The purpose of this report is to provide a summary of health data specific to Schuyler County. Where possible, benchmarks have been given to compare county rates to Upstate New York.

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Where comparisons between regions are made throughout the report, the following color code will be used:

<table>
<thead>
<tr>
<th>SCHUYLER COUNTY</th>
<th>BENCHMARK</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

18,458 RESIDENTS LIVE IN SCHUYLER COUNTY.

17,660 are White Non-Hispanic.

- **White Non-Hispanic, 96%**
- **1%** Black Non-Hispanic
- **2%** Hispanic
- **2%** Other

**POPULATION BY AGE GROUP**

- **20%** 0-17
- **30%** 18-44
- **32%** 45-64
- **18%** 65+

- **77.9 years** is the average life expectancy at birth.
- **33.9%** of adults reported housing insecurity in the past 12 months.
- **4.6%** of the labor force is unemployed.
- **13.7%** of the population is living with a disability.

**Sources:**
- U.S. Census Bureau/American Community Survey 2010-2014 5-Year estimates
- Expanded Behavioral Risk Factor Surveillance System (ExpBRFSS) 2013-2014
- NYS Dept. of Labor June 2016
More than 2,800 residents – 15.4 percent of Schuyler County’s population – live below the federal poverty level according to U.S. Census statistics. As the map illustrates, the concentration of poverty is highest in Dundee, Bradford and Montour Falls. Research shows that lower socioeconomic status (SES) is linked to higher incidence of chronic disease, shorter life expectancy and lower rates of good social, emotional and physical health.¹

Education levels can also predict life expectancy. The Centers for Disease Control and Prevention reports that adults aged 25 without a high school diploma “can expect to die nine years sooner than college graduates.”² Approximately 50 percent of Schuyler County residents have at least some form of college experience, compared to 59 percent of New York state residents.

Adult smoking rates are higher in Schuyler County (22.3 percent) compared to Upstate New York (17.3 percent). Data reveal an estimate of more than 3,200 adults who currently smoke in Schuyler County.

Behavioral and personal lifestyles are important determinants of health. Smoking, poor nutrition and other unhealthy behaviors are linked to adverse health outcomes. Many of the indicators for behavioral lifestyles shown below for Schuyler County are similar to Upstate New York Rates. However, there is a lower percent of persons participating in leisure time physical activity and consumption of sugary beverages in Schuyler County.

### SES BY ZIP CODE - Schuyler County

<table>
<thead>
<tr>
<th>Category</th>
<th>SCHUYLER COUNTY</th>
<th>UPSTATE NEW YORK</th>
</tr>
</thead>
<tbody>
<tr>
<td>High SES</td>
<td>High school graduate or less, 50%</td>
<td>High school graduate or less, 42%</td>
</tr>
<tr>
<td>Medium SES</td>
<td>College experience, 32%</td>
<td>College experience, 25%</td>
</tr>
<tr>
<td>Low SES</td>
<td>Bachelors degree or higher, 18%</td>
<td>Bachelors degree or higher, 34%</td>
</tr>
</tbody>
</table>

### Behavioral and Personal Lifestyles

<table>
<thead>
<tr>
<th>Category</th>
<th>SCHUYLER COUNTY</th>
<th>UPSTATE NEW YORK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consumed fast food three or more times per week</td>
<td>5.5%</td>
<td>6.3%</td>
</tr>
<tr>
<td>Consumed one or more sugary drinks daily</td>
<td>18.9%</td>
<td>23.3%</td>
</tr>
<tr>
<td>Participated in leisure time physical activity in the past 30 days</td>
<td>67.6%</td>
<td>73.7%</td>
</tr>
</tbody>
</table>

SCHUYLER COUNTY

UPSTATE NEW YORK

Current cigarette smoker

<table>
<thead>
<tr>
<th>SCHUYLER COUNTY</th>
<th>UPSTATE NEW YORK</th>
</tr>
</thead>
<tbody>
<tr>
<td>22.3%</td>
<td>17.3%</td>
</tr>
</tbody>
</table>

All Sources: U.S. Census Bureau/American Community Survey 2010-2014 5-Year Estimates

All sources: Expanded Behavioral Risk Factor Surveillance System (ExpBRFSS), 2013-2014
Health Behaviors

Inactive lifestyles and poor diets may lead to obesity, a risk factor for developing diabetes, hypertension and other chronic illnesses. Estimated rates of obese or overweight adults, hypertension and diabetes in Schuyler County are similar to Upstate New York. However, there is a slightly higher prevalence of hypertension in Schuyler County (32.5 percent).

### SCHUYLER COUNTY vs. UPSTATE NEW YORK

<table>
<thead>
<tr>
<th>Health Measure</th>
<th>SCHUYLER COUNTY (%)</th>
<th>UPSTATE NEW YORK (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obese or overweight adults</td>
<td>59.2</td>
<td>62.2</td>
</tr>
<tr>
<td>Physician-diagnosed diabetes</td>
<td>10.6</td>
<td>9.2</td>
</tr>
<tr>
<td>Physician-diagnosed hypertension</td>
<td>32.5</td>
<td>30.2</td>
</tr>
</tbody>
</table>

For individuals with hypertension, controlling high blood pressure with medication and lifestyle change is critical to avoiding complications such as heart attack, stroke and kidney failure. The individuals who are most at risk for these life threatening events are those who have extremely high blood pressure, known as stage 2 hypertension. As of June 2016, the region’s high blood pressure registry showed that more than 71 percent of Schuyler County adults with hypertension had their condition under control. For residents whose blood pressure was uncontrolled, 15 percent had stage 2 hypertension.

### Uncontrolled Hypertension by Status - June 2016

- **35%** No read in past 12 months
- **50%** Stage 1: 140/90-159/99
- **15%** Stage 2: 160/100+

Social Determinants of Health

The physical environment plays an important role in residents’ ability to engage in physical activity and access nutritious food. Many residents in Schuyler County experience indicators of poor environmental health, including experiencing food insecurity.

Of note, Schuyler County has a slightly higher percent of its population reporting food insecurity in the past year (24.0 percent) compared to Upstate New York (22.7 percent).

### SCHUYLER COUNTY vs. UPSTATE NEW YORK

<table>
<thead>
<tr>
<th>Health Measure</th>
<th>SCHUYLER COUNTY (%)</th>
<th>UPSTATE NEW YORK (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider neighborhood suitable for walking and physical activity</td>
<td>94.7</td>
<td>92.3</td>
</tr>
<tr>
<td>Reported food insecurity in the past 12 months</td>
<td>24.0</td>
<td>22.7</td>
</tr>
</tbody>
</table>

Approximately one in six (16.9 percent) Schuyler County residents report experiencing 14 or more poor mental health days the past month. This is compared to 11.5 percent of Upstate New York residents.

In addition, over 1,800 Schuyler County residents reported 14 or more poor days of physical health (12.6 percent), similar to Upstate New York rates (12.3 percent).
Life Expectancy

Although average life expectancy in Schuyler County is 77.9 years, how long residents live on average varies by more than 3 years depending on their ZIP code.

For example, ZIP code area 14865, Montour Falls, has an estimated life expectancy of only 75.2 years at birth. By contrast, the county’s highest estimated life expectancy, 78.5 years, is found in Beaver Dams 14812 ZIP code area.

Disparity

A comparison of ZIP codes shows that rates for negative health indicators, including rates of Prevention Quality Indicators* and premature death are higher in Montour Falls then in Beaver Dams. In addition, there are significantly higher rates of teenage pregnancy in Montour Falls.

As some of the selected indicators reveal unexpected data for these two ZIP codes, there are likely other factors not captured here that are driving the disparity in life expectancies.

*Prevention Quality Indicators (PQI) were developed by the Agency for Healthcare Research and Quality and are based on ICD-9 coding and classifies conditions that are seen as potentially preventable/avoidable had sufficient care been given in the primary care setting prior to the presentation.
Leading Causes of Death

Leading causes of death in Schuyler County are similar to those of Upstate New York. However, rates of mortality from cancer are higher in Schuyler County than in Upstate New York. The graph below demonstrates the five leading causes of death.

LEADING CAUSES OF DEATH

Many of the leading causes of death shown in the figure above can be attributed to chronic diseases such as hypertension and obesity. However, the data below tell a slightly different story for premature death before age 75. Unintentional injury and suicide rank among the top five causes of premature death in Schuyler County.

LEADING CAUSES OF PREMATURE DEATH

Sources: Vital Statistics 2014. Premature mortality graph are 2012-2014 averages with deaths before age 75. Rankings exclude perinatal deaths. CLRD = Chronic Lower Respiratory Disease. All rates are age/sex adjusted.

Population Health Measures

In 2013, Common Ground Health convened the Regional Commission on Community Health Improvement. Over 18 months, the Commission engaged leaders from across the region to study and develop ideas for improving the integration of care and addressing the complex medical, behavioral and social needs of vulnerable community residents.

The Commission adopted a set of communitywide measures to gauge the region’s collective progress toward improved community health. Below are the population health measures selected by the Commission specific to Schuyler County.

REGIONAL TREND INDICATOR:
The icons indicate whether the Finger Lakes region is getting better, has remained flat or is getting worse for each measure.

REGIONAL TREND INDICATOR:
The icons indicate whether the Finger Lakes region is getting better, has remained flat or is getting worse for each measure.

<table>
<thead>
<tr>
<th>COMMUNITY MEASURES</th>
<th>SCHUYLER COUNTY</th>
<th>FINGER LAKES REGION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childhood Immunization</td>
<td>64.3%</td>
<td>64.5%</td>
</tr>
<tr>
<td>Percentage of children receiving recommended immunizations by 36 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Childhood Obesity</td>
<td>16.1%</td>
<td>16.1%</td>
</tr>
<tr>
<td>Percentage of school children whose weight is at the 95th percentile or greater</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adult Obesity</td>
<td>24.1%</td>
<td>27.0%</td>
</tr>
<tr>
<td>Percentage of adults 18 years or older with a BMI of 30 or greater</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adult Smoking</td>
<td>22.3%</td>
<td>17.4%</td>
</tr>
<tr>
<td>Percentage of adults who are current smokers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>High Blood Pressure Control</td>
<td>71.0%</td>
<td>68.0%</td>
</tr>
<tr>
<td>Percentage of adults with high blood pressure who had their condition under control</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type II Diabetes Control</td>
<td>Under Development</td>
<td>Under Development</td>
</tr>
<tr>
<td>Under development</td>
<td></td>
<td></td>
</tr>
<tr>
<td>High School Graduation</td>
<td>88.0%</td>
<td>81.2%</td>
</tr>
<tr>
<td>Percentage of students graduating in four years</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Sources listed on page 12.
## Population Health Measures

### Clinical Measures

<table>
<thead>
<tr>
<th>SCHUYLER COUNTY</th>
<th>FINGER LAKES REGION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventable Hospital Stays (rate per 100,000 population)</td>
<td>1,443</td>
</tr>
<tr>
<td>Depression Screening</td>
<td>Under development</td>
</tr>
<tr>
<td>ED Visits with Behavioral Health Diagnosis Percentage of all ED patients with a behavioral health diagnosis</td>
<td>5.4%</td>
</tr>
<tr>
<td>ED Visits Among those 65+ (rate per 1,000 population)</td>
<td>539</td>
</tr>
<tr>
<td>30 Day Readmissions with Behavioral Health Diagnoses 30-day behavioral health-related hospital readmission rates</td>
<td>12.3%</td>
</tr>
<tr>
<td>Nursing Home Use Number of nursing home days per 1,000 individuals 85+</td>
<td>108,163</td>
</tr>
</tbody>
</table>

### Health Outcomes

<table>
<thead>
<tr>
<th>SCHUYLER COUNTY</th>
<th>FINGER LAKES REGION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premature Death (rate per 100,000 population) Years of potential life lost before age 65</td>
<td>2,416</td>
</tr>
<tr>
<td>Low Birthweight Percentage of births with birthweight less than 2500 g/ 5.5 lbs</td>
<td>9.2%</td>
</tr>
<tr>
<td>Good Health Self-Report Percentage of adults reporting excellent, very good or good general health status</td>
<td>85.0%</td>
</tr>
</tbody>
</table>

### End Notes

#### References


#### Sources for Population Health Measures

**Community Measures**

- Childhood Immunization – New York State Immunization Information System, 2013
- Childhood Obesity – Student Weight Status Category Reporting System, 2012-2014
- Adult Obesity – Expanded Behavioral Risk Factor Surveillance System (ExpBRFSS) 2013-2014
- Adult Smoking – ExpBRFSS 2013-2014
- High Blood Pressure Control – Common Ground Health Hypertension Registry, June 2016
- Type II Diabetes Control – Under Development

**Clinical Measures**

- Preventable Hospital Stays – NY Statewide Planning and Research Cooperative System (SPARCS), 2014-2015
- Depression Screening – Under Development
- ED Visits with a Behavioral Health Diagnosis – SPARCS, 2014
- ED Visits among those 65+ – SPARCS, 2014
- 30 Day Readmissions with Behavioral Health Diagnoses – SPARCS, 2014
- Nursing Home Use among 85+ – Centers for Medicare and Medicaid Skilled Nursing Facility Cost Reports, 2013

**Health Outcomes**

- Low Birthweight – NYS Perinatal Data Profile, 2015

#### Data Sources

**U.S. Census Bureau/American Community Survey:** Although the American Community Survey (ACS) produces population, demographic and housing unit estimates, it is the Census Bureau’s Population Estimates Program that produces and disseminates the official estimates of the population for the nation, states, counties, cities and towns and estimates of housing units for states and counties. Data are based on a sample and are subject to sampling variability. The value shown here is the 90 percent margin of error. Estimates of urban and rural population, housing units, and characteristics reflect boundaries of urban areas defined based on Census 2010 data. As a result, data for urban and rural areas from the ACS do not necessarily reflect the results of ongoing urbanization.
New York State Department of Health: The cause of death reported in this publication is based on the International Classification of Diseases (ICD, 10th revision) adopted by New York state in 1999. Historically, several revisions of the ICD have been used, therefore, it is necessary to employ a comparability ratio when comparing cause of death statistics across revisions. Comparability ratios have been published by the National Center for Health Statistics (NCHS).

New York State Department of Health Vital Statistics: The cause of death reported in this publication is the underlying cause classified according to the tenth revision of the International Classification of Diseases (ICD, 10th revision) adopted by New York state in 1999. Historically, several revisions of the ICD have been used, therefore, it is necessary to employ a comparability ratio when comparing cause of death statistics across revisions. Comparability ratios have been published by the National Center for Health Statistics (NCHS).

Expanded Behavioral Risk Factor Surveillance System/Sub-County Health Data Report: Data was collected for ExpBRFSS over the course of 12 monthly waves, starting April 15, 2013 and ending May 10, 2014. The goal of each wave was to obtain roughly 8.3 percent of the required completes in each county for the landline survey and each region for the cell phone survey. Experienced interviewers conducted telephone interviews using computer-assisted telephone interviewing (CATI) software.

Common Ground Health High Blood Pressure Registry: The Common Ground Health hypertension registry collects data from medical practices and systems on hypertensive patients. Data provided are reflective of the patients involved in the registry. The Healthcare Effectiveness Data and Information Set (HEDIS) is the tool used to measure hypertension control. Controlled hypertension are those who have a reading in the past year <140/90; Stage 1 are those with a reading between 141/90—159/99; Stage 2 are those with a reading >160/100. Those who have not had a reading in the past 12 months are considered uncontrolled.

Student Weight Status Category Reporting System (SWSCR): The SWSCR collects data on weight status category, including underweight, healthy weight, overweight or obese based on BMI-for-age percentile on children and adolescents attending public schools in New York state.

NYS Department of Education: Data are submitted to the New York State Department of Education (NYSED) by school districts, charter schools, Boards of Cooperative Educational Services (BOCES), institutions of Higher Education and NYSED program offices.

Centers for Medicare and Medicaid Skilled Nursing Facility Cost Reports: Data are collected from nursing home days from 2013 residential health care facility cost reports. Population estimates are collected from the U.S. Census Bureau, June 2015.

Common Ground Health: Data were collected for Common Ground Health, a hypertension registry. The registry collects data from medical practices and systems on hypertensive patients. The Healthcare Effectiveness Data and Information Set (HEDIS) is the tool used to measure hypertension control. Controlled hypertension are those who have a reading in the past year <140/90; Stage 1 are those with a reading between 141/90—159/99; Stage 2 are those with a reading >160/100. Those who have not had a reading in the past 12 months are considered uncontrolled.

Statewide Planning and Research Cooperative System: SPARCS is a comprehensive all payer data reporting system established in 1979 as a result of cooperation between the healthcare industry and government. The system was initially created to collect information on discharges from hospitals. SPARCS currently collects patient level detail on patient characteristics, diagnoses and treatments, services, and charges for each hospital inpatient stay and outpatient (ambulatory surgery, emergency department and outpatient services) visit; and each ambulatory surgery and outpatient services visit to a hospital extension clinic and diagnostic and treatment center licensed to provide ambulatory surgery services. All calculations were performed by Common Ground Health and are age/sex adjusted rates.

New York State Immunization Information System (NYSIIS): NYSIIS is a statewide immunization information system or registry which maintains immunization data of persons of all ages. The recommended vaccinations by 36 months of age include the 4:3:1:3:1:4 immunization series: 4DTaP, 3 polio, 1 MMR, 3 hep B, 3 Hib, 1 varicella, and 4 PCV13.

For reports on the remaining 8 counties in the Finger Lakes Region, and additional data reports for Schuyler County, visit: www.commongroundhealth.org/countyprofiles

For questions regarding this report, contact Catie Kunecki at: Catie.Kunecki@commongroundhealth.org or (585) 224-3157
ABOUT COMMON GROUND HEALTH

Founded in 1974, Common Ground Health is one of the nation’s oldest and most effective regional health planning organizations. Located in Rochester, N.Y., the nonprofit serves the nine-county Finger Lakes region. We bring together health care, education, business, government and other sectors to find common ground on health issues. Learn more about our community tables, our data resources and our work improving population health at www.CommonGroundHealth.org.