

Geographic Area	Zip Code	White	Hispanic/Latino	Asian	Black
Oakdale	95361	72.1%	23.2%	1.6%	0.6%
Riverbank	95367	38.6%	54.2%	2.4%	1.8%
Escalon	95320	71.4%	24.7%	0.9%	0.3%
Waterford	95386	52.2%	42.9%	1.0%	0.6%
Oak Valley Hospital District		59.5%	35.1%	1.6%	1.6%
Stanislaus County		46.1%	42.5%	5.1%	2.6%
California		39.7%	37.9%	13.1%	5.7%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, DP05. <http://factfinder.census.gov>

Citizenship

In the community served by the hospital, 15.2% of the population are foreign born and 9.4% are not citizens.

Foreign Born Residents and Citizenship

Geographic Area	Zip Code	Foreign Born	Not a U.S. Citizen
Escalon	95320	14.8%	8.3%
Oakdale	95361	10.1%	6.4%
Riverbank	95367	21.6%	12.6%
Waterford	95386	17.4%	13.6%
Oak Valley Hospital District		15.2%	9.4%
Stanislaus County		20.5%	12.5%
California		27.0%	14.3%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, DP02. <http://factfinder.census.gov>

Language

In the hospital service area, 70.7% of residents speak English only. Spanish is spoken in one-quarter of homes (25.3%), a smaller percentage than in the county (31.5%) or state (28.8%). Other languages are spoken in 4% of households.

Language Spoken at Home, Population 5 Years and Older

Language	Oak Valley Hospital District	Stanislaus County	California
Speaks Only English	70.7%	59.3%	56.3%
Speaks Spanish	25.3%	31.5%	28.8%
Speaks Asian/PI Language	0.9%	3.0%	9.6%
Speak Indo-European Language	2.4%	4.1%	4.4%
Speaks Other Language	0.7%	2.1%	0.9%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, DP02. <http://factfinder.census.gov>

When communities are examined by language spoken in the home, Riverbank (41.3%) and Waterford (30.1%) have the highest rates of Spanish speakers in the service area.

Language Spoken at Home

Geographic Area	Zip Code	English	Spanish	Asian/Pacific Islander	Indo European
Oakdale	95361	80.9%	15.8%	0.7%	2.3%
Riverbank	95367	54.1%	41.3%	1.4%	1.3%
Escalon	95320	76.5%	16.8%	0.2%	6.4%
Waterford	95386	68.4%	30.1%	1.1%	0.0%
Oak Valley Hospital District		70.7%	25.3%	0.9%	2.4%
Stanislaus County		59.3%	31.5%	3.0%	4.1%
California		56.3%	28.8%	9.6%	4.4%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, DP02. <http://factfinder.census.gov>

In the area school districts, Oakdale, Escalon, and Waterford have lower percentages of English learners than the county average. Riverbank Unified has the highest percentage of English learners, at 44.5% (more than 1,200 students in 2013-2014).

English Learners

School District	Percent of English Learners
Escalon Unified	20.9%
Oakdale Joint Unified	10.8%
Riverbank Unified	44.5%
Waterford Unified	15.5%
Oak Valley Hospital District	20.3%
Stanislaus County	25.4%
California	22.7%

Source: California Department of Education DataQuest, 2013-2014. <http://dq.cde.ca.gov/dataquest/>

Veterans

In the Oak Valley Hospital District service area, 8.0% of the population 18 years and older are veterans. This is higher than the percentage of veterans found in the county (6.8%) and the state (6.7%).

Veterans

Veteran Status	Oak Valley Hospital District	Stanislaus County	California
Veteran Status	8.0%	6.8%	6.7%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, DP02. <http://factfinder.census.gov>

Social and Economic Factors

Social and Economic Factors Ranking

The County Health Rankings rank counties according to health factors data. Social and economic indicators are examined as a contributor to the health of a county's residents. California's 57 evaluated counties (Alpine County was excluded) are ranked according to social and economic factors with 1 being the county with the best factors to 57 for that county with the poorest factors. This ranking examines: unemployment, high school graduation rates, children in poverty, social support, and others. Stanislaus County is ranked as 50; in the bottom 20% of all California counties on social and economic factors. Neighboring San Joaquin County, in which Escalon is located, is ranked 51.

Social and Economic Factors Ranking

Geographic Area	County Ranking (out of 57)
San Joaquin County	50
Stanislaus County	51

Source: County Health Rankings, 2015. www.countyhealthrankings.org

Poverty

Poverty thresholds are used for calculating all official poverty population statistics. They are updated each year by the Census Bureau. For 2014, the federal poverty level (FPL) for one person was \$11,490 and for a family of four \$23,550.

Among the residents in the Oak Valley Hospital District, 15.4% are at or below 100% of the federal poverty level (FPL) and 34% are at 200% of FPL or below. Oakdale and Escalon have the lowest rates of poverty, while Riverbank and Waterford have poverty rates higher than the service area average. In Waterford 46.1% of the population are identified as low-income (at or below 200% of FPL).

Ratio of Income to Poverty Level

Geographic Area	Zip Code	Below 100% Poverty	Below 200% Poverty
Escalon	95320	10.9%	29.1%
Oakdale	95361	15.0%	29.9%
Riverbank	95367	16.0%	37.3%
Waterford	95386	21.6%	46.1%
Oak Valley Hospital District		15.4%	34.0%
Stanislaus County		20.3%	43.8%
California		15.9%	35.9%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, S1701. <http://factfinder.census.gov>

Examining poverty levels among children, seniors and households headed by females paints an important picture of the population within the hospital service area. Waterford has the highest poverty rates among children (25.2%), while Riverbank had the highest rates among seniors at 13%. Escalon (67.4%) and Waterford (50.7%) have high rates of poverty among female head of household (HoH) with children.

Poverty Levels of Children, Seniors, and Female Head of Household with Children

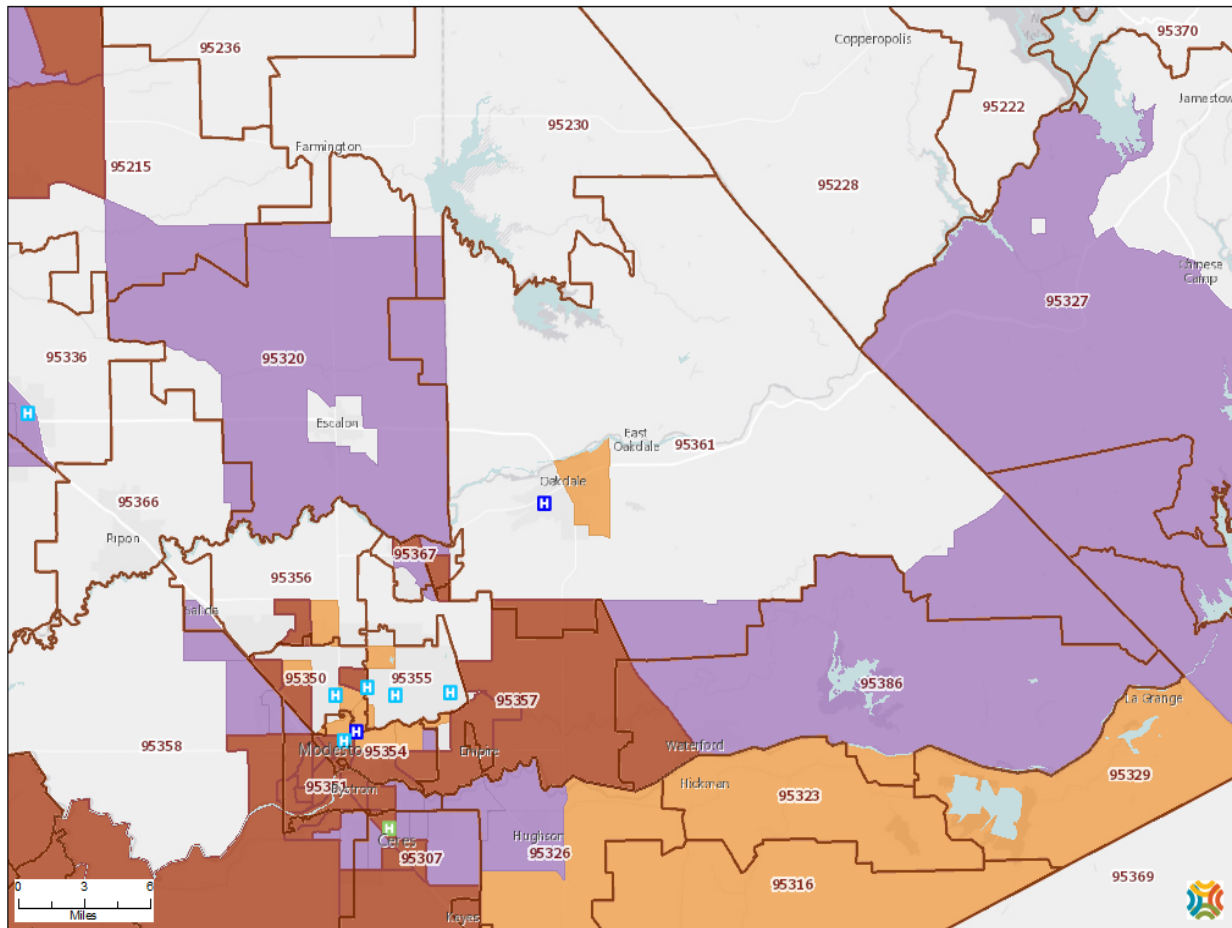
Geographic Area	Zip Code	Children Under 18 Years Old	Seniors	Female HoH with Children
Escalon	95320	14.4%	10.6%	67.4%
Oakdale	95361	19.7%	10.5%	42.3%
Riverbank	95367	21.6%	13.0%	41.5%
Waterford	95386	25.2%	10.6%	50.7%
Oak Valley Hospital District		20.3%	11.1%	N/A
Stanislaus County		28.4%	10.8%	47.5%
California		22.1%	9.9%	36.8%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, S1701. <http://factfinder.census.gov>

Vulnerable Populations

When vulnerable populations in the area are mapped, pockets of poverty emerge. The map below shows the Oak Valley Hospital District and surrounding areas, highlighting the percentage of each Zip code that has more than 20% poverty (in lavender) and more than 20% with low education, defined as less than a high school education (in tan). Areas above the vulnerable threshold for both poverty and education are noted on the map in brown. Parts of Riverbank, in particular, contain a higher percentage of vulnerable populations. Oakdale and Riverbank show higher rates of poverty, in the areas indicated on the map. For education levels, much of Escalon, Riverbank and Waterford have lower education levels, with 20% to 30% of the population possessing less than a high school education.

Vulnerable Populations in the Oak Valley Hospital Area



Map Legend

Hospitals by Location, POS 2014

- Public
- Private
- Other

- Vulnerable Populations Footprint, ACS 2008-12
- >20% of population with less than a high school diploma

- >20% of population below poverty levels

Community Commons, 5/16/2015

Households

The median household income in the area ranges from \$52,560 in Waterford to \$60,972 in Oakdale. All communities in the service area have median household incomes that are higher than the county median of \$49,297.

Median Household Income

Geographic Area	Zip Code	Median Household Income
Escalon	95320	\$55,688
Oakdale	95361	\$60,972
Riverbank	95367	\$57,404
Waterford	95386	\$52,560
Stanislaus County		\$49,297
California		\$61,094

Source: U.S. Census Bureau, American Community Survey, 2009-2013, DP03. <http://factfinder.census.gov>

In the service area, there are more than 25,000 households. The percentage of 2 person households (32.8%) is higher than in the county (29.1%) or state (29.9%) for these size households.

Household Size

Household Size	Oak Valley Hospital District	Stanislaus County	California
1 Person Households	20.9%	20.3%	24.2%
2 Person Households	32.8%	29.1%	29.9%
3 Person Households	14.9%	16.8%	16.3%
4+ Person Households	31.4%	33.7%	29.5%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, S2501. <http://factfinder.census.gov>

In the hospital service area, residents have somewhat lower rates of supportive benefits than found in the county. Five percent of service area residents receive SSI benefits, 4.0% receive cash public assistance income and, 8.1% of residents receive food stamp benefits.

Household Supportive Benefits

Benefits	Oak Valley Hospital District	Stanislaus County
Households	25,496	166,883
Supplemental Security Income (SSI)	5.0%	7.5%
Public Assistance	4.0%	5.7%
Food Stamps/SNAP	8.1%	14.0%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, S2501. <http://factfinder.census.gov>

According to the 2013 Stanislaus County Community Health Assessment, 51.4% of adult residents who went without basic needs in the past 12 months also reported food insecurity, defined by the U.S. Department of Agriculture as “food-access problems or limitations.” For adult residents below 200% of the Federal Poverty Level, 29.7% reported food insecurity, which is lower than the state rate of 38.4%.

Food Insecurity

Food Insecurity	Stanislaus County	California
Residents Who Went Without Basic Needs and Reported Food Insecurity	51.4%	N/A
Adults Below 200% FPL Reporting Food Insecurity*	29.7%	38.4%

Source: 2013 Stanislaus County Community Health Assessment.

<http://www.stancounty.com/BHRS/pdf/CommunityHealthAssessment/FullCommunityHealthAssessment2013.pdf>

*California Health Interview Survey, 2014. <http://askchis.ucla.edu>

Free or Reduced Price Meals

The number of students eligible for the free or reduced price lunch program is one indicator of the socioeconomic status of a school district’s student population. In three of the four school districts in the service area, over half of the students are eligible for the program. The highest rate of eligibility was found in Riverbank Unified, with 81.1% of children meeting program eligibility requirements. Examining district totals provides an overview of the student population; this is an average among all the schools. Within the district there are schools with higher and lower rates of eligible low-income children.

Eligibility for Free or Reduced Price Meals (FRPM) Program

School District	Percent Eligible Students
Escalon Unified	52.8%
Oakdale Joint Unified	43.1%
Riverbank Unified	81.1%
Waterford Unified	59.8%
Oak Valley Hospital District	56.6%
Stanislaus County	66.0%
California	59.4%

Source: California Department of Education DataQuest, 2013-2014. <http://dq.cde.ca.gov/dataquest/>

Unemployment

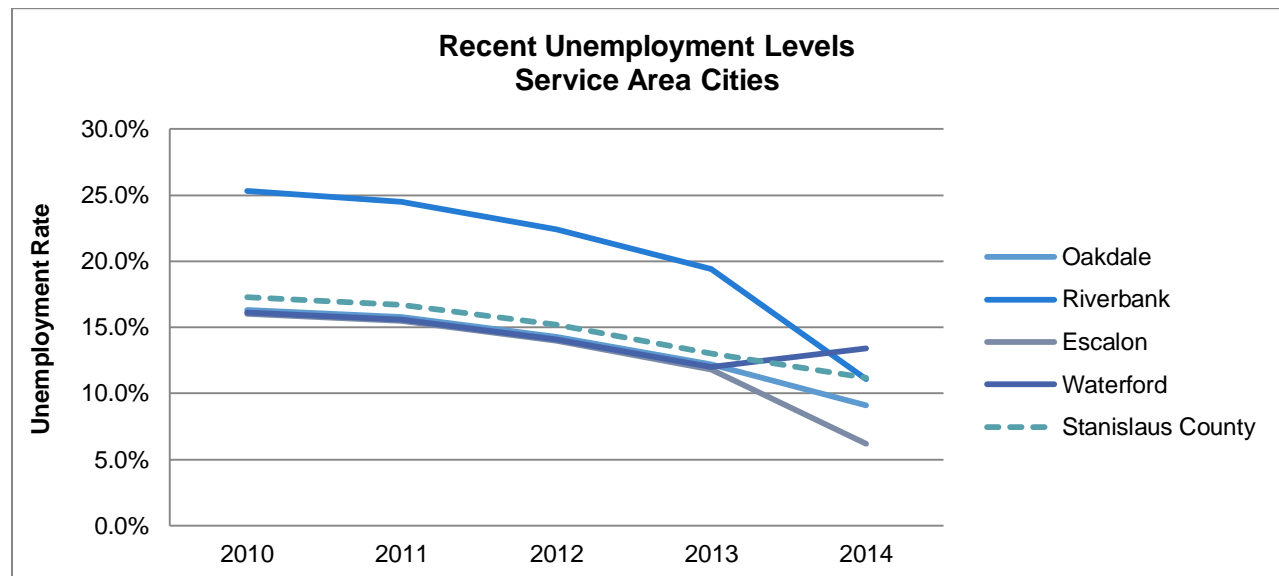
The cities that make up the Oak Valley Hospital District service area have variable rates of unemployment when compared to the county and the state. Riverbank (11.1%) and Waterford (13.4%) are at or above the county average of 11.2%, and well above the state unemployment rate (7.5%). Oakdale and Escalon are below the county unemployment rate.

Unemployment Rate, 2014 Average

Geographic Area	Unemployment Rate
Escalon	6.2%
Oakdale	9.1%
Riverbank	11.1%
Waterford	13.4%
Stanislaus County	11.2%
California	7.5%

Source: California Employment Development Department, [Labor Market Information, 2014](#)

Overall, unemployment rates have decreased over the past five years. And while rates for Riverbank dropped to about the county average in 2014, the city's unemployment rate has previously been much higher than neighboring cities. Waterford shows a slight increase in unemployment since 2013 but the rate is lower than 2010 levels.



Source: California Employment Development Department, [Labor Market Information, 2010-2014](#).

Educational Attainment

Of the population age 25 and over, 19.1% of the service area population does not have a high school diploma, which is lower than the county average of 23.6% with no high school diploma.

Population, 25 Years and Older, with No High School Diploma

Oak Valley Hospital District	Stanislaus County	California
19.1%	23.6%	18.7%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, S1501. <http://factfinder.census.gov>

Nearly 29% of area adults are high school graduates and 24.5% are college graduates. The level of college degree attainment in the county is 23.6%.

Educational Attainment of Adults, 25 Years and Older

	Oak Valley Hospital District	Stanislaus County	California
Population 25 years and older	48,776	317,714	24,455,010
Less than 9 th Grade	10.5%	13.0%	10.2%
Some High School, No Diploma	8.6%	10.6%	8.5%
High School Graduate	28.8%	28.3%	20.7%
Some College, No Degree	27.6%	24.5%	22.1%
Associate Degree	8.4%	7.2%	7.8%
Bachelor Degree	10.8%	11.1%	19.4%
Graduate or Professional Degree	5.3%	5.3%	11.2%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, S1501. <http://factfinder.census.gov>

High school graduation rates or the number of high school graduates that graduated four years after starting ninth grade, are higher in all of the area school districts except for Riverbank Unified, when compared to the county (82.1%), and the state (80.8%). The Healthy People 2020 objective for High School graduation rates is 82.4%.

High School Graduation Rates, 2013-2014

School District	High School Graduation Rate
Escalon Unified	94.9%
Oakdale Joint Unified	92.2%
Riverbank Unified	80.5%
Waterford Unified	92.7%
Stanislaus County	82.1%
California	80.8%

Source: California Department of Education, 2013-2014. <http://dq.cde.ca.gov/dataquest/>

Homelessness

The rate of homeless in Stanislaus County can be estimated from several sources. The Stanislaus Housing & Support Services Collaborative conducts an annual 'point-in-time' count of homeless for the Turlock/Modesto/Stanislaus County Community of Care (CoC), which is reported to the U.S. Department of Housing and Urban Development (HUD). Recent trends show that rates of homelessness are declining along with the percentage of homeless who are unsheltered. In 2014, 8.5% of counted homeless individuals were children, and 8.0% were young adults (ages 18-24).

Homeless, Turlock/Modesto/Stanslaus County, 2010 to 2014

Year of Count	Total Homeless	Sheltered	Unsheltered
2010	1,800	44.5%	55.5%
2011	1,434	44.8%	55.2%
2012	1,470	46.2%	53.8%
2013	1,201	46.3%	53.7%
2014	1,156	61.7%	38.3%

Source: HUD Annual Homeless Assessment Report, 2014; HUD PIT Counts by CoC.

<https://www.hudexchange.info/resource/4074/2014-ahar-part-1-pit-estimates-of-homelessness/>

A community survey conducted as a part of the *2013 Stanislaus County Community Health Assessment*, found that 14.2% of community survey participants reported being homeless. Additional information provided by the survey include: 3.9% were living with friends or relatives; 2.8% were living in a place not meant for humans to live, 2.4% felt threatened or unsafe in their current housing situation. Smaller percentages (<1%) reported living in a shelter, transitional housing, or facing eviction. Among children, 5.6% of public school enrollees in Stanislaus County were recorded as being homeless at some point during the 2012-13 school year, according to the California Department of Education (Source: kidsdata.org, April 2014).

Community Input - Homeless

Stakeholder interviews identified the following issues, challenges and barriers related to homelessness:

- More assistance is needed for homeless people, including both services and shelters. The only shelter is located in Modesto, which requires transportation. The Oakdale Rescue Mission has indicated that they would operate a shelter if they had a location and the resources to do so.

Crime and Violence

Violent crimes include homicide, rape, robbery and assault. Crime statistics indicate that service area cities have lower rates of violent crime than the county or state. Waterford reported the highest crime rate in the area (296.1 per 100,000 persons).

Violent Crimes, per 100,000 Persons, 2013

Geographic Area	Number	Rate
Escalon	10	76.0
Oakdale	50	157.9
Riverbank	37	159.2
Waterford	29	296.1
Oak Valley Hospital District	126	161.9
Stanislaus County	2,716	527.3
California	151,634	406.3

Source: California Department of Justice, Office of the Attorney General, 2013. <http://oag.ca.gov/crime/cjisc/stats/crimes-clearance>

Calls for domestic violence are categorized as being with or without a weapon. Most cities experienced a majority of calls that did not involve a weapon.

Domestic Violence Calls, 2013

Geographic Area	Total	Without Weapon	With Weapon
Escalon	28	96.4%	3.6%
Oakdale	100	86.0%	14.0%
Riverbank	63	93.7%	6.3%
Waterford	36	83.3%	16.7%
Oak Valley Hospital District	227	89.0%	11.0%
Stanislaus County	2,447	77.8%	22.2%
California	158,547	60.9%	39.1%

Source: California Department of Justice, Office of the Attorney General, 2013. <http://oag.ca.gov/crime/cjisc/stats/crimes-clearance>

Health Access

Health Insurance

Health insurance coverage is considered an important component to accessing health care. In Stanislaus County, 87.5% of residents are insured, only slightly lower than the state rate (88.1%).

Insurance Coverage for Adults, Teens and Children

Geographic Area	Insured	Uninsured
Stanislaus County	87.5%	12.5%
California	88.1%	11.9%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

In Stanislaus County, 37% of the population has employment-based health insurance. 26.2% are covered by Medi-Cal and 13.5% of the population has coverage that includes Medicare. Stanislaus County has higher rates of Medi-Cal and private purchase insurance than found in the state.

Insurance Coverage by Type of Coverage

Insurance Coverage	Stanislaus County	California
Total Insured	87.5%	88.1%
Employment-Based	37.0%	44.8%
Medi-Cal	26.2%	22.5%
Medicare and Others	8.5%	9.0%
Private Purchase	8.5%	6.4%
Medicare and Medi-Cal	3.2%	3.0%
Other Public	2.4%	1.0%
Medicare	1.8%	1.4%
No Insurance	12.5%	11.9%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Insurance rates for children are 95.8% in the service area. This is higher than county (93.5%) and state (91.7%) rates of insurance coverage for children.

Insurance Coverage for Children, 0-17

Geographic Area	Zip Code	Insured	Uninsured
Escalon	95320	95.3%	4.7%
Oakdale	95361	96.5%	3.5%
Riverbank	95367	94.9%	5.1%
Waterford	95386	96.4%	3.6%
Oak Valley Hospital District		95.8%	4.2%
Stanislaus County		93.5%	6.5%
California		91.7%	8.3%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, S2701. <http://factfinder.census.gov>

Among adults in the service area, 77.6% have health insurance. A higher percentage of Escalon adults are insured (82.1%) and a lower percentage of adults are insured in Waterford (75%).

Insurance Coverage for Adults, 18-64

Geographic Area	Zip Code	Insured	Uninsured
Escalon	95320	82.1%	17.9%
Oakdale	95361	77.0%	23.0%
Riverbank	95367	77.0%	23.0%
Waterford	95386	75.0%	25.0%
Oak Valley Hospital District		77.6%	22.4%
Stanislaus County		74.0%	26.0%
California		75.5%	24.5%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, S2701. <http://factfinder.census.gov>

Nearly all seniors in the service area have some type of insurance coverage, with the exception of Riverbank, which reports 97.9% of seniors with insurance.

Insurance Coverage for Adults 65+

Geographic Area	Zip Code	Insured	Uninsured
Escalon	95320	100.0%	0.0%
Oakdale	95361	100.0%	0.0%
Riverbank	95367	97.9%	2.1%
Waterford	95386	100.0%	0.0%
Oak Valley Hospital District		99.5%	0.5%
Stanislaus County		98.7%	1.3%
California		98.3%	1.7%

Source: U.S. Census Bureau, American Community Survey, 2009-2013, S2701. <http://factfinder.census.gov>

Sources of Care

Residents who have a medical home and access to a primary care provider improve continuity of care and decrease unnecessary ER visits. 78.6% of county residents reported a regular source for medical care. The source of care for 52.4% of Stanislaus County residents is a doctor's office, HMO, or Kaiser. This is lower than the state rate (60.7%). Clinics and community hospitals are the source of care for 24.6% in the county, while 21.4% of county residents have no regular source of care.

Sources of Care

Sources of Care	Stanislaus County	California
Have Usual Place to Go When Sick or Need Health Advice	78.6%	85.8%
Dr. Office/HMO/Kaiser Permanente	52.4%	60.7%
Community Clinic/Government Clinic/Community Hospital	24.6%	23.0%
ER/Urgent Care	1.5%	1.4%
Other	0.1%	0.7%
No Source of Care	21.4%	14.2%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Accessing health care can be affected by the number of providers in a community. According to the 2015 County Health Rankings, Stanislaus County ranks 40 out of 58 California counties for clinical care, which includes ratios of population-to-care providers and preventive screening practices, among others. The ratio of county population to health care providers shows fewer primary care physicians, dentists, and mental health providers for its population when compared to California.

Access to Clinical Care, Ratio of Population to Health Care Providers

Providers	Stanislaus County	California
Primary Care Physicians	1,474:1	1,294:1
Dentists	1,723:1	1,291:1
Mental Health Providers	636:1	376:1

Source: County Health Rankings, 2015. www.countyhealthrankings.org

The Oakdale-Riverbank area, like most of Stanislaus County, is designated as a Primary Care Shortage Area (PCSA) and a Registered Nurse Shortage Area (RHSA) by the California Healthcare Workforce Policy Commission. The criteria for the PCSA designation are percent of population below 100% poverty level and primary care physician-to-population ratio. The current ratio is 3,172:1 persons per primary care physician within this PCSA (Source: OSHPD, <http://gis.oshpd.ca.gov/atlas/topics/shortage/pcsa/211>). The RHSA designation is based on the ratio of patients to nurse availability in facilities where they are employed. The ratio of patients to nurses is 68.5 to 1 (Source: OSHPD, 2015 <http://gis.oshpd.ca.gov/atlas/topics/shortage/rnsa>).

Delayed care may also indicate reduced access to care; 11.3% of county residents reported delaying or not seeking medical care and 11.6% reported delaying or not getting their prescription medication in the last 12 months.

Delay of Care

Delay of Care or Medications	Stanislaus County	California
Delayed or Didn't Get Medical Care in Last 12 Months	11.3%	11.3%
Delayed or Didn't Get Prescription Medicine in Last 12 Months	11.6%	8.7%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Use of the Emergency Room

An examination of ER use can lead to improvements in providing community-based prevention and primary care; 19.2% of residents in Stanislaus County visited an ER over the period of a year. Children and youth visited the ER (36.3%) at higher rates than adults and seniors. Persons below the Federal Poverty Levels were somewhat more likely to use the ER (24.6%).

Use of Emergency Room

ER Use	Stanislaus County	California
Visited ER in Last 12 Months	19.2%	17.4%
0-17 Years Old	36.3%	19.3%
18-64 Years Old	12.9%	16.5%
65 and Older	12.8%	18.4%
<100% of Poverty Level	24.6%	20.6%
<200% of Poverty Level	21.4%	19.8%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Oak Valley Hospital reported 23,861 emergency room encounters in 2014, with 751 resulting in admission. At Oak Valley Hospital, accidents and other causes of injury accounted for 22.3% of emergency room encounters in 2014.

Principal Causes of Injury ER Encounters, Oak Valley Hospital, 2014

Principal Cause of Injury Group	ER Encounters	Percentage
Injuries/Poisonings/Complications	5,316	22.3%
Symptoms	3,854	16.3%
Respiratory System	3,028	12.7%
Nervous System	2,799	11.7%
Digestive System	1,919	8.0%
Skin Disorders	1,364	5.7%
Genitourinary System	1,353	5.7%
Musculoskeletal System	1,225	5.1%
Infections	747	3.1%
Mental Disorders	484	2.0%
Other Reasons	465	1.9%
Circulatory System	442	1.8%
All Pregnancies	440	1.9%
Endocrine System	306	1.3%
Anemia and Other Blood Disorders	69	0.3%
Cancer (Includes non-cancerous growths)	24	0.1%
Perinatal Disorders	20	0.08%
Birth Defects	4	0.02%
Births	2	0.01%
Total Emergency Room Encounters	23,861	100.0%

Source: California Office of Statewide Health Planning & Development, 2014.

http://report.oshpd.ca.gov/?DID=PID&RID=Facility_Summary_Report_Emergency_Department

http://report.oshpd.ca.gov/?DID=PID&RID=Facility_Summary_Report_Hospital_Inpatient

Dental Care

In Stanislaus County, 4.1% of adults have never been to the dentist compared with 2.2% at the state level. 71.1% of adults have been to a dentist in the past two years.

Time since Last Dental Visit, Adult

Dental Visit	Stanislaus County	California
Less than 6 Months to 2 Years Ago	71.1%	79.7%
More than 2 Years to More than 5 Years	24.7%	18.1%
Never Been to Dentist	4.1%	2.2%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Community Input - Access to Care

Stakeholder interviews identified the following issues, challenges and barriers related to access to care:

- Transportation can be a challenge from the more rural parts of Stanislaus County (e.g., from the Oakdale and Riverbank areas) into Modesto for medical services.

- A language barrier exists for the predominantly Spanish-speaking population in the Riverbank area.
- There is a shortage of medical professionals relative to the population size overall.
- There is still a 20% uninsured rate, though that number should be shifting with Medical Expansion and Health Care Reform.
- Among those with health insurance, there is a concern that people are not actually using their coverage and accessing care. Many people, including many elderly and homeless, do not go to a doctor until they are very sick even when they have health insurance.
- Health plans are not always accepted by available medical facilities.
- There is a lack of parenting classes for teenage and other young mothers and there is an overuse of television as a babysitting tool.
- While prenatal services are offered in the community, the hospital closed its OB services and women must now leave the community to deliver their babies.
- Although hospital-operated clinics exist in several communities and some are open seven days a week, it is not always possible to get appointments. This results in use of the more expensive emergency room.

Birth Characteristics

Births

In 2013, there were 1,021 births in the service area. The majority of births were to mothers who are White (49.1%) or Latino (45.7%). 2.5% of births were to mothers of two or more races, and 2.6% were to another race or unknown (Source: California Department of Public Health, 2013).

Teen Birth Rate

In 2013, teen pregnancy rates in the service area occurred at a rate of 58.8 per 1,000 births (or 5.9% of total births). This rate is lower than the teen pregnancy rate found in the county and the state. Riverbank experienced the highest teen birth rate at 7.3%.

Births to Teenage Mothers (Under Age 20)

Geographic Area	Zip Code	Births to Teen Mothers	Live Births	Rate per 1,000 Live Births
Escalon	95320	11	156	70.5
Oakdale	95361	17	373	45.6
Riverbank	95367	25	341	73.3
Waterford	95386	7	151	46.4
Oak Valley Hospital District		60	1,021	58.8
Stanislaus County		807	7,804	103.4
California		43,127	509,979	84.6

Source: California Department of Public Health, 2013. Vital Statistics Query System. <http://www.apps.cdph.ca.gov/vsq/default.asp>

Prenatal Care

In 2013, pregnant women in the service area entered prenatal care early – within the first trimester - at a rate of 78.8%. This rate of early entry translates to 22.2% of women entering prenatal care late or not at all. Waterford experienced the lowest rate of early prenatal care at 76.5%. The other areas meet the Healthy People 2020 benchmark of 77.9% of women entering prenatal care in the first trimester.

Early Entry into Prenatal Care (In First Trimester)

Geographic Area	Zip Code	Early Prenatal Care	Live Births*	Percent
Escalon	95320	122	154	79.2%
Oakdale	95361	291	367	79.3%
Riverbank	95367	264	334	79.0%
Waterford	95386	114	149	76.5%
Oak Valley Hospital District		791	1,004	78.8%
Stanislaus County		5,870	7,478	78.5%
California		406,035	485,538	83.6%

Source: California Department of Public Health, 2013. Vital Statistics Query System. <http://www.apps.cdph.ca.gov/vsq/default.asp>

*Births in which the first month of prenatal care is unknown are not included in the tabulation.

Low Birth Weight

Low birth weight is a negative birth indicator. Babies born at a low birth weight are at higher risk for disease, disability and possibly death. The Oak Valley Hospital District service area has a lower rate of low birth weight babies (50.0 per 1,000 live births) when compared to the county (62.8) and state (68.4 per 1,000 live births). The rate of low birth weight in the service area (5.0%) is lower than the Healthy People 2020 objective of 7.8% of births being low birth weight. (When examining geographic areas with a small occurrence it is important to use caution when drawing conclusions from data as small occurrences may result in widely varying rates over time.)

Low Birth Weight (Under 2,500 g)

Geographic Area	Zip Code	Low Birth Weight	Live Births	Rate per 1,000 Live Births
Escalon	95320	2	156	12.8
Oakdale	95361	23	373	61.7
Riverbank	95367	21	341	61.6
Waterford	95386	5	151	33.1
Oak Valley Hospital District		51	1,021	50.0
Stanislaus County		476	7,579	62.8
California		33,798	494,392	68.4

Source: California Department of Public Health, 2013. Vital Statistics Query System. <http://www.apps.cdph.ca.gov/vsq/default.asp>

Infant Mortality

Infant mortality reflects deaths of children under one year of age. The infant death rate in the county is 5.8 and the state is 4.7 deaths per 1,000 live births. The county rate is just under the Healthy People 2020 objective of 6.0 deaths per 1,000 live births. Infant mortality rates are not available for smaller geographies.

Infant Mortality Rate, 2011

Geographic Area	Infant Deaths	Live Births	Death Rate
Stanislaus County	45	7,804	5.8
California	2,419	509,979	4.7

Source: California Department of Public Health, 2011. Vital Statistics Query System. <http://www.apps.cdph.ca.gov/vsq/default.asp>

Mortality/Leading Causes of Death

Mortality Rates

The two leading causes of death in the Oak Valley Hospital District are heart disease and cancer. The crude death rate ("Rate") is a ratio of the number of deaths to the entire population. The heart disease mortality rate in the service area is 186.3 per 100,000 persons, higher than the Healthy People (HP) 2020 objective of 103.4 deaths per 100,000 persons. The cancer death rate is 151.6 per 100,000 persons, slightly lower than county and state averages and the HP 2020 target of 161.4. The death rate for stroke ranked third at 46.2, higher than county and state rates and the Healthy People 2020 objective of 34.8.

Mortality Rates, per 100,000 Persons, 2012

Causes of Death	Oak Valley Hospital District		Stanislaus County	California	HP 2020
	Number	Rate	Rate	Rate	Rate
Heart Disease	145	186.3	199.8	158.2	103.4
Cancer	118	151.6	156.5	154.1	161.4
Stroke	36	46.2	37.9	36.0	34.8
Chronic Lower Respiratory Disease	34	43.7	48.3	34.6	No Objective
Alzheimer's Disease	25	32.1	39.2	31.2	No Objective
Unintentional Injuries	21	27.0	36.7	28.8	36.4
Diabetes	19	24.4	17.1	21.1	No Objective
Pneumonia and Influenza	14	18.0	17.7	15.6	No Objective
Liver Disease	13	16.7	14.9	12.4	8.2
Suicide	12	15.4	9.7	10.4	10.2

Source: California Department of Public Health, 2012. <http://www.cdph.ca.gov/programs/ohir/Pages/CHSP.aspx>

The cancer mortality rate for all cancer sites in Stanislaus County was 150.5, which is comparable to the California rate (150.2 per 100,000 persons). Mortality from digestive system and respiratory system cancers occurs at the highest rates in the county.

Cancer Mortality Rates, per 100,000 Persons, 2007-2011

Cancer Sites	Stanislaus County		California
	Number	Rate	Rate
Cancer, All Sites	3,856	150.5	150.2
Digestive System	1,162	45.3	39.1
Respiratory System	1,032	40.3	35.9
Breast	282	11.0	11.6
Leukemia	261	10.2	6.3
Female Genital	200	7.8	7.7
Male Genital	193	7.5	8.3
Urinary System	178	6.9	7.1
Lymphoma	134	5.2	6.1

Source: California Cancer Registry, Cancer Surveillance Section, California Department of Public Health, 2007-2011. <http://www.cancer-rates.info/ca/>

Chronic Disease

Health Status

Among adults and children, 24.3% reported being in fair or poor health. This rate is higher than the California rate of 17%.

Health Status, Fair or Poor Health

Health Status	Stanislaus County	California
Persons with Fair or Poor Health	24.3%	17.0%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Diabetes

Diabetes is a growing concern in the community; 17.1% of adults in Stanislaus County have been diagnosed with diabetes, which is higher than the state rate. For adults with diabetes, 40.2% are very confident they can control their diabetes.

Adult Diabetes

Diabetes	Stanislaus County	California
Diagnosed Pre/Borderline Diabetic	16.7%	10.5%
Diagnosed with Diabetes	17.1%	8.9%
Very Confident to Control Diabetes	40.2%	56.5%
Somewhat Confident	45.7%	34.7%
Not Confident	14.1%	8.8%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

The federal Agency for Healthcare Research and Quality (AHRQ) developed Prevention Quality Indicators (PQIs) to identify hospital admissions that may be avoided through access to high-quality outpatient care. Four PQIs are related to diabetes: long-term complications (renal, ophthalmic, or neurological manifestations, and peripheral circulatory disorders); short-term complications (ketoacidosis, hyperosmolarity and coma); amputation; and uncontrolled diabetes. With one exception (short-term complications), hospitalization rates were higher for Stanislaus County than for California, in particular for long-term complications whose rate (147.3) is nearly 40% higher than the state rate of 107.4.

Diabetes Hospitalization Rates* for Prevention Quality Indicators

Prevention Quality Indicators (PQI)	Stanislaus County	California
Diabetes Long Term Complications	147.3	107.4
Diabetes Short Term Complications	130.8	143.1
Lower-Extremity Amputation among Patients with Diabetes	21.9	16.1
Uncontrolled Diabetes	19.4	9.2

Source: California Office of Statewide Health Planning & Development, 2013.

* Age-adjusted annual rates per 100,000 hospitalizations.

http://www.oshpd.ca.gov/HID/Products/PatDischargeData/AHRQ/pqi_overview.html

Community Input - Diabetes

Stakeholder interviews identified the following issues, challenges and barriers related to diabetes:

- Diabetes is a big issue in the community, especially among the Hispanic population, which is disproportionately impacted by the disease.
- According to the Stanislaus County Public Health Department, the prevalence of diabetes is up within the County (and at a higher rate than the State), but the mortality rate has been decreasing. The County has a very high death rate due to coronary heart disease and is ranked second to last of the California Counties (#57 of 58) in coronary heart disease deaths.
- There is no diabetes educator in the community, which is a “huge need.” There was previously a Registered Nurse diabetes educator located at a community agency, but she was not replaced after she left.
- In general, there is a lack of education services to prevent diabetes in Riverbank and a lack of medical providers to address this health issue.
- Many diabetic drug users have chosen to take their drugs of choice rather than insulin and have died. Drug users in general are noncompliant with medical recommendations.
- In Riverbank, many people are coming into the Casa Del Rio Family Resource Center for information after they are diagnosed with diabetes as there are no other local resources or services to address diabetes. There is no prevention/education to prevent diabetes and this is greatly needed. There is also a lack of medical providers in the area, limiting health care access.

Heart Disease

For adults in Stanislaus County, 4.1% have been diagnosed with heart disease. Among these adults, 46% are very confident they can manage their condition, a lower level of confidence than the state average. 85.2% have a management care plan developed by a health care professional.

Adult Heart Disease

Heart Disease	Stanislaus County	California
Diagnosed with Heart Disease	4.1%	6.1%
Very Confident to Control Condition	46.0%	53.6%
Somewhat Confident to Control Condition	39.7%	34.9%
Not Confident to Control Condition	14.3%	11.5%
Has a Management Care Plan	85.2%	67.1%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

As noted, Prevention Quality Indicators (PQIs) identify hospital admissions that may be avoided through access to high-quality outpatient care. The three PQIs related to heart disease are hypertension, heart failure, and angina without procedure. In 2013, rates of hypertension and Congestive Heart Failure were higher in Stanislaus County than in the state.

Heart Disease Hospitalization Rates* for Prevention Quality Indicators

Prevention Quality Indicators (PQI)	Stanislaus County	California
Hypertension	37.7	33.3
Congestive Heart Failure	365.1	292.0
Angina without Procedure	13.9	16.9

Source: California Office of Statewide Health Planning & Development, 2013.

* Age-adjusted annual rates per 100,000 hospitalizations.

http://www.oshpd.ca.gov/HID/Products/PatDischargeData/AHRQ/pqi_overview.html

High Blood Pressure

A co-morbidity factor for diabetes and heart disease is hypertension (high blood pressure). In Stanislaus County, 17.6% of adults have been diagnosed with high blood pressure, and of those, 86.9% take medication to control their hypertension. The Healthy People 2020 objective is to reduce the proportion of adults with high blood pressure to 26.9%.

High Blood Pressure

High Blood Pressure	Stanislaus County	California
Ever Diagnosed with Hypertension	17.6%	27.2%
Takes Medicine for Hypertension	86.9%	69.9%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Community Input – Heart Disease

Stakeholder interviews identified the following issues, challenges and barriers related to heart disease:

- An issue is the lack of cardiac care in the area, with the nearest cardiology services available in Modesto, 30 minutes away. One interviewee said, “it’s a known fact that if there’s a cardiac issue the patient goes to Modesto for care.”
- One of the biggest risk factors identified for chronic disease in the area is overweight and obesity.
- Heart disease and obesity are the biggest problems in the community.
- The Stanislaus County Public Health Department has conducted some analyses by geographic area that they could make available for use. Some issues that were identified through these analyses included heart disease and emergency department visits for heart disease.

Cancer

In Stanislaus County, the five-year, age-adjusted cancer incidence rate is 440.9 per 100,000 persons, slightly higher than the state rate. Digestive system cancers (85.4), respiratory system cancers (66.4), and urinary system cancers (36.7) occur at notably higher rates than the state rates for these types of cancer.

Cancer Incidence, per 100,000 Persons, Age Adjusted, 2007-2011

Cancer Sites	Stanislaus County	California
All Sites	440.9	432.0
Male Genital	130.8	143.1
Digestive System	85.4	82.5
Respiratory System	66.4	52.8
Breast	61.8	65.5
Female Genital	44.8	47.2
Urinary System	36.7	33.7
Skin	22.7	23.0
Lymphoma	22.4	21.4
Leukemia	11.2	12.4
Endocrine System/Thyroid	11.0	12.2
Oral Cavity and Pharynx	10.9	10.4
Brain and Nervous System	7.3	6.1

Source: California Cancer Registry, Cancer Surveillance Section, Cancer Surveillance and Research Branch, California Department of Public Health, 2007-2011. <http://www.cancer-rates.info/ca/>

Community Input - Cancer

Stakeholder interviews identified the following issues, challenges and barriers related to cancer:

- Cancer is the number two cause of death in Stanislaus County and the nation.
- Cancer is a big concern and is prevalent everywhere. The hospital supports the American Cancer Society’s annual Relay for Life. But more support groups and

education are needed within the community. Currently these resources are only available outside the community.

Asthma

The population diagnosed with asthma in Stanislaus County is 12%. 34.5% of county asthmatics take medication to control their symptoms. Among county youth, 20.2% have been diagnosed with asthma, and 47.3% of youth take medication to control their asthma.

Asthma

Asthma	Stanislaus County	California
Diagnosed with Asthma, Total Population	12.0%	14.0%
Diagnosed with Asthma, 0-17 Years Old	20.2%	14.5%
ER Visit in Past Year Due to Asthma, Total Population	5.9%	9.6%
ER Visit in Past Year Due to Asthma, 0-17 Years Old	None	13.9%
Takes Daily Medication to Control Asthma, Total Population	34.5%	44.2%
Takes Daily Medication to Control Asthma, 0-17 Years Old	47.3%	39.0%
Had Asthma Symptoms in the Past 12 Months	80.9%	88.2%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Two Prevention Quality Indicators (PQIs) are related to asthma including chronic obstructive pulmonary disease (COPD) or Asthma in Older Adults, and Asthma in Younger Adults. In 2013, hospitalization rates for COPD and asthma were higher in Stanislaus County than the state.

Asthma Hospitalization Rates* for Prevention Quality Indicators (PQI)

Prevention Quality Indicators (PQI)	Stanislaus County	California
COPD or Asthma in Older Adults	543.0	329.9
Asthma in Younger Adults	29.2	26.4

Source: California Office of Statewide Health Planning & Development, 2013.

* Age-adjusted annual rates per 100,000 hospitalizations.

http://www.oshpd.ca.gov/HID/Products/PatDischargeData/AHRQ/pqi_overview.html

Community Input – Respiratory Disease

Stakeholder interviews identified the following issues, challenges and barriers related to respiratory disease:

- Air pollution is a big problem in the Central Valley region and has had a negative impact on respiratory diseases, including asthma.
- People with respiratory problems sometimes need sleep studies but if this is not covered under their insurance it is not addressed. There has also been an issue of people not meeting the eligibility for oxygen and so not getting it despite needing it.
- Asthma is a big problem due to the pollens and organic pollutions from the farms in the area. It is not possible to prevent the asthma coming from these sources but is

important to educate families about asthma and to clean the air as much as possible.

Disability

Among adults in Stanislaus County, 32.7% had been identified as having a physical, mental or emotional disability. This rate is higher than the state rate of disability (28.5%). 4.3% of adults could not work for at least a year due to physical or mental impairment.

Population with a Disability

Disability	Stanislaus County	California
Adults with a Disability	32.7%	28.5%
Couldn't Work Due to Impairment	4.3%	5.2%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Health Behaviors

Health Behaviors Ranking

County Health Rankings examine healthy behaviors and ranks counties according to health behavior data. California's 57 evaluated counties (Alpine County was excluded) are ranked from 1 (healthiest) to 57 (least healthy) based on a number of indicators that include: adult smoking, obesity, physical inactivity, excessive drinking, sexually transmitted infections, and others. A ranking of 48 puts Stanislaus County in the bottom 20% of California counties for health behaviors. Neighboring San Joaquin County ranked 53.

Health Behaviors

Geographic Area	County Ranking (out of 57)
San Joaquin County	53
Stanislaus County	48

Source: County Health Rankings, 2015. www.countyhealthrankings.org

Overweight and Obesity

In Stanislaus County, 36.5% of the adult population reported being overweight and 14.8% of children in the county are overweight. County rates of overweight exceed state rates.

Overweight

Age Groups	Stanislaus County	California
Adult (ages 20+ years)	36.5%	35.5%
Teen (ages 12-17 years)	No Data	16.3%
Child	14.8%	13.6%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

The Healthy People 2020 objectives for obesity are 30.5% of adults and 16.1% of teens. Residents of Stanislaus County are above these targets. Among Stanislaus County adults 34.8% are obese and 27.6% of teens are obese.

Obese

Age Groups	Stanislaus County	California
Adult (ages 20+ years)	34.8%	27.0%
Teen (ages 12-17 years)	27.6%	14.6%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

When adult obesity levels are tracked over time, the county has experienced a variable trend. Data show a recent decline in obesity rates after several years of increases. In contrast, California has seen a small but measurable increase in rates of obesity.

Adult Obesity, 2005-2012

Geographic Area	2005	2007	2009	2011-12	Change 2005-2012
Stanislaus County	31.0%	32.2%	35.7%	30.7%	-0.3
California	21.6%	23.2%	23.0%	25.4%	+3.8

Source: California Health Interview Survey, 2005, 2007, 2009, 2011-2012

Levels of overweight and obesity are considerably higher in Stanislaus County (70.6%) than in the state (62.5%). Adult overweight and obesity by race and ethnicity indicate high rates among Whites (74.1%) and Latinos (70.6%). Asians in Stanislaus County have the lowest rates of overweight and obesity (30%).

Adult, Ages 20+, Overweight and Obesity by Race/Ethnicity

Race/Ethnicity	Stanislaus County	California
Latino	70.6%	73.2%
African American	No Data	71.2%
White	74.1%	58.9%
Asian	30.0%	43.7%
Total Adult Population	70.6%	62.5%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

The physical fitness test (PFT) for students in California schools is the FitnessGram®. One of the components of the PFT is measurement of body composition (measured by skinfold measurement, BMI, or bioelectric impedance). Children who do not meet the “Healthy Fitness Zone” criteria for body composition are categorized as needing improvement or at high risk (overweight/obese). In area school districts, over half (50.2%) of Riverbank Unified 5th grade students tested as needing improvement or at high risk for body composition. Among 9th graders the rates were improved. Rates for all school districts in both grades were above state averages.

5th and 9th Graders, Body Composition, Needs Improvement + High Risk

School District	Fifth Grade	Ninth Grade
Escalon Unified	41.5%	39.6%
Oakdale Joint Unified	41.9%	37.1%
Riverbank Unified	50.2%	47.5%
Waterford Unified	44.0%	36.7%
Stanislaus County	44.1%	41.0%
California	40.5%	35.8%

Source: California Department of Education, Fitnessgram Physical Fitness Testing Results, 2013-2014.

<http://data1.cde.ca.gov/dataquest/>

Fast Food

In Stanislaus County, 17.2% of children and 34.2% of adults consume fast food 3 to 4 times a week. These are higher than state rates of fast food consumption.

Fast Food Consumption

Fast Food Consumption	Stanislaus County	California
Children Who Were Reported to Eat Fast Food 3-4 Times a Week	17.2%	14.6%
Adults Who Reported Eating Fast Food 3-4 Times a Week.	34.2%	22.2%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Soda Consumption

15.7% of children in Stanislaus County consume at least two sodas or sweetened drinks a day. County adults are more likely to consumer higher rates of sweetened drinks and are less likely to abstain (51.8%) compared to state averages.

Soda or Sweetened Drink Consumption

Soda or Sweetened Drink Consumption	Stanislaus County	California
Children Reported to Drink at Least 2 Sodas or Sweetened Drinks a Day*	15.7%	14.2%
Adults Who Reported Drinking at Least 7 Sodas or Sweetened Drinks Weekly^	15.3%	10.1%
Adults Who Reported Drinking No Soda or Sweetened Drinks Weekly^	51.8%	61.4%

Source: California Health Interview Survey, *2012, ^2014. <http://ask.chis.ucla.edu>

Fresh Fruits and Vegetables

61% of children and teens in Stanislaus County consume two or more servings of fruit in a day. Adults (92.9%) report that they could usually or always find fresh fruits and vegetables in the neighborhood. And 63.5% of adults reported the fruits and vegetables were always or usually affordable.

Access to and Consumption of Fresh Fruits and Vegetables

Fruit and Vegetable Access and Consumption	Stanislaus County	California
Children and Teens Who Reported Eating 2 or More Servings of Fruit in the Previous Day	61.0%	63.3%
Adults Who Reported Finding Fresh Fruits and Vegetables in the Neighborhood Always or Usually	92.9%	86.7%
Adults Who Reported Fresh Fruits and Vegetables Were Always or Usually Affordable in the Neighborhood	63.5%	78.1%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Physical Activity

For school-aged children in Stanislaus County, 33.9% engaged in physical activity at least 1 hour a day, 7 days a week. Children were less likely to visit a park, playground or open space in the last month, at 67.5%, compared to the state rate of 79.4%.

Physical Activity, Children Ages 6-17

Physical Activity	Stanislaus County	California
Activity Available One Hour or More Per Day, 7 Days Per Week	33.9%	32.6%
Visited a Park, Playground or Open Space in the Last Month	67.5%	79.4%

Source: California Health Interview Survey, 2011-2012. <http://ask.chis.ucla.edu>

Among adults in Stanislaus County, 14.8% participate in non-walking vigorous physical activity at least 20 minutes per day and three days per week. 72.6% of adults walked for transportation, fun, or exercise. In a survey administered in 2013 for the *Stanislaus County Community Health Assessment*, 29.2% of county adults reported spending less than 16 minutes a day participating in moderate exercise, lower than the minimum 150 minutes per week recommended by the Centers for Disease Control and Prevention.

Physical Activity, Adults

Physical Activity	Stanislaus County	California
Vigorous Physical Activity at Least 20 Minutes/Day and 3 Days/Week (Excludes Walking)	14.8%	16.5%
Walked for Transportation, Fun, Exercise	72.6%	77.2%

Source: California Health Interview Survey, 2009. <http://ask.chis.ucla.edu>

One of the components of the physical fitness test (PFT) for students in schools is measurement of aerobic capacity through run and walk tests. Less than half of 5th grade students in Waterford Unified School District (43.2%) meet the Healthy Fitness Zone standards for aerobic capacity. Waterford Unified shows the highest rate of aerobic capacity among 9th graders (64.1%). Oakdale Joint Unified and Riverbank Unified show a relative decline in rates of aerobic capacity from 5th to 9th graders.

5th and 9th Grade Students, Aerobic Capacity, Healthy Fitness Zone

School District	Fifth Grade	Ninth Grade
Escalon Unified	60.5%	63.0%
Oakdale Joint Unified	68.3%	55.1%
Riverbank Unified	58.1%	47.5%
Waterford Unified	43.2%	64.1%
Stanislaus County	58.0%	54.3%
California	63.4%	63.9%

Source: California Department of Education, Fitnessgram Physical Fitness Testing Results, 2013-2014.

<http://data1.cde.ca.gov/dataquest/>

Community Input – Overweight and Obesity

Stakeholder interviews identified the following issues, challenges and barriers related to overweight and obesity:

- According to the Stanislaus County Public Health Department, two-thirds of the population is overweight or obese, which is greater than the state average.
- There are a large number of Hispanic children in the schools who are overweight or obese, a huge risk factor for diabetes. Pre-diabetes is being seen in the blood work of some 10-year olds.
- The food environment impacts overweight and obesity. There are many fast food options and few healthy food choices, though this has improved.
- There is a lack of awareness of nutrition and how to make healthy food decisions relative to sugar, fats, salt, and portion sizes.
- Some cultural foods are consumed without awareness of calorie content.
- Role modeling is important for children. If they see their parents eat unhealthy foods and become overweight or obese, it is likely that they will follow the same path despite receiving education or nutrition counseling at school.
- Food provided for breakfast and lunch in schools may be unhealthy and should be reviewed by a dietician.

HIV/AIDS

The 2015 County Health Rankings reports an HIV prevalence rate, or the number of persons living with a diagnosis of human immunodeficiency virus (HIV) infection per 100,000 persons. The Stanislaus County rate was 132, lower than the California rate of 363. There were 541 documented cases in the county at the time of the report.

Sexually Transmitted Diseases

Rates of Chlamydia in Stanislaus County are 342.1 per 100,000 persons, below the California rate of 439.5. Rates of Gonorrhea are 104.9 per 100,000 persons, which is higher than the state rate of 100.4. Primary and Secondary Syphilis (10.8) compares to the state average while Early Latent Syphilis is a rate of 3.4 per 100,000 persons.

STD Cases, Rate per 100,000 Persons, 2013

STDs	Stanislaus County		California
	Cases	Rate	Rate
Chlamydia	1,804	342.1	439.5
Gonorrhea	553	104.9	100.4
Primary & Secondary Syphilis	57	10.8	9.3
Early Latent Syphilis	18	3.4	7.6

Source: California Department of Public Health, 2013. <http://www.cdph.ca.gov/data/statistics/>

Cigarette Smoking

In Stanislaus County, 11.1% of adults smoke cigarettes, which is slightly lower than the state rate of 11.6% and the Healthy People 2020 objective of 12%.

Cigarette Smoking, Adults

Smoking	Stanislaus County	California
Current Smoker	11.1%	11.6%
Former Smoker	31.3%	22.4%
Never Smoked	57.6%	66.0%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>.

Among teens in Stanislaus County, 28.9% have smoked an electronic (vaporizer) cigarette, which is higher than the 10.3% state rate of e-cigarette use.

Smoking, Teens

Smoking	Stanislaus County	California
Current cigarette smoker	None	3.1%
Ever smoked an e-cigarette	28.9%	10.3%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Community Input – Tobacco Use

Stakeholder interviews identified the following issues, challenges and barriers related to tobacco use:

- Funding for tobacco-use prevention has diminished. While policies to reduce tobacco use that were set in place are still in effect, there is less funding available for ongoing prevention education.
- Hookah bars have gained a lot of popularity. They have a “social appeal” and have become a fad location for social gatherings. There are a number of Hookah bars in Oakdale (including one on the main road a half-mile from the hospital) and they are used by teens once they turn 18.
- Electronic cigarettes (e-cigarettes) are also very popular and are used on high school campuses because they do not emit a smell.
- The motto of Oakdale is “Cowboy Capital of the World,” and tobacco use has long been associated with being a cowboy.
- While tobacco use overall in the community is down due to policies that restrict smoking in many locations (e.g., bars, hospital), the “people who are still smoking are not interested in quitting.”
- Quitting smoking is difficult. One agency said that it used to provide smoking cessation classes but stopped because people were not completing the classes, or they would quit for a short time and then start to smoke again. Doctors also try to help but it’s “not an easy task.”

Alcohol and Drug Use

Binge drinking is defined as consuming a certain amount of alcohol within a set period of time. For males this is five or more drinks per occasion and for females it is four or more drinks per occasion. Among adults, 47.5% had engaged in binge drinking in the past year. These rates are higher than California rates of binge drinking (34%).

Alcohol Consumption Binge Drinking, Adult

Binge Drinking	Stanislaus County	California
Reported Binge Drinking in the Past Year	47.5%	34.0%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Among Stanislaus County teens, 43.5% had reported having an alcoholic drink but none had engaged in binge drinking in the past month.

Alcohol Consumption and Binge Drinking, Teens

Alcohol Consumption	Stanislaus County	California
Ever Had an Alcoholic Drink	43.5%	22.5%
Reported Binge Drinking in the Past Month	None	3.6%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Mental Health

In Stanislaus County, 13.3% of adults experienced serious psychological distress in the past year, 16.7% of adults reported being diagnosed with anxiety and 18.3% with depression. 26.5% of adults in Stanislaus County reported needing help for emotional/mental health problems or use of alcohol or drugs in the past 12 months, a higher rate than the state (15.9%). Of those reporting this need, 6.7% indicated not receiving treatment. The Healthy People 2020 objective is for 64.6% of adults with a mental disorder to receive treatment (35.4% who do not receive treatment).

In the 2013 *Community Health Assessment* (CHA) community survey conducted on behalf of the county, the main reasons reported for not receiving treatment for mental/emotional health include no health insurance (87%), could not afford (76%), insurance would not cover (53%), did not know where to go (42%), and was uncomfortable asking for help (39%).

Nearly 15% of county adults reported taking prescription medicine for emotional/mental health in the past year.

Mental Health Indicators, Adults

Mental Health Indicators	Stanislaus County	California
Adults Who Has Likely Had Serious Psychological Distress During Past Year	13.3%	7.7%
Adults Diagnosed With Anxiety*	16.7%	No Data
Adults Diagnosed With Depression*	18.3%	No Data
Adults Who Needed Help For Emotional-Mental and/or Alcohol-Drug Issues in Past Year	26.5%	15.9%
Adults Who Saw a Health Care Provider For Emotional/Mental Health and/or Alcohol-Drug Issues in Past Year	25.8%	12.0%
Adults Who Sought/Needed Help But Did Not Receive Treatment	6.7%	56.6%
Adults Who Took Prescription Medicine For Emotional/Mental Health Issue in Past Year	14.8%	10.1%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

*Community Health Assessment, 2013.

<http://www.stancounty.com/BHRS/pdf/CommunityHealthAssessment/FullCommunityHealthAssessment2013.pdf>

In Stanislaus County, 5.3% of teens needed help for an emotional or mental health problem and 5.3% received counseling.

Mental Health Indicators, Teens

Mental Health Indicators	Stanislaus County	California
Teens Who Needed Help for Emotional/Mental Health Problems in Past Year	5.3%	23.2%
Teens Who Received Psychological/Emotional Counseling in Past Year	5.3%	11.6%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

In Stanislaus County, 2.9% of adults had seriously considered suicide. This is less than the state rate (7.8%).

Thought about Committing Suicide

Thought about Suicide	Stanislaus County	California
Adults Who Ever Seriously Thought About Committing Suicide	2.9%	7.8%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

The Oakdale-Riverbank area, as is all of Stanislaus County, is designated a Health Professional Shortage Area for Mental Health (HPSA-MH) by the California Healthcare Workforce Policy Commission. The criteria for the HPSA designation are based on the availability of psychiatrists and mental health professionals (Source: OSHPD <http://gis.oshpd.ca.gov/atlas/topics/shortage/hpsamh/211>).

Community Input – Behavioral Health and Mental Health

Stakeholder interviews identified the following issues, challenges and barriers related to behavioral health and mental health:

- The community where people live plays a role in affecting mental health status; i.e., lower-income neighborhoods with problems related to finances or housing can contribute to depression and anxiety.
- Although Oakdale is a small community, it has the same problems as seen in larger cities. Methamphetamine use is a big problem in the area, along with heroin use.
- Marijuana use is a big problem among high school students, more so than alcohol (which is also a problem), tobacco or other drugs. Marijuana is easily obtained and sold and “students find creative ways to use it.”
- Inadequate behavioral health services to meet the community’s needs, including:
 - No services in the evenings or weekends, and no inpatient psychiatric or substance abuse services.
 - There are wait lists for services and it is “difficult to keep up with the need.”
 - There are not enough psychologists or psychiatrists in the area. There is only one pediatric psychiatrist in Modesto resulting in long wait times for that service, and also requires transportation to get there. Psychiatric evaluations are needed for children with ADHD in order for them to be prescribed the correct medications and to manage those medications over time.
 - Lack of services in Riverbank community, a small community that is very low-income.
 - The psychiatric hospital in Modesto is owned by a different hospital and so patients from Oak Valley Hospital are not always a priority.
 - It is sometimes difficult to find a psychiatric hospital that will take patients from Oak Valley Hospital (e.g., in Stockton), so these patients remain at Oak Valley waiting for a psychiatric evaluation. In some cases, the 72-hour 5150 hold expires while the patient is still at Oak Valley waiting for an evaluation.
- Private insurance or funds to pay out of pocket is needed for the few services that do exist. Medi-Cal does not cover many of these services. One entity in Modesto offers services through a sliding fee scale, but even those costs are too high for many people.
- Referrals are made for behavioral health services but there is no information returned to the referring organization as to whether the patient made it to the appointment, and if so, regarding the outcome of the visit.
- Cultural barriers exist to accessing behavioral health services, especially among the Spanish-speaking population.
- In general, there is a lack of related prevention programs.

Immunization of Children

Most area school districts have high rates of compliance with childhood immunizations upon entry into kindergarten, with most districts above the state average. Waterford Unified (72.8%) shows a low rate of compliance.

Up-to-Date Immunization Rates of Children Entering Kindergarten, 2014-2015

School District	Immunization Rate
Escalon Unified	91.3%
Oakdale Joint Unified	96.9%
Riverbank Unified	91.7%
Waterford Unified	72.8%
District Average	87.9%
Stanislaus County	93.4%
California	90.4%

Source: California Department of Public Health, Immunization Branch, 2014-2015. <https://cdph.data.ca.gov/Healthcare/School-Immunizations-In-Kindergarten-2014-2015/4y8p-xn54>

Flu Vaccine

Among seniors, 71% of county residents have received a flu shot. 35.8% of adults and 59.6% of children in Stanislaus County received flu shots. Only seniors exceed the Healthy People 2020 objectives of 70% of the population to receive the flu vaccine.

Flu Vaccine, past 12 months

Flu Vaccines	Stanislaus County	California
Vaccinated For Flu in Past 12 Months	46.8%	45.8%
Vaccinated For Flu in Past 12 Months, 0-17	59.6%	53.7%
Vaccinated For Flu in Past 12 Months, 18-64	35.8%	37.4%
Vaccinated For Flu in Past 12 Months, 65+	71.0%	72.8%

Source: California Health Interview Survey, 2014. <http://ask.chis.ucla.edu>

Mammograms and Pap Smears

The Healthy People 2020 objective for mammograms is 81% of women 50 to 74 years have a mammogram within the past two years. In Stanislaus County, women have exceeded that objective with 91.1% obtaining mammograms. In a survey conducted for the 2013 Community Health Assessment (CHA), 86.8% of county women aged 21 and older reported having had a pap smear (no comparable California data available).

Women Mammograms & Pap Smears

Mammograms and Pap Smears	Stanislaus County	California
Women Ages 50-74 Who Reported Having a Mammogram in the Past 2 Years	91.1%	84.8%
Women 21+ Who Reported Having Had a Pap Smear	86.8%	N/A

Source: California Health Interview Survey, 2011-2012, <http://ask.chis.ucla.edu>
Community Health Assessment, 2013.

<http://www.stancounty.com/BHRS/pdf/CommunityHealthAssessment/FullCommunityHealthAssessment2013.pdf>

Colorectal Cancer Screening

In Stanislaus County, the rate of compliance for colorectal cancer screening is 79.9%, which exceeds the Healthy People 2020 objective for colorectal cancer screening of 70.5%. Of adults advised to obtain screening, 68% of county residents were compliant at the time of the recommendation. In a more recent survey (2013 CHA), 73.4% of county adults aged 50 or older reported having received colorectal cancer screening.

Colorectal Cancer Screening, Adults 50+

Colorectal Screening	Stanislaus County	California
Screening Sigmoidoscopy, Colonoscopy or Fecal Occult Blood Test*	79.9%	78.0%
Compliant with Screening at Time of Recommendation*	68.0%	68.1%
Compliant with Screening^	73.4%	N/A

Source: *California Health Interview Survey, 2009. <http://ask.chis.ucla.edu>

^Community Health Assessment, 2013.

<http://www.stancounty.com/BHRS/pdf/CommunityHealthAssessment/FullCommunityHealthAssessment2013.pdf>

Attachment 1. Benchmark Comparisons

Where data were available, health and social indicators in the service area were compared to Healthy People 2020 objectives. The **bolded items** are indicators that do not meet established objectives; non-bolded items meet or exceed benchmarks.

Service Area OVHD or Stanislaus County	Healthy People 2020 Objectives
High School graduation rate 80.5% - 94.9%	High School graduation rate 82.4%
Child health insurance rate 95.8%	Child health insurance rate 100%
Adult health insurance rate 77.6%	Adult health insurance rate 100%
Adults with an ongoing source of care 78.6%	Adults with an ongoing source of care 89.4%
Persons unable to obtain medical care 11.3%	Persons unable to obtain medical care 4.2%
Adults delay obtaining prescription medications 11.6%	Adults delay obtaining prescription medications 2.8%
Adults needing mental health care who received treatment 93.3%	Adults needing mental health care who received treatment 64.6%
Heart disease deaths 186.3 per 100,000	Heart disease deaths 103.4 per 100,000
Cancer deaths 151.6 per 100,000	Cancer deaths 161.4 per 100,000
Stroke deaths 46.2 per 100,000	Stroke deaths 34.8 per 100,000
Suicides 15.4 per 100,000	Suicides 10.2 per 100,000
Liver disease deaths 16.7 per 100,000	Liver disease deaths 8.2 per 100,000
Early prenatal care 78.8% of women	Early prenatal care 77.9% of women
Low birth weight infants 5.0% of live births	Low birth weight infants 7.8% of live births
Infant death rate 5.8 per 1,000 live births	Infant death rate 6.0 per 1,000 live births
High blood pressure 17.6%	High blood pressure 26.9%
Youth obesity 27.6%	Youth Obesity 16.1%
Adult obese 34.8%	Adult obese 30.5%
Cigarette smoking by adults 11.1%	Cigarette smoking by adults 12%
Flu vaccine 46.8%	Flu vaccine 70%
Kindergarten vaccination coverage 87.9%	Kindergarten vaccination coverage 95.0%
Adults 50+ colorectal cancer screening 79.9%	Adults 50+ colorectal cancer screening 70.5%
Women ages 50-74 who have had a mammogram 91.1%	Women who have had a mammogram 81.1%

Attachment 2. Community Stakeholder Interviewees

Name	Title	Organization
Krystyna Belski, MD	Pediatrician	Oak Valley Community Health Center
Leepao Khang, Ph.D.	Communicable Disease Epidemiologist	Stanislaus County Public Health Department
Keenon Krick	Director, Health & Human Services	Riverbank School District
Marc Malone	Superintendent	Oakdale School District
Deborah McCutcheon, LCSW	Social Worker, Case Management Department	Oak Valley Hospital
Karen O'Bannon	Director	Family Support Network
Tamberly Stone	Program Coordinator	Center for Human Services - Oakdale