ST. JOHNS COUNTY

2005 Health Needs Assessment

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INTRODUCTION

The St. Johns County Health Department spearheaded an initiative to conduct a comprehensive, county-wide health needs assessment. The Health Planning Council of Northeast Florida was asked to facilitate this community initiative.

The St. Johns County Health Assessment Task Force, comprised of representatives from Flagler Hospital, Baptist Health-South, the St. Johns County Chamber of Commerce, local medical and behavioral health providers, social service agencies, civic organizations, minority and faith-based groups, and concerned citizens, was formed. Information collected during the needs assessment process was presented to the St. Johns County Health Assessment Task Force at community meetings that were held at the St. Johns County Health Department from June through December of 2005.

Components of St. Johns County's needs assessment included an analysis of demographics, health statistics, and access to health care indicators for county residents. Community input was obtained from six focus group interviews with a variety of groups, including community redevelopment agencies, elderly, foster parents, and minority churches. A community-wide survey that examined the community's opinion on health care services and quality of life issues was also distributed to gain additional feedback from St. Johns County residents. Detailed information summarizing each of these components is included in this report.

At the final two community meetings, members of the St. Johns County Health Assessment Task Force made recommendations of key health issues based on data obtained from the various components of the needs assessment. A summary of their key issues and recommendations is included in the final section of this report. The St. Johns Health Assessment Task Force plans to continue meeting on a quarterly basis in order to assess the progress of the implementation of these recommendations

ST JOHNS COUNTY PROFILE

I. INTRODUCTION

The characteristics of a community, including the age, gender, ethnic background, and economic characteristics, influence the community's health care needs and the design of delivery of services to meet those needs. This section provides an overview of the demographics and socio-economic characteristics of St. Johns County in comparison to the state.

II. POPULATION CHARACTERISTICS

Table 1 shows St. Johns County's population trends and projections between 2000-2015. It is projected that the county will experience a 60% population growth during this period, while Florida is projected to increase by just over 30%.

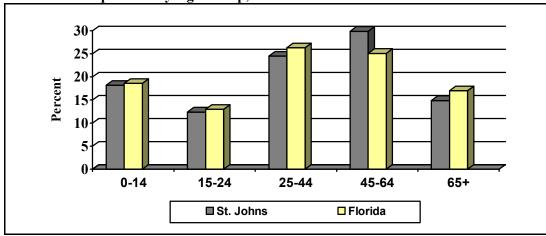
Table 1 Population Trends, 2000-2015

		Popul	lation		
Area	2000	2005	2010	2015	% Population Change 2000-2010
St. Johns	124,556	151,136	175,299	199,311	60.0%
Florida	16,072,832	17,844,137	19,478,414	21,080,569	31.2%

Source: July 1 Population Estimates, Office of Governor, October 2004

Figure 1 summarizes the age groups of St Johns County residents with comparison to Florida. The highest percentage of St. Johns County residents are in the 45-64 age group, accounting for nearly 30% of the county's population. Elderly residents over the age of 65 make up 15% of the total population.

Figure 1 Estimates of Population by Age Group, 2004

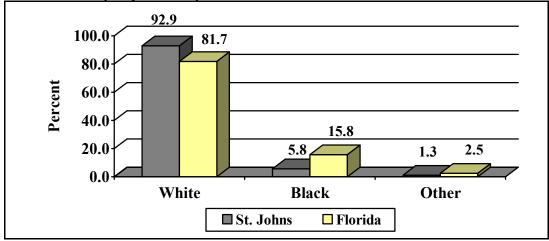


Source: July 1 Population Estimates, Office of Governor, 2004

Race and Ethnicity

Figure 2 shows the racial composition of St. Johns County with comparison to Florida. Only 7.% of the population in St. Johns is non-white, with comparison to 18% of the state. The "Other" race category includes American Indians, Asians, and Hawaiian/Pacific Islanders.

Figure 2 St. Johns County Population by Race, 2004



Source: Population Estimates, Office of the Governor, 2004

III. SOCIO-ECONOMIC PROFILE

Income

St. Johns County had a per capita income of \$25,233 in 2001, which exceeded Florida's per capita income of \$20,199 (Table 2). At \$46,653, St. Johns County had a higher median household income than the state's average of \$37,307.

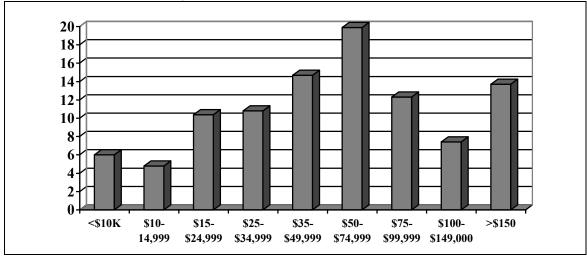
Table 2
Per Capita and Median Household Income, 2001

		St. Johns	Florida		
Per Capita	Income	Median Household Inco	me	Per Capita Income	Median Household Income
\$25,2	233	\$46,653		\$20,199	\$37,307

Source: ESRI Marketing Systems, 2002

Nearly 20% of St. Johns County households had incomes between \$50,000 - \$99,000. Only 6% of the county had household incomes less than \$10,000 (Figure 3).

Figure 3 St. Johns Household Income, 2003



Source: Demographics Now, 2003

Poverty

The estimated percentage of all persons living in poverty in St. Johns County was 8.0% compared to 12.5% in Florida (Table 3).

Table 3
Estimates of Persons and Families in Poverty, 2000

	<i>y</i> 7								
		All Persons		Children 0-17	18-64	65+			
	Total								
County	Population	Number	Percent	Percent	Percent	Percent			
St. Johns	120,920	9,698	8.0	2.3	4.8	0.9			
Florida	15,605,367	1,952,629	12.5	4.0	6.9	1.6			

Source: 2000 US Census Bureau. Note: 2000 US Census Poverty status refers to the 1999 poverty income level.

Public Assistance

National welfare reform and the initiation of Florida's WAGES program in 1996 dramatically reduced the number of families enrolled in the State Public Assistance Program. Table 4 summarizes the number of clients and families receiving public assistance. St. Johns County experienced an increase of 42% in persons receiving assistance while Florida experienced a decreased of 14%.

Table 4
Families on Public Assistance 2000-2004

1 ummes	on i abii.	C 1 LOSISCUE	1100 2000								
	Persons Receiving Cash Assistance										
	20	00	20	2001 2002 2003 2004		2002 2003		04			
											%
Area	Families	Clients	Families	Clients	Families	Clients	Families	Clients	Families	Clients	Change
St Johns	231	397	327	639	253	488	251	497	280	564	42.1%
Florida	63,684	139,605	57,702	123,480	58,525	124,579	58,535	124,592	57,248	119,665	-14.3%

Note: July TANF enrollment figures provided

Source: Economic Self-Sufficiency Services, Florida Department of Children and Families, 2005.

Labor Force, Employment, and Industry

According to the Florida Department of Labor and Employment Statistics, there was an average of 70,361 persons employed in the workforce in St. Johns County. Between 2000-2004, St. Johns County's unemployment rate showed an increase of 56%, however St. Johns County's unemployment rate is still below the state average (Table 5).

Table 5 Unemployment Rates, 2000-2004

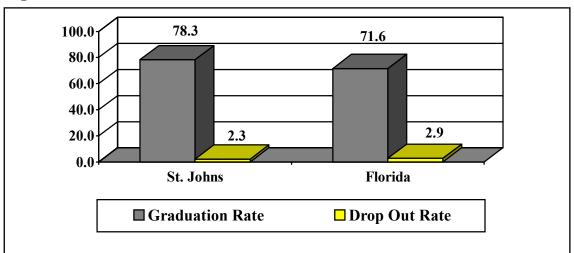
	% Unemployment								
Area	2000	2001	2002	2003	2004	% Change 1999-2004			
St .Johns	2.4	3.5	3.8	3.7	3.7	56%			
Florida	3.6	4.8	5.5	5.1	4.8	33%			

Source: Florida Agency for Workforce Innovation, Labor Market Statistics, Local Area Unemployment Statistics Program, 2004

Education

Total enrollment in St. Johns County public schools (pre kindergarten - grade 12) is estimated at 24,061. The high school graduation rate and drop out rates are shown in Figure 4. St. Johns County had a higher graduation rate and lower drop out rate than the state average.

Figure 4 High School Graduates, 2003-04



Source: Bureau of Education information and Accountability Services. Florida Dept of Education, Florida School Indicator Report; Profiles of School Districts, 2003-04

Graduation rate is defined as % of students who graduate from high school within 4 years after entering 9th grade for the first time.

Students receiving free or reduced price lunch is a good indicator of poverty in young families. Table 6 summarizes the number of students receiving free or reduced price lunch. St. Johns County had a much lower percentage of elementary and middle school students receiving free or reduced lunch with comparison to Florida.

Table 6 Students Receiving Free or Reduced Price Lunch, 2000-04

	Type of School			
Area	Elementary	Middle		
St. Johns	23.4%	19.5%		
Florida	53.5%	48.0%		

Source: Florida School Indicators Report, 2003-04. Total percentage of students in enrolled in public schools receiving free or reduced lunches. Students whose family incomes are $\leq 130\%$ of the federal poverty guidelines are eligible for free lunch and students whose family incomes are between 131-185% are eligible for the reduced price lunch program. High schools students are not included in these figures

HEALTH STATUS

I. MORTALITY INDICATORS

Mortality rates can be key indicators of the state of health of a community. This section will compare mortality rates for St. Johns County with Florida mortality rates, as well as three other counties in Northeast Florida, including Baker, Clay, and Nassau Counties.

Table 7 summarizes the population by race for St. Johns County and the comparison counties in Northeast Florida. St. Johns County's minority population is lower than Florida as well its surrounding counties.

Table 7 Population by Race, 2003

Area	Race	Population	Race as % of Population
Baker	Total	23,457	100%
	White	19,829	84.5%
	Black	3,386	14.4%
	Other	242	1.0%
Clay	Total	156,951	100%
	White	140,345	89.4%
	Black	11,750	7.5%
	Other	4,856	3.1%
Nassau	Total	63,425	100%
	White	58,119	91.6%
	Black	4,681	7.4%
	Other	625	1.0%
St. Johns	Total	141,216	100%
	White	130,495	92.4%
	Black	8,745	6.2%
	Other	1,976	1.4%
Florida	Total	17,134,945	100%
	White	14,012,002	81.8%
	Black	2,690,405	15.7%
	Other	432,538	2.5%

Source: July 1 Population Estimates, Office of the Governor, 2004

A significant number of St. Johns County's deaths are premature and preventable. Behavior modification and risk reduction can reduce the mortality rates of many of the leading causes of death, especially those attributed to heart disease, stroke, diabetes, lung cancer, and motor vehicle accidents. Individuals may improve both the length and quality of their lives by simply following a healthy lifestyle and receiving regular medical care.

Table 8 summarizes age-adjusted death rates for several of the leading causes of deaths for all races. St. Johns County age-adjusted death rates for cancer, chronic obstructive pulmonary disease, and pneumonia/influenza were slightly higher than Florida, while death rates for heart disease, stroke, diabetes, and liver disease fell below the state.

Table 8
Death Rates for Leading Causes of Death, 2002-2004

		Age-Adjusted Death Rates, All Race, Per 100,00 Population								
Area	Heart Disease	Cancer	Stroke	COPD	Diabetes	Pneumonia/ Influenza	Liver Disease			
Baker	377.1	195.1	67.1	83.2	62.2	37.6	14.7			
Clay	303.0	211.4	58.5	55.9	27.2	17.1	10.7			
Nassau	304.7	222.0	59.6	61.9	19.9	22.8	11.5			
St Johns	207.3	176.8	39.0	42.4	13.7	15.6	9.5			
Florida	264.1	174.7	42.0	38.1	20.8	13.1	10.7			

Note: Three-Year Average, Age Adjusted

Source: Florida Department of Health, Office of Planning, Evaluation & Data Analysis, 2004

The remainder of this section will explore the leading causes of death for St. Johns County in comparison with Baker, Clay and Nassau Counties as well as Florida. Age-adjusted death rates for all races from the period of time between 1998 – 2004 will be presented, as well as age adjusted death rates by race from 2002 – 2004. Unless otherwise noted, all tables in this section compare three-year rolling averages using age-adjusted death rates from the Florida Department of Health's CHARTS website which can be found at http://www.floridacharts.com/charts/chart.aspx

Mortality rates for the following indicators are included in this section:

- Heart Disease
- All Cancers
- Breast Cancer
- Lung Cancer
- Stroke
- Chronic obstructive pulmonary disease (C.O.P.D.)
- Unintentional injuries
- Motor vehicle accidents
- Diabetes
- Influenza and pneumonia
- Alzheimer's disease
- Liver Disease

In addition, this section will review infectious disease rates, maternal and child health and social and mental health indicators as well as results of the Behavioral Risk Factor Surveillance System Survey and Florida Youth Substance Abuse Survey.

Heart Disease

Heart disease remains the nation's leading cause of death. Figure 5 shows age-adjusted heart disease death rates for the period of time between 1998 – 2004. St Johns County experienced a decline in heart disease deaths during this time period and was lower than the state and surrounding counties. Non-white deaths from heart disease in St Johns County were higher than white deaths (Figure 6).

Figure 5 Heart Disease Deaths, All Races, 1998-2004

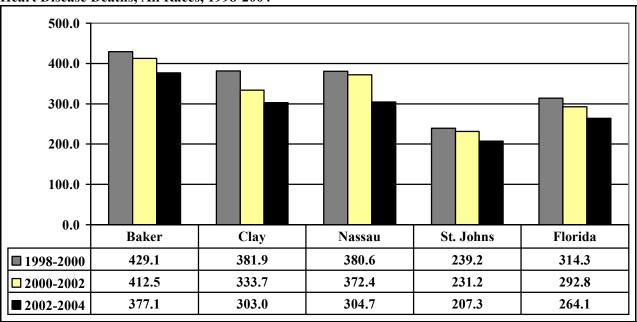
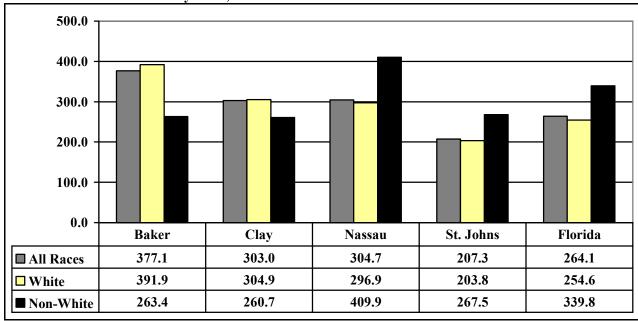


Figure 6 Heart Disease Death Rates By Race, 2002-2004



Cancer

Cancer ranks second only to heart disease as the leading cause of death in the United States. Age-adjusted deaths from all types of cancer in St. Johns County showed a decrease during this time period (Figure 7). Cancer deaths in the non-white population of were higher than the white population in St. Johns County (Figure 8).

Figure 7 All Cancer Death Rates For All Races, 1998-2004

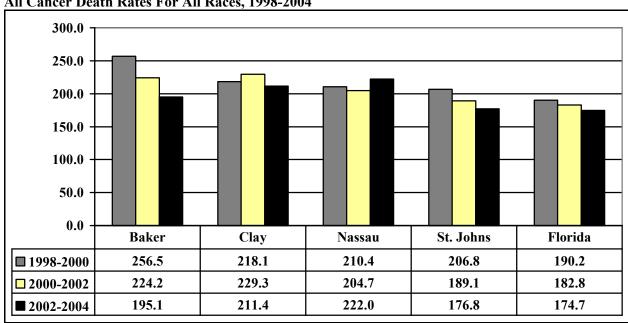
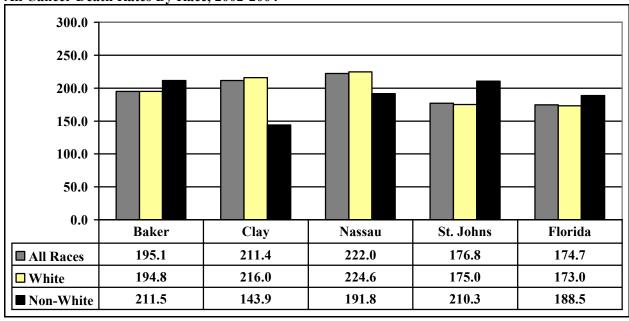


Figure 8 All Cancer Death Rates By Race, 2002-2004



Lung Cancer

St. Johns County experienced a decrease in age-adjusted lung cancer deaths between 1998-2004. (Figure 9). Lung cancer deaths in the non-white population were higher in the white population in St. Johns County but lower in Florida and Baker, Clay, and Nassau Counties (Figure 10).

Figure 9 Lung Cancer Death Rates, All Races, 1998-2004

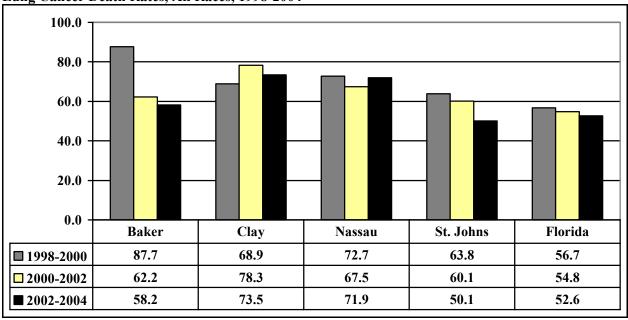
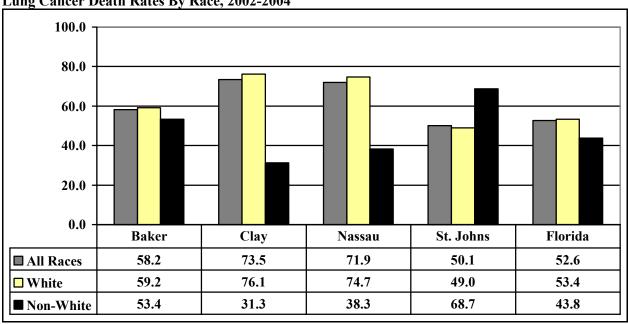


Figure 10 Lung Cancer Death Rates By Race, 2002-2004



Breast Cancer

St. Johns County showed a decrease in the number of breast cancer deaths during 1998-2004 (Figure 11). There was little difference in breast cancer deaths among racial groups in St. Johns County (Figure 12).

Figure 11 Breast Cancer Death Rates, All Races, 1998-2004

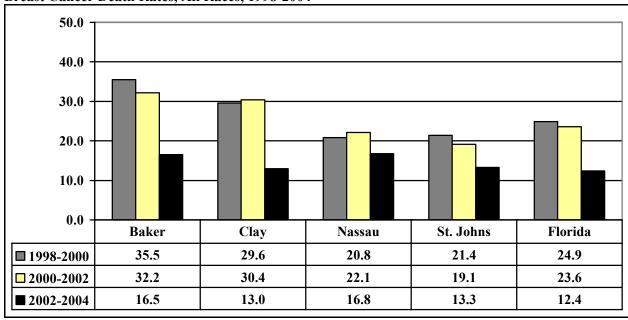
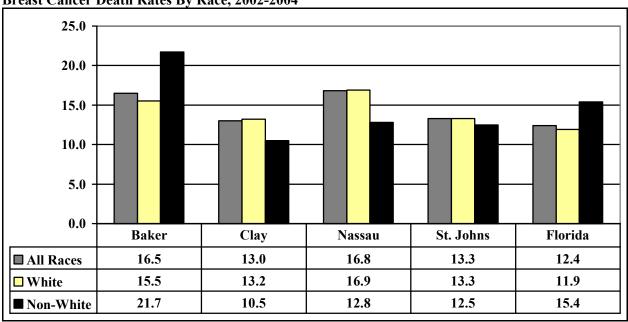


Figure 12 Breast Cancer Death Rates By Race, 2002-2004



Stroke

Stroke is a cardiovascular disease that affects the blood vessels supplying blood to the brain. Stroke is the third leading cause of death in the United States. As shown in Figure 13, St. Johns County's death rate from strokes decreased slightly from 1998-2004. There was a higher death rate among the non-white population in St. Johns County as shown in Figure 14.

Figure 13 Stroke Disease Death Rates, All Races, 1998-2004

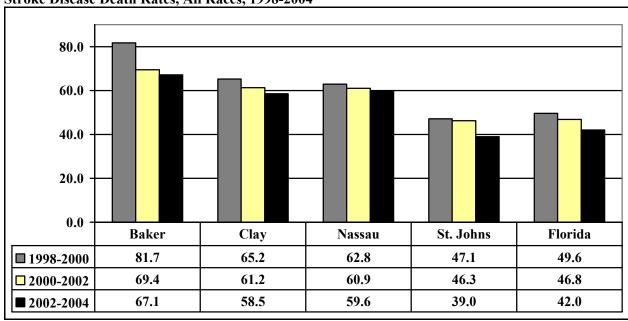
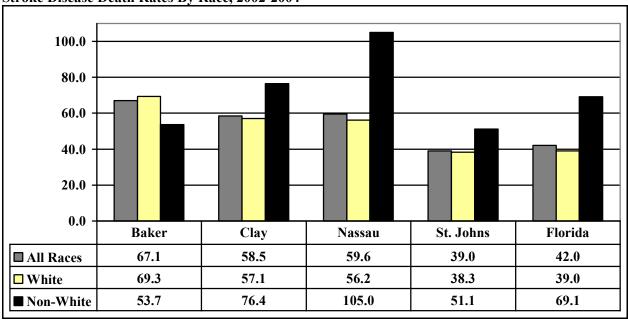


Figure 14 Stroke Disease Death Rates By Race, 2002-2004



Chronic Obstructive Pulmonary Disease (C.O.P.D.)

Chronic bronchitis, emphysema, and asthma all fall within the category of C.O.P.D. There was a decline in C.O.P.D. death rates from 1998-2004 in St. Johns County as shown in Figure 15. There was little difference in C.O.P.D death rates among racial groups in St. Johns County (Figure 16).

Figure 15 C.O.P.D. Death Rates For All Races, 1998-2004

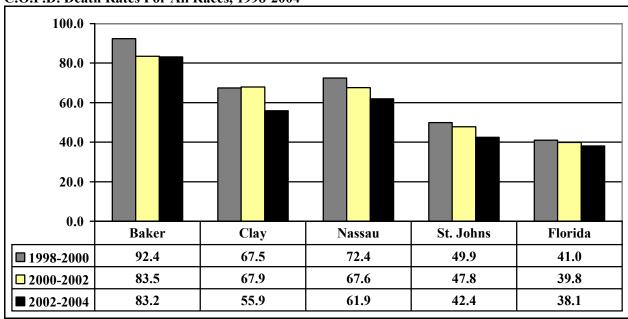
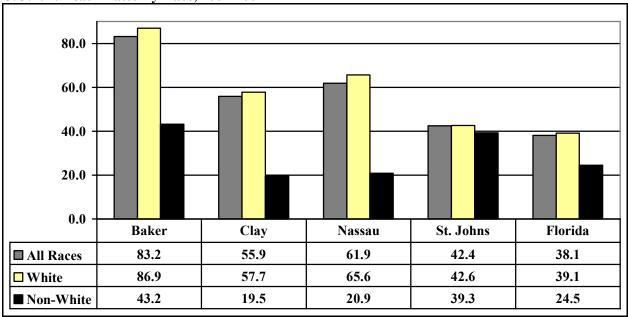


Figure 16 C.O.P.D. Death Rates By Race, 2002-2004



Unintentional Injuries

Unintentional injuries include motor vehicle crashes, drowning, fires, fall, and other home and recreation injuries. Unintentional injuries have shown a slight increase in St. Johns County from 1998-2004 (Figure 17). The white population in Clay County had more deaths from unintentional injuries in comparison to the non-white population (Figure 18).

Figure 17 Unintentional Injuries Death Rates, All Races, 1998-2004

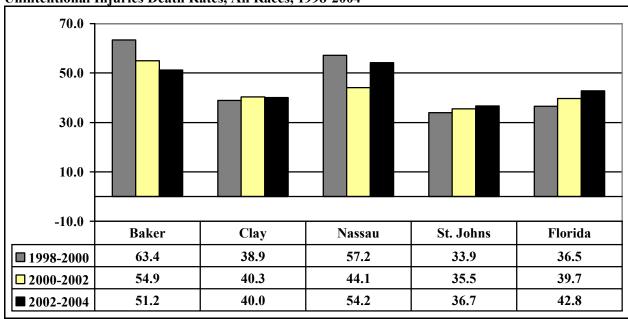
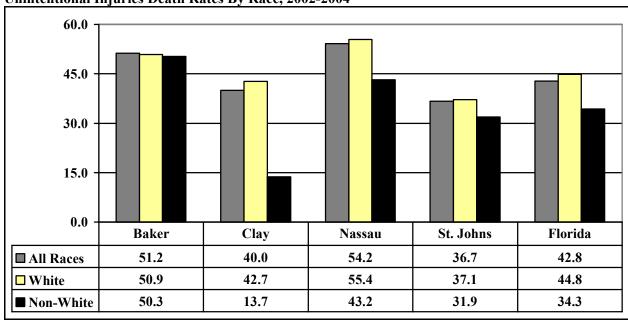


Figure 18 Unintentional Injuries Death Rates By Race, 2002-2004



Motor Vehicle Accidents

Half of all unintentional injury deaths are due to motor vehicle accidents. Age-adjusted motor vehicle accidents in St. Johns County showed an increase during the period of time from 1998-2004 (Figure 19). The non-white population in St. Johns County had a high motor vehicle death rate than the white population (Figure 20).

Figure 19 Motor Vehicle Accident Death Rates, All Races, 1998-2004

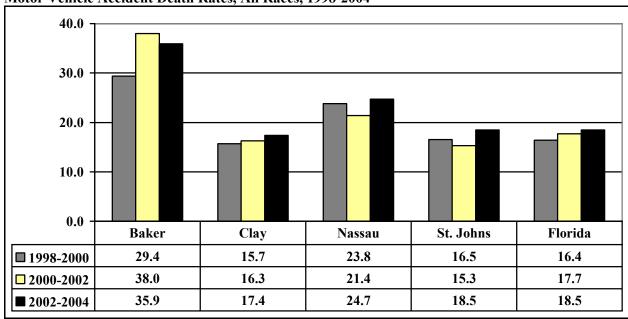
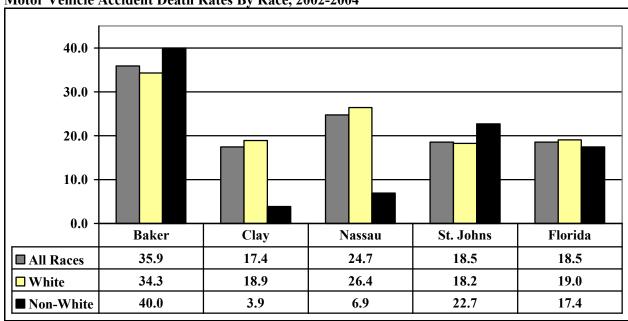


Figure 20 Motor Vehicle Accident Death Rates By Race, 2002-2004



Diabetes

Diabetes is a chronic metabolic disease that affects millions of Americans and is the sixth leading cause of death in the United States. St. John's County's age-adjusted death rate from diabetes remained relatively stable during the period from 1998 – 2004 (Figure 21). St. Johns County had a significantly higher number of deaths from diabetes in the non-white population, with over double the number of deaths than the white population (Figure 22).



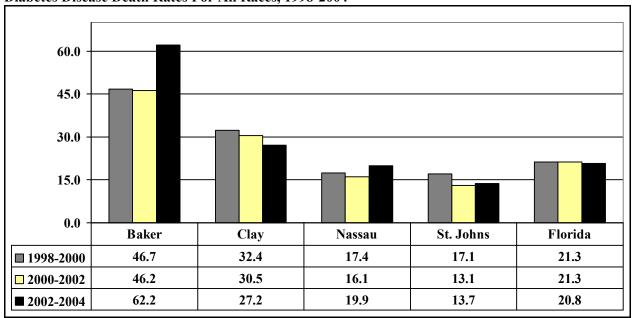
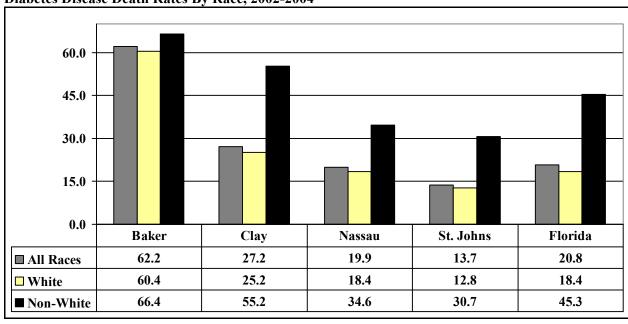


Figure 22 Diabetes Disease Death Rates By Race, 2002-2004



Influenza and Pneumonia

Influenza and pneumonia deaths together constitute the seventh leading cause of death in the United States. St. Johns County showed a decrease in age-adjusted death rates from influenza and pneumonia from 1998-2004 (Figure 23). The death rate from influenza and pneumonia was higher in the non-white population in St. Johns County, as shown in Figure 24.

Figure 23 Influenza & Pneumonia Disease Death Rates, All Races, 1998-2004

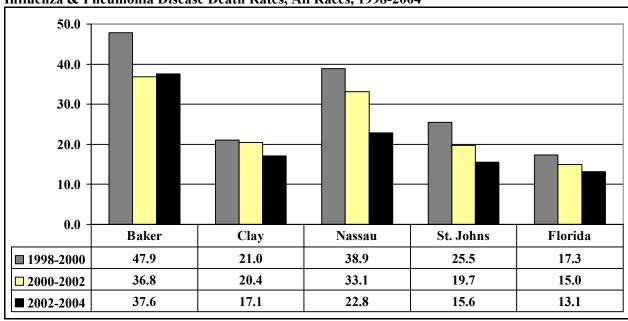
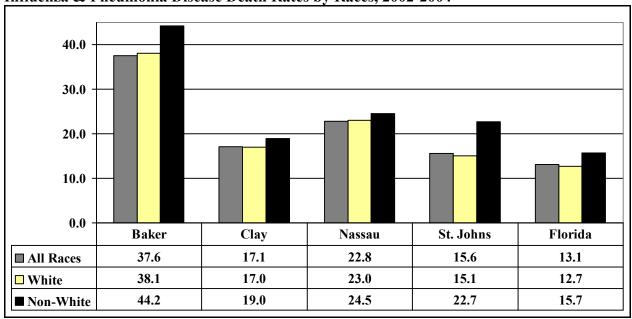


Figure 24
Influenza & Pneumonia Disease Death Rates by Races, 2002-2004



Alzheimer's Disease

An estimated 4.5 million Americans have Alzheimer's disease. St. Johns County showed a decrease in the number of deaths from this disease during the period of time from 1998-2004 (Figure 25). There were no difference in Alzheimer's death rates among racial groups in St. Johns County as shown in Figure 26.

Figure 25 Alzheimer's Disease Death Rates, All Races, 1998-2004

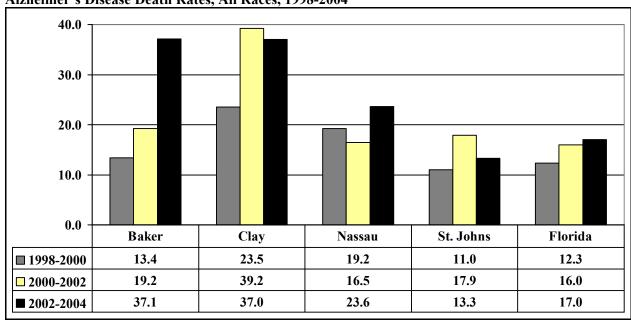
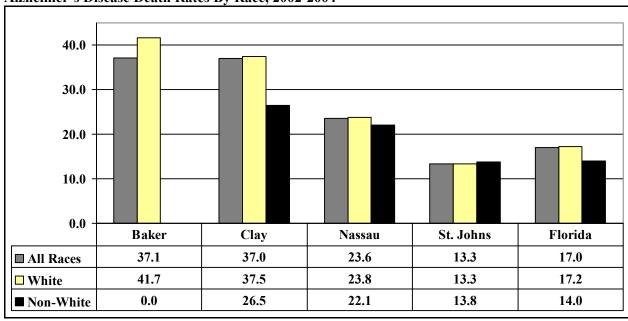


Figure 26 Alzheimer's Disease Death Rates By Race, 2002-2004



Liver Disease

Among the numerous diseases that affect the liver, cirrhosis accounts for most of the cases of liver disease and death associated with liver failure. As shown in Figure 27, death rates from liver disease showed a decline in St. Johns County. Liver disease death rates were higher in the white population than non-white population in St. Johns County as shown in Figure 28.

Figure 27 Liver Disease And Cirrhosis Death Rates For All Races, 1998-2004

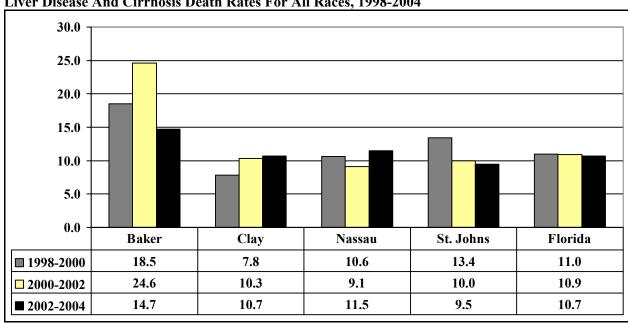
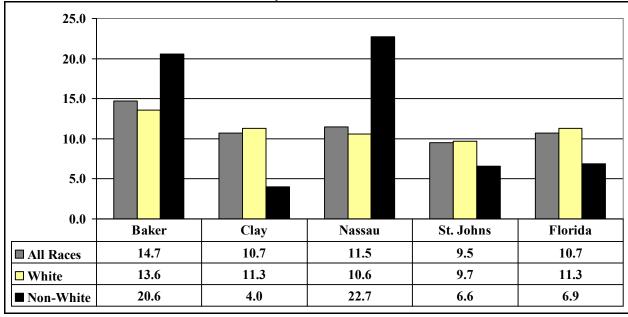


Figure 28 Liver Disease And Cirrhosis Death Rates By Race, 2002-2004



II. INFECTIOUS DISEASES

HIV/AIDS represents the eleventh leading cause of death among Floridians. St. Johns County had a significantly lower average rate of HIV and AIDS cases than Florida (Table 9). The number of HIV and AIDS cases by race is not available in counties where the total number of cases are less than three, due to confidentiality issues.

Table 9
AIDS and HIV Cases, 2002-2004

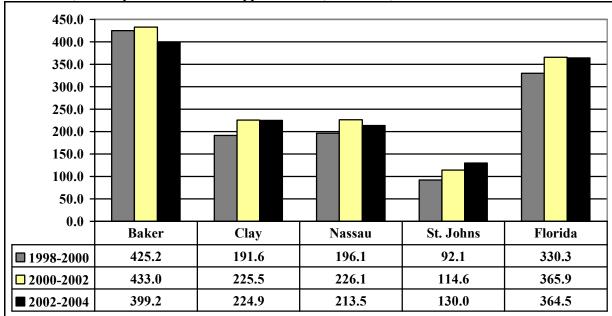
	HIV	Cases	AIDS Cases		
Area	Average # of Cases	Rate per 100,000	Average # of Cases	Rate per 100,000	
Baker	3.0	12.7	1.6	6.8	
Clay	13.0	8.2	13.0	8.2	
Nassau	6.3	9.9	5.0	7.9	
St. Johns	17.3	12.1	17.3	12.1	
Florida	6,381.0	37.1	5,210.0	30.3	

Source: Florida Department of Health, Bureau of HIV/AIDS, 2005

Sexually Transmitted Diseases

The sexually transmitted disease rate in St. Johns County experienced an increase from 1998-2004 however, still remained significantly lower than the state's rate (Figure 29)

Figure 29 Gonorrhea, Chlamydia & Infectious Syphilis Rates, All Races, 1998-2004



III. MATERNAL AND CHILD HEALTH

Birth Rate

Population growth in a community is a combination of natural increase (more births than deaths) and migration (more people moving into the area than leaving).

The birth rate for St. Johns County was 10.4 births per 1,000 for all races, which fell below the state's rate of 12.3 births per 1,000 (Table 10). The rate of non-white births in St. Johns County was 19.0 births per 1,000 population which exceeded the state's non-white birth rate of 17.6 births per 1,000 population.

Table 10 Total Births and Birth Rates by Race, 2002-2004

	All Races		White		Nonwhite	
Area	Ave Number	Rate	Ave Number	Rate	Ave Number	Rate
Baker	360	15.3	317	11.1	43	11.9
Clay	2,020	12.8	1,747	15.9	272	16.3
Nassau	698	11.0	631	12.4	66	12.5
St. Johns	1,484	10.4	1,283	10.8	201	19.0
Florida	211,956	12.3	156,554	11.1	55,038	17.6

Female Population of Childbearing Age

The percentage of women of childbearing age (15- 44 years) in St. Johns County represented 19% of the total population as shown in Table 11. The majority of women of childbearing age in St. Johns County were white.

Table 11 Female Population of Childbearing Women Age 15-44 by Race, 2002-2004

Area	Total Childbearing Population		White		Black		Other	
	Ave Number	%	Ave Number	%	Ave Number	%	Ave Number	%
Baker	4,730	20.2%	4,092	86.5%	598	12.6%	40	0.8%
Clay	33,526	21.4%	29,470	87.9%	2,879	8.6%	1,177	3.5%
Nassau	12,507	19.7%	11,400	91.1%	974	7.8%	133	1.1%
St. Johns	27,084	19.2%	24,771	91.5%	1,888	7.0%	425	1.6%
Florida	3,361,680	19.6%	2,606,919	77.6%	650,917	19.4%	103,844	3.1%

Infant Mortality

Infant mortality includes the deaths of babies from birth to 364 days. The leading causes of infant deaths in Florida were perinatal conditions, congenital anomalies, low birth weight, and sudden infant death syndrome.

St. Johns County experienced an increase in infant deaths during 1998-2004 (Figure 30). As shown in Figure 31, St. Johns County had a higher non-white infant mortality rate, with over twice as many non-white deaths in comparison to the white population.

Figure 30 Infant Mortality Rates, All Races, 1998–2004

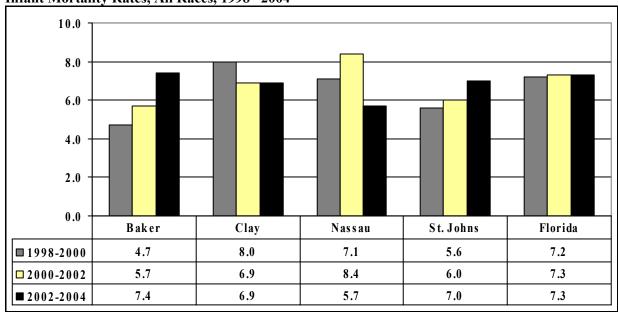
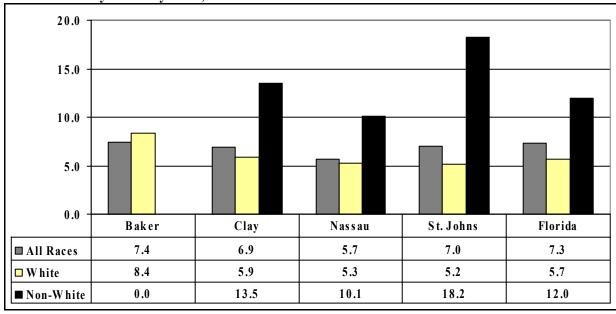


Figure 31 Infant Mortality Rates By Race, 2002-2004



Low Birth Weight

Babies born less than five and a half pounds, or 2500 grams, in weight are termed "low birth weight" births. The highest rates of these births occur to teen and minority mothers. These vulnerable babies have an increased risk of morbidity and mortality and consume a disproportionate share of health care resources during the early childhood years.

St. Johns County's low birth rate remained stable from 1998–2004 and was close to the state's low birthweight rate (Figure 32). St. Johns County's low birthweight rate of non-white mothers was three times as high as white mothers (Figure 33).



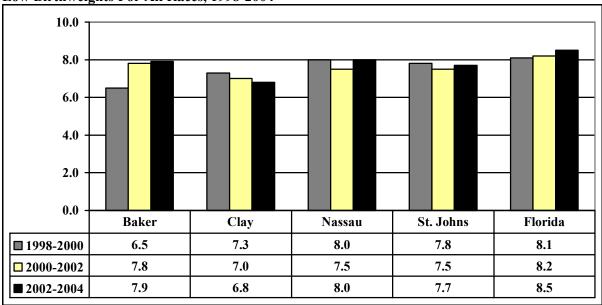
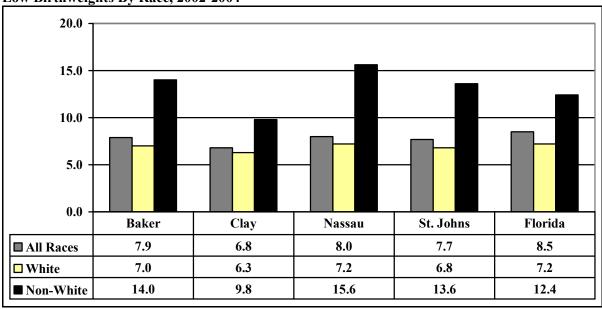


Figure 33 Low Birthweights By Race, 2002-2004



Adolescent Births

Babies born to young mothers under the age of 18 are more likely to experience poor birth outcomes than those born to older mothers. Birth outcomes are also closely tied to the education, economic outlook, and family relationships of the mother. Births to teenage mothers in St. Johns County showed a decrease from 1998-2004 (Figure 34). Births to non-white teenage mothers was over three times as high as white mothers in St. Johns County (Figure 35).



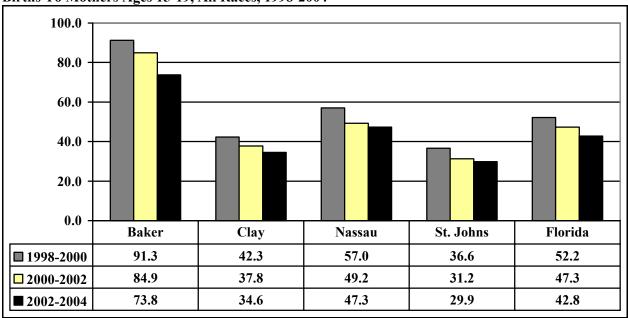
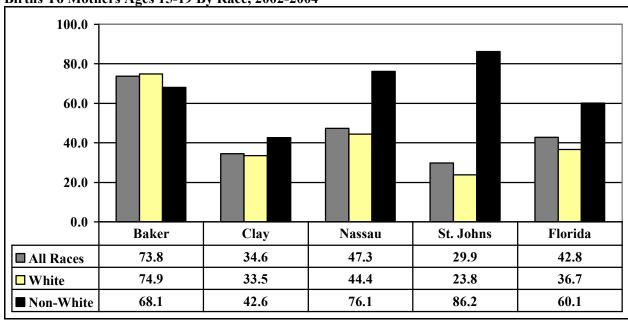


Figure 35 Births To Mothers Ages 15-19 By Race, 2002-2004



Early Prenatal Care

Prenatal care begun during the first trimester of pregnancy can have a profound effect on birth outcomes. Figure 36 illustrates the percentage of pregnancies receiving early prenatal care for all races from 1998-2004. St. Johns County remained stable over this period of time. A higher percentage of white mothers received early prenatal care in St. Johns County than non-white mothers (Figure 37).

Figure 36 Percent of Pregnancies Receiving First Trimester Prenatal Care, All Races, 1998-2004

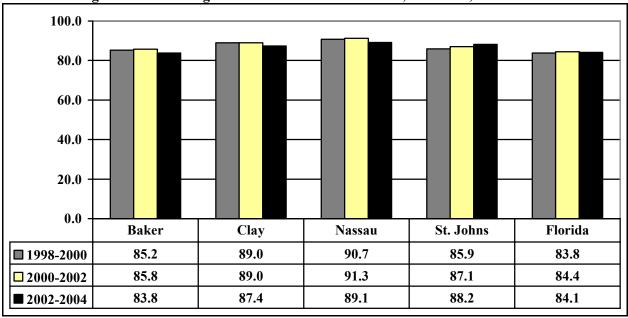
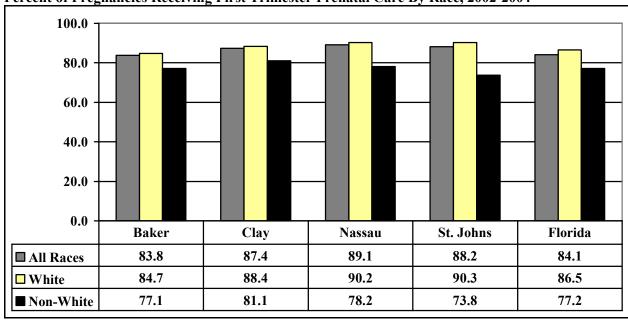


Figure 37
Percent of Pregnancies Receiving First Trimester Prenatal Care By Race, 2002-2004



Other Birth Risk Factors

Smoking during pregnancy can lead to complications and health problems in newborns. Smoking nearly doubles woman's risk of having a low birthweight baby. In St. Johns County, nearly 13% of births occurred to mothers who smoked which exceeded the state's percentage (Figure 38). With regard to race, more births occurred to white mothers who smoked.

25.0 20.0 15.0 10.0 5.0

Figure 38
Births to Mothers Who Smoked During Pregnancy by Race, 2002-2004

Clay

14.1

15.5

5.4

Note: Resident Live Births to Mothers Who Smoked During Pregnancy

IV. SOCIAL AND MENTAL HEALTH

Baker

19.5

21.2

7.0

Domestic Violence

■ All Races

■ Non-White

■ White

Domestic violence is a widespread social problem that affects families on all socio-economic and demographic levels. A high number of domestic violence offenses in a community can be used as an indicator to estimate the number of persons in a population who may potentially have serious mental illness conditions or substance abuse problems and are in need of mental health treatment programs. St. Johns County showed a slight increase in domestic violence from 2003-2004, as shown in Table 12.

Nassau

18.8

19.8

9.0

St. Johns

12.9

13.4

9.6

Florida

8.6

10.2

4.1

Table 12 Domestic Violence Offenses, 2004

Area	Total Population	Total Domestic Violence Offenses	% Change 2003-2004^	Rate Per 100,000 Population	Rate Change 2003-2004^
Baker	23,963	96	88.2%	400.6	83.7%
Clay	163,461	865	-4.1%	529.2	-8.5%
Nassau	65,016	418	28.2%	642.9	24.4%
St. Johns	149,336	1,145	4.7%	766.7	-2.0%
Florida	17,516,732	119,772	-0.8%	683.8	-3.3%

Note: Percent changes in the number and should be interpreted with caution, due the fact that in small counties, a small increase in crime can produce a large percent change. Source: FDLE. Crime in Florida, Florida Uniform Crime Report, Florida Statistical Analysis Center, 2004

Suicide

Suicide is a terrible potential outcome of mental illness and disorders such as panic, depression, and schizophrenia. St. Johns County showed a slight decrease in suicide rates between 1998-2004 (Figure 39). Suicides appear to disproportionately affect the white population in St. Johns County, with twice as many deaths in the white population (Figure 40).

Figure 39 Suicide Death Rates, All Races, 1998-2004

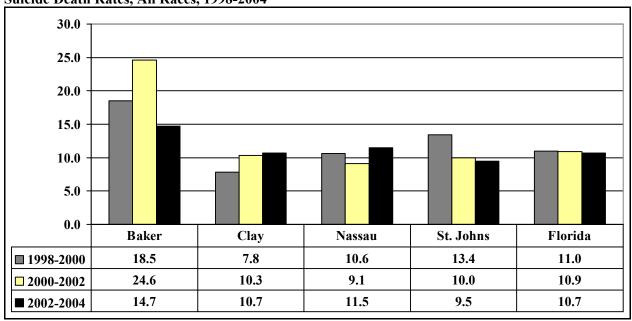
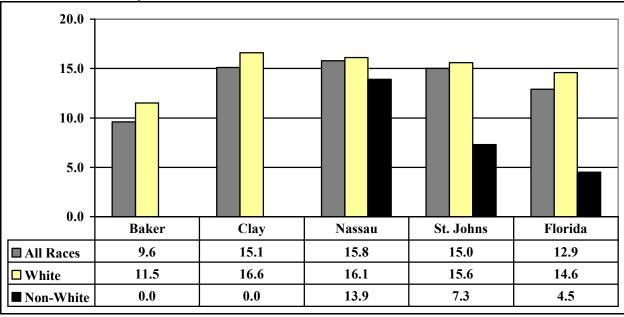


Figure 40 Suicide Death Rates by Race, 2002-2004



Adolescent Substance Abuse

Teen-age drinking and drug use is a growing concern in many counties throughout Florida, as well as the nation. In 2004, 4.4% of all arrests in St. Johns County from drug offenses were among juveniles with comparison to 9% statewide. According to the St. Johns County Sheriff's office, there were no DUI or liquor law violations among St. Johns County youth during 2004. Table 13 summarizes the total arrests from drug and alcohol related offenses in St. Johns County and Florida for juveniles and adults.

Table 13 Arrests by Offenses, 2004

		Juvenile Arrests		Adult Arrests	
Offenses	Total Arrested	Number	Percent	Number	Percent
St. Johns County Offenses					
Drug Arrests	500	22	4.4%	478	95.6 %
Driving Under Influence (DUI)	295	0	0	295	100%
Liquor Law Violations	20	0	0	20	100%
Florida Offenses					
Drug Arrests	150,334	14,134	9%	136,200	91%
Driving Under Influence (DUI)	55,805	480	0.1%	55,325	99%
Liquor Law Violations	35,692	1,419	4%	34,273	96%

Source: Office of the Sheriff, Clay County, Annual Arrests Report, 2004

Florida Department of Law Enforcement, Crime in Florida, 2004 Florida Uniform Crime Report

The Florida Youth Substance Abuse Survey (FYSAS) is an annual, statewide school-based survey effort that measures the prevalence of alcohol, tobacco and other drug use and delinquent behaviors as well as the risk and protective factors related to these behaviors. The 2004 FYSAS was administered to 1,113 St. Johns County students in grades 6 – 12 in the spring of 2004. Key findings revealed that alcohol was the most commonly used drug among St. Johns County students. The Executive Summary of this report is included as Appendix A-1. A full copy can be found at http://www.dcf.state.fl.us/mentalhealth/publications/fysas/county04/stjohns04.pdf

V. BEHAVIORAL RISK FACTOR SURVEILLANCE SURVEY

The Centers for Disease Control and Prevention began the Behavior Risk Factor Surveillance System Survey (BRFSS) in the early 1980's in a handful of states and today, all states participate in the survey.

BRFSS data have been widely used to monitor health behavior and health status at the state and national levels, however, due to small sample sizes, statewide BRFSS results cannot provide accurate and reliable data at the county level for public health program planning and evaluation. Therefore, with support from county health departments and other health agencies, the Florida Bureau of Epidemiology designed and implemented the county BRFSS to provide data on behavioral risk factors and chronic disease conditions for every one of Florida's 67 counties.

The 2002 County Behavior Risk Factor Surveillance System Survey (BRFSS) was conducted in September 2002 through January 2003. Approximately 500 adults (age 18 and older) were randomly selected and interviewed in each county. The purpose of this telephone survey was to obtain county-level estimates of the prevalence of personal health behaviors that contribute to morbidity and mortality.

Data obtained from the BRFSS county report can be used to make comparisons between counties and the state overall on a variety of health-related issues. Data can also be used to: (1) prioritize health issues and identify populations at highest risk for illness, disability, and death; (2) plan and evaluate prevention programs; (3) educate the community and policy makers about disease prevention; (4) support community policies that promote health and prevent disease.

A summary of the 2002 County BRFSS is provided as Appendix A-2. St. Johns County is compared the state, as well as other surrounding counties in the area including Baker, Clay, and Nassau Counties. A full copy of the report can be found on the Bureau of Epidemiology's website at http://www.doh.state.fl.us/disease_ctrl/epi/index.html.

Some of the findings from St. Johns County revealed poor health behaviors among its residents. Nearly 34% of St. Johns County residents reported being overweight. In addition, 46% reported that they did not engage in any regular moderate exercise. Another 22% reported that they were current smokers and nearly 29% reported having high blood pressure.

ACCESS TO CARE/HEALTH CARE RESOURCES

I. INTRODUCTION

Access to health care is the key to achieving a healthy community and is a primary goal of health policy in Florida. This section will review health coverage of St. Johns County residents, health care providers practicing in the county, as well as review health care facilities and licensed health care services and other community resources in St. Johns County.

II. HEALTH COVERAGE

According to the 2004 Florida Health Insurance Study, St. Johns County had a total uninsured rate of 10.2%, a decrease from 12.9% in the 1999 Florida Health Insurance Study. A smaller area analysis from the 2004 Florida Health Insurance Study further explored the percentage of uninsured residents by specific zip codes of the county as summarized in Table 14.

Table 14 Uninsured by Zip Code, 2004

Area/Zip Code	Population in 2000	Estir	mated Uninsured
		Number	Percent
St Augustine			
32084	15,774	1,714	10.9%
32086	18,082	1,828	10.1%
32092	5,661	566	10.0%
32095	18,819	1,922	10.2%
Other			
32082: Ponte Vedra	23,365	2,322	9.9%
32145: Hastings area	3,456	338	9.8%
32033: Elkton	1,723	172	10.0%
32059: "St. Johns"	16,708	1,885	11.3%

Source: Florida Health Insurance Study 2004, Zip Code Estimates, August 2005

A listing of health insurance coverage by major providers can be found in Table 15. These figures represent enrollments in Medicare, Medicare HMO, Medicaid, Medicaid HMO, and Commercial HMO insurance programs. Significant numbers of insured residents are not reported because commercial insurance enrollment figures are not available and the number of employees covered by self insurance is unknown.

Table 15 Health Insurance Coverage, 2004

	Percent of Population by Type of Health Coverage										
	2003	*Medicare Medicare HMO		10 Medicaid		Medicaid HMO		Commercial HMO			
Area	Population	Enrollment	%	Enrollment	%	Enrollment	%	Enrollment	%	Enrollment	%
St. Johns	141,239	23,256	16.5	275	0.2	10,380	7.3	0	0	17,183	12.2
Florida	17,134,945	2,920,971	17.0	556,960	3.3	2,215,198	12.9	764,438	4.5	2,364,071	13.8

^{*} Medicare Enrollment, Centers for Medicare & Medical Services (CMS) as of July 1, 2003 Source: Department of Insurance Quarterly HMO Enrollment Reports and AHCA Monthly Medicaid Enrollment Reports as of December 31, 2004

St. Johns County had a lower percentage of residents enrolled in Medicaid with comparison to the state. There are no residents enrolled in the Medicaid HMO and very few in the Medicare HMO. Commercial HMO enrollment was 12.2%, similar to the state's enrollment at 13.8%.

Florida's Medicaid program serves over 2.1 million Floridians, with about half of those being children and adolescents under the age of 21. While children are the bulk of the beneficiaries, most of the costs arise from providing services to seniors, especially nursing home care, and people with disabilities who have significant medical costs.

There are four categories of Medicaid eligibility for adults in Florida, which include low income families, pregnant women, emergency medical assistance for non-citizens, and Medicaid for the elderly and disabled. Eligibility for each of those programs is based on specific income criteria. The number of Medicaid enrollees in St. Johns County increased by nearly 24% during 2000-2004 while the number of enrollees in the state increased by 21.5% (Table 16).

Table 16 Medicaid Enrollees, 2000-2004

	2000	2001	2002	2003	2004	2000-2004
Area						% Change
St. Johns	7,668	8,484	8,829	9,363	9,494	23.8%
Florida	1,734,389	1,844,275	2,012,548	2,113,820	2,106,951	21.5%

Source: Agency for Health Care Administration, July enrollment figures for 2000 – 2004.

Federal government provisions for children's health coverage include Medicaid and Title XXI of the Social Security Act. The states use Title XXI block grants to fund child health care coverage through an expansion of the Medicaid program, health insurance, or a combination of the two.

In Florida, the KidCare Act of 1997 expanded Medicaid eligibility and the Healthy Kids Program, and initiated the MediKids program for children ages 0-5. The Healthy Kids program provides medical coverage for children ages 5 up to 19 in households whose income is between 100-200% of the federal poverty level (FPL). Children's Medical Services covers children from birth through 18 who have special behavioral or physical health needs or chronic medical conditions.

MediKids covers children age 1 –5 whose income is between 133-200% of the federal poverty level. Medicaid is the fourth KidCare program for children birth though 18 years and eligibility is based on the age of child and household income. Children less than age 1 are covered if the household income is below 200% of FPL, children ages 1-5 if household income is less than 133% of FPL, and children ages 6 up to 19 if household income is below 100% of FPL.

KidCare enrollment figures for the four programs are provided in Table 17

Table 17 KidCare Enrollment, 2005

	KidCare Program Enrollment				
Area	Healthy Kids	CMS	MediKids	*Medicaid	
St. Johns	661	35	44	5,362	
Florida	182,113	7,690	16,926	1,266,731	

Source: Healthy Kids, as of February, 2005

Nationally, Medicare beneficiaries make up 14% of the population. In Florida, the percentage of Medicare beneficiaries comprise 17% of the state's population. Medicare provider coverage for people age 65 or older, some people under the age of 65 with disabilities, and people with End-Stage Renal Disease. Table 18 summarizes Medicare enrollment by county for aged and disabled by hospital insurance (HI) and supplemental medical insurance (SMI).

Table 18
Medicare County Enrollment and Aged and Disabled Enrollment, 2003

	Aged			Aged Disabled		Total Aged & Disabled			
Area	HI &/or SMI	НІ	SMI	HI &/or SMI	ні	SMI	HI &/or SMI	НІ	SMI
St. Johns	20,433	20,386	19,893	2,823	2,821	2,532	23,256	23,207	22,425
Florida	2,558,145	2,545,289	2,482,092	362,826	362,627	329,160	2,920,971	2,907,916	2,811,252

Source: Medicare Enrollment, Centers for Medicare & Medicaid Services (CMS) as of July 1, 2003 Aged and Disabled Enrollment, Centers for Medicare & Medical Services (CMS), as of March, 2004

III. PRIMARY CARE

Primary care providers (PCP) give routine medical care for the diagnosis, treatment, and prevention of common medical conditions. Primary care is the entry point into the health care system for non-emergent services. PCPs refer patients requiring additional care to specialists for treatment. In this way, primary care providers serve as gatekeepers for the health care system and play an important role in the coordination of care in today's managed care environment.

Family practitioners, internists, pediatric and general medicine physicians, obstetricians and gynecologists nurse midwives, physician assistants, and nurse practitioners are all considered primary care providers. Additionally, public health nurses and school nurses provide primary care services to designated populations.

The Department of Health and Human Services (HHS) considers a primary care physician-to-population ratio of 1:3,500 persons adequate for most communities. In areas where more than 20% of the population lives in poverty, the ratio is increased to 3,000 persons per primary care physician.

HHS uses physician/population ratios to determine Health Professional Shortage Areas (HSPA) and eligibility for the development of federally funded primary care programs and placement of

^{*}AHCA as of January 2005

National Health Service Corps personnel. Primary care HPSA designation is based on the described ratio, the availability of care in nearby areas, infant mortality, birth rates, and poverty level. The St Johns County Health Department and the low-income population of Western St. John's County are the only two areas of St. Johns County that was given a primary care HPSA designation.

IV. HEALTH CARE PROFESSIONALS

There are 67 family practice, general practice and internal medicine physicians, 10 Obstetricians/gynecologist, and 22 pediatricians practicing in St. Johns County. Some of these primary care physicians also see patients in Duval County as well. Specialty physicians generally practice in the St. Augustine area at Flagler Hospital. A summary of primary care and specialty care providers is found at the beginning of "St. Johns County Health Resources" included as Appendix B. Other health care professionals, including dentists are also listed.

V. HEALTH CARE FACILITIES

Acute Care

Acute care hospitals play a key role in the delivery of health care services in a community. In addition to providing traditional inpatient services, hospitals also provide extensive diagnostic and treatment services on an outpatient basis.

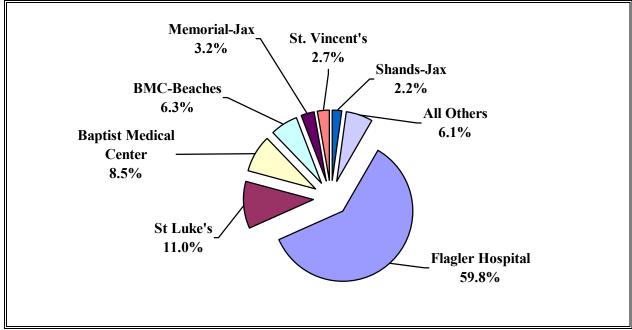
Hospital Utilization

Flagler Hospital, a 300 bed acute care facility, is the only hospital located in St. Johns County. The hospital offers comprehensive services, including obstetrics, surgery, rehabilitative services, transitional care, as well as numerous specialty care services. In addition, Flagler Hospital offers emergency room care, a Heart and Lung Center, Cardiac Rehabilitation Center, Oncology Center, free standing imaging center, a sleep laboratory and an outpatient surgery center.

In February of 2005, Baptist Medical Center opened a 92 bed facility in Southern Duval County, near the border of St. Johns County. Many residents of Northern St. Johns County utilize Baptist Medical Center South for their health care needs. Baptist Medical Center South offers a vast array of services including emergency services, obstetrics, cardiology, oncology, radiology, surgery, and a sleep lab.

Figure 41 shows the hospital utilization rates by St. Johns County residents in 2004. Of the 17,950 total inpatient discharges, nearly 60% of residents received inpatient care at Flagler Hospital. Another 11% received care at St. Luke's and 6% at Baptist Medical Center-Beaches, both facilities located in Duval County.





Source: AHCA Hospital Discharge Data Files, 2004

Table 19 illustrates St. Johns County's top ten hospital discharges by diagnostic related groups (DRGs) for adults. Normal deliveries lead the list, followed by psychoses and heart failure and shock related conditions.

Table 19 Adult Discharges, St. Johns County Residents, 2004

A July Town 10 DDC!s (A Julys and 10 and anno)	T-4-1	% of Top
Adult Top 10 DRG's (Adults age 18 and over)	Total	10 DRG's
Vaginal Delivery W/O Complicating Diagnoses	923	18.8%
Heart Failure & Shock	540	11.0%
Chest Pain	538	10.9%
Psychoses	509	10.3%
Simple Pneumonia & Pleurisy With Complicating Conditions (CC)	475	9.7%
Major Joint & Limb Reattach Procedures of Lower Extremity	459	9.3%
Septicemia Age >17	409	8.3%
Chronic Obstructive Pulmonary Disease (COPD)	389	7.9%
Cesarean Section W/0 CC	341	6.9%
Esophagitis, Gastroent & Mis Digestive Disorders With CC	336	6.8%
Total Top 10 DRG's	4,919	100%

Source: AHCA Hospital Discharge Data Files, Calendar Year 2004

Table 20 illustrates the leading pediatric discharges in St. Johns County. Normal newborns lead the list, accounting for nearly 68% of the top 10 discharges.

Table 20 Pediatric Discharges, St. Johns County Residents, 2004

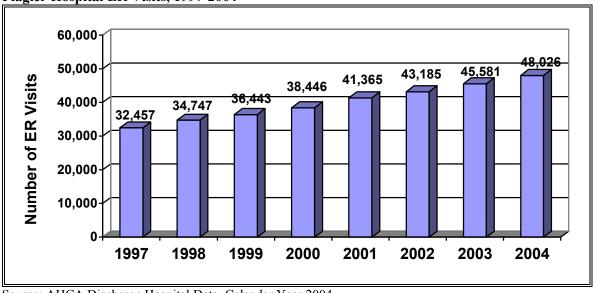
Pediatric Top 10 DRG's (Children age 0-17 years)	Total	% of Top 10 DRG's
Normal Newborn	1,170	67.9%
Neonate With Other Significant Problems	193	11.2%
Bronchitis & Asthma, 0-17 years	65	3.8%
Prematurity W/O Major Problems	53	3.1%
Full Term Neonate With Major Problems	53	3.1%
Psychoses	44	2.6%
Vaginal Delivery Without Complicating Diagnosis	42	2.4%
Simple Pneumonia & Pleurisy, Age 0-17	35	2.0%
Esophagitis Gastrent & Misc Digest Disorders, Age 0-17	35	2.0%
Prematurity With Major Problems	32	1.9%
Total Top 10 DRG's	1,722	100%

Source: AHCA Hospital Discharge Data Files, Calendar Year 2004

Emergency Room Care

Local hospital emergency room utilization is a good indicator of the availability and accessibility of area health care services. Many appropriate visits to an emergency room do not result in hospital admissions. Figure 42 depicts the increase in the number of emergency room visits from Flagler Hospital. Between 1997-2004, Flagler Hospital experienced a 48% increase.

Figure 42 Flagler Hospital ER Visits, 1997-2004



Source: AHCA Discharge Hospital Data, Calendar Year 2004

Figure 43 illustrates total inpatient hospital admissions and the number of hospital inpatient admissions through the emergency room at Flagler Hospital from 1997-2004. The number of

total hospital inpatient admissions increased by 58% during this period of time. In 2004, over 60% of total hospital inpatient admissions came through the emergency department.

16,000 14.383 13.368 14,000 13,176 **Number of Admissions** 12.585 12,000 10,863 9,850 9,057 10,000+ 9.086 9.115 8,617 8,028 8.721 7,039 8,000 6,811 6,023 5,609 6,000 4,000 2,000 1997 1998 1999 2000 2001 2002 2003 2004 ■ Total Inpatient Admissions ■ Total Inpatient Admissions through ER

Figure 43 Flagler Hospital Inpatient Hospital Admissions, 1997 – 2004

Source: AHCA Discharge Hospital Data, Calendar Year 2004

Long-Term Care

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

Long-term care includes nursing home care. Medicaid is the primary funding source of nursing home care, paying for 66% of all nursing home days. Medicaid typically pays for long-term care while Medicare provides funding for short-term care following hospital discharge. Many nursing homes limit the number of dedicated Medicaid beds in their facilities in order to control the number of low-reimbursing, long-term Medicaid patients admitted.

Table 21 summarizes the number of nursing home beds and occupancy rates of the eight facilities in St. Johns County. Six of the eight nursing homes are located in St Augustine. Occupancy rates are rapidly approaching full capacity and no new beds will be approved until July 2006.

Table 21 Free Standing Community Nursing Homes, 2004

		Total Census	Total Census		Medicaid	Medicare
Easility Nama	Licensed Beds	Days	Days 2000	Occupancy Rate 2004	Rate 2004	Rate 2004
Facility Name	Deus	2004	2000	Kate 2004	2004	2004
*Glenmore Healthcare	30	9,312	N/A	84.8%	0.0%	25.6%
Moultrie Creek Nursing & Rehab						
Center	120	42,172	42,482	96.0%	62.1%	18.0%
Ponce De Leon Care Center	120	41,046	41,356	93.5%	62.7%	25.3%
Samantha R. Wilson Senior						
Citizens Home	120	41,857	41,479	95.3%	53.9%	30.1%
St. Augustine Health & Rehab						
Center	120	41,907	37,011	95.4%	72.6%	13.0%
St. Johns HealthCare Center	68	21,761	21,202	87.4%	56.8%	16.4%
Vicar's Landing Nursing Home	60	18,689	19,236	85.1%	0.0%	7.0%
Westminster Woods on Julington						
Creek	60	19,975	18,802	95.7%	44.6%	12.3%

Source: Health Planning Council of Northeast Florida, Calendar Year 2004

Note: Licensed 11/19/01

No Certificate of Need (CON) for additional nursing home beds shall be approved until 7-1-06

Assisted Living Facilities

Assisted Living Facilities (ALFs) provide a residential setting where a group of older or disabled persons unable to live independently receive room, meals, and variety of personal supportive services. ALF fees vary greatly depending on the location, amenities, size of the units and services provided. Because neither Medicaid nor Medicare pays for ALF care, the vast majority of ALF residents use private funds to pay for their care.

There are a total of 12 ALFs in St. Johns County, including 10 in St. Augustine (Barrington at Glenmoor, Buckingham Smith Assisted Living Facility, Coral Landing Assisted Living Residences, Grafton House, Loving Care Living Facility, Our Family & Friends, Park Place of St. Augustine, Pavilion at Bayview, Sefton Park Lodge, Stephens Memorial Home. There is one ALF in Ponte Vedra Beach (The Stratford) and one in the Julington Creek area (Westminster Woods on Julington Creek).

VI. OTHER HEALTH CARE SERVICES

Appendix B includes a list of health care services and agencies in St. Johns County, including home health agencies, EMS, ambulatory care centers, dialysis centers, and rehabilitative services. In addition, an inventory of mental health providers and services is also included at the end of Appendix B.

COMMUNITY COMMENTS

I. FOCUS GROUPS

Introduction

In the Summer of 2005, the Health Planning Council of Northeast conducted six focus groups for the St. Johns County health needs assessment. The purpose of these focus groups was to better understand the views and opinions of St. Johns County residents about the quality of life in their community. This report will outline the focus group methodology, demographics of participants as well as a summary of key themes identified in the focus group discussions.

Focus Group Methodology

A set of questions was developed for the focus groups to explore how residents felt about the quality of life in St. Johns County. The focus group instrument was used in similar health needs assessments in surrounding counties. A copy of the focus group questions that were used are included as Appendix C-1

Focus groups were scheduled by staff at the St. Johns County Health Department and Health Planning Council through the assistance of members from the St. Johns County Community Health Assessment Task Force. Efforts were made to target existing groups that were already meeting throughout the county.

Six focus groups were conducted during July of 2005. The size of the focus groups ranged from 7-17 participants, with a total of 61 participants. A list of the focus group locations, as well as the number of participants in each group is summarized below:

- 1. West St. Augustine Community Redevelopment Agency (CRA): 17 participants
- 2. First Baptist Church of Armstrong (Elkton): 7 participants
- 3. Council on Aging (St Augustine): 10 participants
- 4. Mt. Moriah Missionary Baptist Church (Hastings): 10 participants
- 5. Flagler Estates Community Redevelopment Agency: 9 participants
- 6. Foster Parents (St. Augustine): 8 participants

Focus groups were moderated by a staff member from the Health Planning Council and handwritten notes were taken during each of the groups to ensure that no comments were missed. Notes were carefully reviewed to explore participants' comments and discover whether similar concerns and opinions were voiced by St. Johns County residents. A summary of common themes each of the focus groups discussions is included in this section.

Demographics

Over 60% of focus group participants were female and over 60% were non- white, providing excellent representation from the minority community in the focus group discussions. Approximately 38% of participants were age 40-54 and another 16% were age 65 and older, which matched the elderly population of St. Johns County. Nearly 50% of the participants worked full-time and over a third were retirees

The majority of participants reported having health insurance through their job or member's job or had Medicare. More detailed demographic information is included below.

DEMOGRAPHICS OF FOCUS GROUP PARTICIPANTS

Summary of Focus Group Discussions

A summary of each of the six focus group discussions is provided below:

ZIP CODE	Total Responses	Percent
32033	8	13.1%
32080	2	3.2%
32082	2	3.2%
32084	23	37.7%
32086	4	6.6%
32145	21	34.4%
Unknown	1	1.6%
Total	61	100%

AGE GROUP	Total Responses	Percent
Under 18 years old	0	0
18 – 25	0	0
26 - 39	5	8.2%
40 - 54	23	37.7%
55 – 64	15	24.6%
65 – 74	13	21.3%
75+	5	8.2%
Total	61	100%

GENDER	Total Responses	Percent
Male	24	39.3%
Female	37	60.7%
Total	61	100%

RACE/ETHNICITY	Total Responses	Percent
African American/Black	34	55.7%
Asian/Pacific Islander	0	0%
Caucasian/White	24	39.3%
Hispanic/Latino	1	1.6%
Native American	1	1.6%
Mixed	1	1.6%
Total	61	100%

EMPLOYMENT STATUS	Total Responses	Percent
Working Full-Time	29	47.5%
Working Part-Time	3	4.9%
Student	0	0
Unemployed	0	0
Home Maker	2	3.2%
Retired	23	37.7%
Other	4	6.6%
Total	61	100%

HOW IS HEALTH CARE COVERED: (check all that apply)	Total Responses
Health insurance offered from your job or a family member's job	33
Health insurance you pay for on your own	6
Medicare	21
Medicaid	6
Veteran's Administration	4
Military Coverage	3
I don't have health insurance	6

Summary of Focus Group Discussions

A). West St. Augustine Redevelopment Agency

- There are plans to build a new multi-purpose community center
- Number of issues in this community (safety concerns, environmental health, crime, poverty)
- "Weed and Seed" community
- Lack of affordable day care
- Teenagers skipping school is a problem
- There are many residents in West St Aug who do not have health insurance, their voice is not heard
- Overall feeling of group that more services and resources need to be offered in West St Augustine

Health Programs/Services Needed:

- Mental health services
- Prenatal education and counseling, especially for teen mothers
- Dental services for the uninsured
- Vision services
- HIV prevention/education
- Early testing for juvenile diabetes
- Health education to prevent childhood obesity
- Need a location to provide the above services/programs- new community center

B). First Baptist Church of Armstrong (Elkton)

- Not enough activities for children
- Transportation is an issue for many families (children, elderly, and other residents who don't drive or have their own vehicles)
- Church plays an important role in the community, but it can't be everything to everyone (limited resources/space)
- Health care is not available for people without insurance or the working poor
- Health Dept does a great job offering health education and outreach to the Armstrong community
- Dental clinic at the elementary school is used by many families-residents greatly appreciate this service and its location

Health services/programs needed:

- Outpatient primary care clinic
- More mobile health services bring services to the people
- Vision care
- Sickle cell anemia education/awareness
- Need a multi-purpose community center to offer variety of services
- Offer more health screenings (diabetes, blood pressure, body fat, cholesterol)- screenings are very important in this community
- Need to provide more mental health services and education for children, parents and/or caregivers
- Increase health promotion/education in the schools

C). Council on Aging (St Augustine)

- Overall, group is satisfied with quality of life for the elderly
- Would like to see more interaction between the elderly and youth in the community
- COA van is very helpful for many elderly residents but transportation is still an issue, especially for elderly living in Hastings and Flagler Estates
- Need more affordable housing for elderly
- Concern that there is a growing number of sex offenders, worried about the safety of the children
- Prescriptions are very expensive. COA offers Drug Assistance Program which is very helpful though not everyone qualifies due to income requirements

D). Mt. Moriah Missionary Baptist Church (Hastings)

- Overall, feel that Hastings is a neglected area of the county.
- Numerous health problems and health care access issues.
- Transportation is a problem for many residents
- Would like to see COA open a new site in Hastings (many elderly residents are not comfortable traveling to St Aug)
- Need for affordable, quality housing
- Crime is an ongoing issue (police need to be more visible)
- Medical Specialists in Hastings is used by many residents, but there is concern about funding changes
- Concern about vending machines in schools, students are not making healthy choices

Health Services/Programs Needed:

- Parenting skills class
- Wellness class/nutrition class involving the whole family (parents and children together)
- Pregnancy/prenatal classes; more teen prevention efforts
- Dialysis center
- Local pediatrician
- Dental care for adults
- Local pharmacy
- Better water testing

E). Flagler Estates Community Redevelopment Agency (Hastings)

- Some residents feel the crime rate has improved over the last year, others do not see a difference
- Churches play an important role in the community
- Concern that there is not a Baker Act facility in the county
- Many residents go to Palatka for their health care needs
- Need more mobile health services
- Transportation to health services is a huge issue
- Adult dental care is another problem
- Asthma is an issue for many children in this community
- Good Samaritan Clinic- 6 month waiting list

F). Foster Parents (St. Augustine):

- Concern that there nurses are not in all of the public schools
- Not enough affordable housing for the elderly
- Lack of public transportation in western and southern portions of the county
- Concern about safety of children (sexual predators, congested roads near bus stops, neighbors don't know each other anymore)
- Many physicians will not accept Medicaid growing issue.
- Access to dental services for adults is another problem; dental services for children are great
- Flagler Hospital ER very slow, waiting list to get into VA clinic
- Youth drug use and drinking is a growing problem

Health Services/Programs Needed:

- Need more mental health services (6-8 week wait for appt).
- Need more P.E. in the schools
- Need to have more health services for the uninsured, especially dental care.

II. COMMUNITY SURVEY

Survey Design and Distribution

The purpose of the survey was to capture the opinions and concerns from St. Johns County residents about the health of their community. Existing community surveys were reviewed that incorporated the MAPP Model (Mobilizing for Action through Planning and Partnerships). MAPP is a community-wide strategic planning tool for improving community health and assists communities prioritize public health issues and identify resources for addressing them. The St. Johns County Health Department selected a MAPP survey that was used by other local communities during previous needs assessments. The survey was then revised to specifically address the needs of St. Johns County. A copy of the survey instrument in included as Appendix C-2.

Surveys were distributed throughout the county in June of 2005 and continued to be circulated through September. Surveys were collected at the county health department centers, local churches, Council on Aging sites, Flagler Hospital and Baptist Health-South, Chamber of Commerce, mental health and substance abuse agencies, public schools, and other groups and organizations in St. Johns County. In addition, an online version of the survey was advertised in on websites of numerous agencies and public libraries for those residents with Internet access. A total of 1,051 surveys were collected and analyzed.

Demographics of Survey Respondents

The majority of the respondents who completed the surveys were females. Nearly 30% of survey respondents were age between the ages of 26-39 and another 27% of respondents were between the ages of 40-54, which represent the largest age groups of St. Johns County. Approximately 15% of survey respondents were over the age of 65, which matches the county's elderly population. Almost 25% of respondents were non-white, providing a good representation from the minority community. With regard to ethnicity, 3.6% of survey respondents were Hispanic, which closely matched the county's Hispanic population of 4.3%.

Geographically, there was a wide range of participants living throughout St. Johns County, including good representation from Hastings and St. Augustine. Approximately half of participants were employed full-time and 9.3% reported being unemployed, which exceed the county's unemployment rate of 3.7%. Over 40% reported having a high school diploma or GED as their highest level of education completed and 18% reported having a 4 year college degree. Approximately 37% reported household incomes under \$20,000. A detailed summary of information obtained from the demographic section of the survey is included in this report.

Survey Analysis

A total of 1,051 surveys were entered into an electronic database software program. Descriptive statistics were used to summarize the survey questions and data tables with frequencies and percentages are included in this section. A summary of all other written in comments by survey

respondents is included as Appendix C-3. The following section summarizes the top 5 selections for St. Johns County residents.

1. How do you rate your overall health? (check one selection)

St. Johns County	Total Responses	Percent
Excellent	234	23.2%
Good	570	56.5%
Fair	160	15.9%
Poor	25	2.5%
Don't Know	19	1.9%
Total	1,008	100%
Not Available	43	

2. Check up to 5 selections you feel are the most important features of a healthy community:

Top 5	Total Responses
Access to healthcare	700
Clean and healthy environment	554
Good education	490
Low crime rates/safe neighborhoods	486
Good jobs, healthy economy	476

All other responses, based on the total number of responses for each category

Category	Total Responses
Good place to raise kids	437
Affordable and/or available housing options	380
Access to churches or other places of worship	375
Access to parks and recreation	239
Preventative health care (annual check-ups)	219
Access to public transportation	200
Affordable childcare	172
Good place to grow old	172
Absence of discrimination	162
Access to social services	153
Other	21
Not Available	12

3. Check up to 5 of the health problems that you feel are the most important in Clay County:

Top 5	Total Responses
Addiction – alcohol or drug	454
Cancers	370
Heart disease and stroke	326
Child abuse/neglect	295
Smoking/tobacco use	282
HIV/AIDS/STD's	282

All other responses, based on the total number of responses for each category

Category	Total Responses
Diabetes	275
Mental health problems	271
Adult obesity	249
High blood pressure	241
Domestic violence	219
Childhood obesity	215
Teenage pregnancy	199

Other Responses (Cont'd)	Total Responses
Dental problems	192
Asthma	164
Respiratory/lung disease (COPD, emphysema)	164
End of life care (nursing homes, hospice)	150
Contagious diseases (flu, pneumonia)	146
Environmental health, sewers, septic tanks	125
Rape/sexual assault	109
Motor vehicle crash injuries	25
Other	25
Not Available	23

4. Check up to 3 behaviors you are most concerned about in Clay County:

Top 5 Category	Total Responses
Drug abuse	542
Alcohol abuse	389
Being overweight	314
Dropping out of school	298
Tobacco use	256

All other responses, based on the total number of responses for each category

Category	Total Responses
Teen sexual activity	252
Unsafe sex	239
Unlicensed and/or unsafe drivers	234
Lack of exercise	224
Poor eating habits	162
Not using birth control	114
Discrimination	112
Not getting shots to prevent disease	109
Other	19
Skipped This Question	20

5. What health care services are difficult to obtain in your community?

et in the first terms of the services and any terms to be the time	<i>y = 11.</i>
Top 5 Category	Total Responses
Dental/oral care	427
Prescriptions/medications/medical supplies	255
Mental health/counseling	241
Primary care	198
Specialty care	197

All other responses, based on the total number of responses for each category

Category	Total Responses
Emergency room care	193
Vision care	189
Substance abuse services-drug and alcohol	182
Alternative therapy (herbals, acupuncture)	170
Preventative care (annual check-ups)	160
Family planning/birth control	97
Lab work	96
Inpatient hospital	90
X-rays/mammograms	89
Physical therapy, rehab therapy	87
Other	59
None of the above	187

6. How do you rate the quality of health services in St. Johns County?

St. Johns County	Total Responses	Percent
Excellent	84	8.2%
Good	466	45.4%
Fair	351	34.3%
Poor	67	6.5%
Don't Know	56	5.5%
Total	1,024	100%
Not Available	27	

7. What do feel are barriers for you in getting healthcare?

Top 5 Barriers	Total Responses
Can't pay for doctor/hospital visits	359
Long wait for appointments	352
Lack of evening and week-end services	298
Don't know what types of services are available	180
Can't find providers that accept my insurance	179
Have no regular source of healthcare	169
Lack of transportation	129
None of these apply – I don't have any barriers	262
Other	39

8. When you need to use prescription medications for an illness, do you (check all that apply)

Category	Total Responses
Have your prescription filled at the drugstore or supermarket	837
Buy over-the-counter medicine instead	187
Go without medicine	183
Got to the hospital emergency room	123
Use leftover medication prescribed for a different illness	93
Use medication of friends or family	77
Use herbal remedies instead	71
Get medications from sources outside the country	39
Not Available	36

9. How is your health care covered? (check all that apply)

Category	Total Responses
Health insurance offered from your job or a family member's job	443
Medicaid	208
I don't have health insurance	195
Medicare	182
Health insurance that you pay for on your own	126
Military coverage/VA	71
Other	17
Not Available	20

10. Where would you go if you are sick? (check one)

Categories	Total	Percent
	Responses	
Your doctor's office	573	55.7%
Hospital emergency room in St. Johns County	191	18.68.
Local health department	85	8.3%
Flagler Hospital Primary Care	75	7.3%
No where – I don't have a place to go when I get sick	44	4.3%
Other	31	3%
Hospital ER outside St. Johns	30	2.9%
Total	1,029	100%
Not Available	22	

11. Where would you go if your children/dependents are sick? (check one)

	Total	Percent (%)
Categories	Responses	
Their doctor's office	405	40.3%
Don't have children/dependents	187	18.6%
Local Health Department	167	16.6%
Hospital emergency room in St. Johns County	150	14.9%
Flagler Hospital Primary Care	38	3.8%
Hospital emergency room outside St. Johns County	32	3.2%
Other	13	1.3%
No where – we don't have a place to go when we get sick	12	1.2%
Total	1,004	100%
Not Available	47	

DEMOGRAPHICS

Area of County	Total Responses	Percent
St Augustine		
32080	131	13.2%
32084	290	29.2%
32085	12	1.2%
32086	208	20.9%
32092	75	7.6%
32095	46	4.6%
SubTotal	762	76.7%
Southwestern St. Johns		
32145	111	11.2%
32033	58	5.8%
Sub-Total	169	17%
Northern St. Johns		
32259	33	3.3%
32082	29	2.9%
Sub-Total	62	6.2%
_		
Total	993	100%
Not Available	58	

AGE GROUPS	Total Responses	Percent
18-25	162	15.8%
26-39	300	29.3%
40-54	273	26.6%
55-64	134	13.1%
65-74	81	7.9%
75+	75	7.3%
Total Respondents	1,025	100%
Not Available	26	

GENDER	Total Responses	Percent
Female	228	23.2%
Male	751	76.7%
Total Respondents	979	100%
Not Available	72	

RACE/ETHNICITY	Total Responses	Percent
Black/African American	186	18.1%
Hispanic	37	3.6%
Native American	17	1.7%
White/Caucasian	774	75.5%
Asian/Pacific	7	0.7%
Other	4	0.4%
Total	1,025	100%
Not Available	26	

EDUCATION	Total Responses	Percent
Elementary/Middle School	61	6%
High School Diploma or GED	410	40.5%
Technical/Community College	235	23.2%
4 Year College/Bachelor's Degree	185	18.3%
Graduate/Advanced Degree	122	12%
Total Respondents	1,013	100%
Not Available	38	

EMPLOYMENT STATUS	Total Responses	Percent
Employed Full-Time	511	49.4%
Retired	160	15.5%
Employed Part-Time	101	9.8%
Unemployed	96	9.3%
Retired	84	8.1%
Home Maker	47	4.5%
Student	18	1.7%
Other	18	1.7%
Total Respondents	1,035	100%
Not Available	16	

HOUSEHOLD INCOME	Total Responses	Percent
Less Than \$10,000	157	16.4%
\$10,000 - \$19,999	200	20.8%
\$20,000 - \$29,999	175	18.2%
\$30,000 - \$49,999	189	19.7%
\$50,000 - \$74,999	106	11%
\$75,000 - \$99,000	72	7.5%
\$100,000 or more	61	6.4%
Total Respondents	960	100%
Not Available	91	

Survey Results by Select Zip Codes

In effort to look more closely at survey responses by region of the county, an analysis was done on select zip codes of the county, including the Hastings area (32145) and lower-income area of St. Augustine (32086 and 32095). The top choices for survey response as ranked by residents of these zip codes is included as Appendix C-4.

KEY ISSUES AND RECOMMENDATIONS

I. INTRODUCTION

Members of the St. Johns County Health Assessment Task Force reviewed the information presented during the six month needs assessment process and identified key issues and recommendations. Information that was reviewed by the task force included an analysis of the demographics, health statistics and access to care indicators for county residents. In particular, they examined key death and disease rates, maternal and child health indicators, hospital utilization data and behavioral risk factor survey data. Community input in the form of focus groups and a community wide survey were also examined by the task force.

II. KEY ISSUES/RECOMMENDATIONS

Key findings included age adjusted death rate data showed that St. Johns County has high rates in Chronic Obstructive Pulmonary Disease (COPD) for the general population and high death rates in Influenza and Pneumonia, and unintentional injuries/motor vehicle accidents and infant mortality in the nonwhite population. The Behavior Risk Factor Surveillance Survey showed that St. Johns County had a higher percentage of the population who smoked and drank alcohol than the state average. The high drinking rate may have an impact on domestic violence, motor vehicle accidents and other unintentional injuries. Key findings from the focus groups include access issues to mental health services and dental care as well as transportation for those living outside of St. Augustine. Cost of prescriptions and medical services were also an issue for those without insurance coverage.

Task Force members then prioritized these issues and developed recommendations and action steps. Many of these recommendations can be implemented in partnership with existing community groups such as the Health and Human Services Advisory Board and the PACT Prevention Coalition.

Recommendation 1: Expand adult oral health care services and resources to more residents of St. Johns County.

Activity Steps	Referred to:
1) Determine what dental insurance options are available and acceptable	Dental Society
to local dentists and inform community about these options.	and St. Johns
2) Implement social marketing campaign targeting dental education and	County Health
promotion of preventative dental care.	Dept. (SJCHD)
3) Expand volunteer dental program (retired dentists and other retired	for steps # 1,2,&3
dental care professionals) or donated services at local dentist offices.	
4) Explore funding opportunities for adult dental care through grants and	
other sources.	
a) Consider making oral health care a priority area for the Health	HHSAB
and Human Services Advisory Board (HHSAB).	

Recommendation 2: Focus efforts on substance abuse prevention and education for alcohol, tobacco and other drugs.

Activity	Steps	Referred to:
1)	Provide prevention education and awareness for adolescent substance	PACT, HHSAB
	abuse.	
2)	Explore effective smoking cessation programs that include patches,	Flagler Hospital,
	medications, and other aides that are affordable and will promote	Cancer Society
	long-term success.	
3)	Partner with schools, law enforcement, businesses, and parents to	PACT, HHSAB
	promote stricter enforcement of liquor and tobacco sales to minors as	
	well as enforcing smoke-free environment on school grounds.	
4)	Expand mental health services to cover full spectrum of services,	HHSAB
	from prevention through after-care programs.	

Recommendation 3: Improve access to health services in outlying areas of St. Johns County through coordination of public transportation.

Activity Steps	Referred to:
1) Improve advertising and marketing of transportation options to the	Transportation
public, including Council on Aging Services.	Task Force
a) Explore the need to change current bus routes/schedules.	
b) Explore the use of cab vouchers.	
2) Identify county commissioner's priorities for:	Transportation
a) Multi-county, cross county transportation	Task Force
b) Transportation for the disadvantaged	
3) Explore funding sources for dental/medical mobile health units to	Major health
provide health care in rural areas of the county. Possible partners	providers & civic
include Flagler Hospital, St. Vincent's, St. Johns County Health	organizations
Department, Medical Society and/or Dental Society.	
4) Explore the use of the old Hastings elementary school as a health and	County Govt,
social service center.	Patient Centered
	Health Network

EXECUTIVE SUMMARY

he Florida Legislature's 1999 Drug Control Summit recommended the establishment of an annual, multi-agency-directed, statewide school-based survey effort, combining several survey instruments, with specific variations in odd and even years. The *Florida Youth Substance Abuse Survey (FYSAS)*, one of these instruments and the focus of this report, is administered to a county-level sample of students in even years, and a smaller statewide sample in odd years.

The FYSAS is based on the Communities That Care® Youth Survey, developed from the nationally recognized work of Dr. J. David Hawkins and Dr. Richard F. Catalano. It not only measures the prevalence of alcohol, tobacco and other drug use and delinquent behavior, but also measures the risk and protective factors related to these behaviors.

The 2004 FYSAS was administered to 1,113 St. Johns County students in grades 6 through 12 in the spring of 2004. The results supply a valuable source of information to help reduce and prevent the use of alcohol, tobacco and other drugs by school-aged youth.

Key Survey Results

Strengths to Build on

- Marijuana use has declined in St. Johns County. Overall lifetime marijuana use has gone from 34.9% in 2000 to 27.3% in 2004. Overall past-30-day marijuana use has gone from 19.4% in 2000 to 15.3% in 2004.
- Surveyed students reported a substantial reduction in past-30-day cigarette use. The rate dropped from 23.2% in 2000 to 13.3% in 2004.
- Past-30-day prevalence rates for Ecstasy (1.0%), Rohypnol (0.4%), GHB (0.8%), ketamine (0.1%), methamphetamine (0.6%), crack cocaine (0.7%), heroin (0.4%) and steroids (1.0%) are all 1.0% or less.
- Relatively few students reported that they would be seen as "cool" by their peers if they drank alcohol regularly (12.0%), smoked cigarettes (4.9%) or smoked marijuana (11.3%).
- A substantial proportion of students indicated that it would be "wrong" or "very wrong" for someone their age to smoke cigarettes (74.8%), smoke marijuana (76.4%) or use other illicit drugs (93.9%).
- A majority of respondents reported that each of the following behaviors poses a "great risk" of harm: smoking a pack or more of cigarettes per day (70.6%) and regular use of marijuana (62.4%).
- Students reported particularly low percentile scores for two risk factor scales that are directly associated with alcohol, tobacco and other drug use: Perceived Availability of Drugs and Handguns (39) and Low Perceived Risks of Drug Use (38).
- Prevalence rates for *Carrying a Handgun* (3.6%), *Attempting to Steal a Vehicle* (3.4%) and *Taking a Handgun to School* (1.1%) are all less than 5.0%.

Opportunities for Improvement

• With overall prevalence rates of 60.6% for lifetime use and 36.2% for past-30-day use, alcohol is the most commonly used drug among St. Johns County students.

- Binge drinking (defined as the consumption of five or more drinks in a row within the last two weeks) is more prevalent than past-30-day tobacco, marijuana and other illicit drug use.
- After alcohol, students reported cigarettes (36.4% lifetime and 13.3% past-30-day) and marijuana (27.3% lifetime and 15.3% past-30-day) as the most commonly used drugs. Prevalence rates for other drugs are substantially lower.
- More than one student out of every 10 reported lifetime use of depressants (10.1% lifetime and 4.2% past-30-day) or other prescription pain relievers (10.4% lifetime and 4.4% past-30-day).
- St. Johns County students reported one of their highest percentile scores for the community risk factor scale *Personal Transitions and Mobility* (66). This means that students are less likely to become involved with prosocial organizations and positive role models in their communities.
- St. Johns County students reported some of their lowest percentile scores for two reward-based protective factor scales: *School Rewards for Prosocial Involvement* (42) and *Community Rewards for Prosocial Involvement* (48). This means that schools and communities need to provide additional positive feedback to students, to help them form prosocial bonds in their schools and communities.
- Of surveyed St. Johns County students, 15.5% reported *Getting Suspended*, 12.8% reported *Attacking Someone* with *Intent to Harm* and 15.0% reported *Being Drunk or High at School*.

These key findings illustrate the complexity of drug use and antisocial behavior among St. Johns County's youth and the possible factors that may contribute to these activities. While some of the findings compare favorably to the national findings, St. Johns County youth are still reporting drug use and delinquent behavior that will negatively affect their lives and our society.

The FYSAS data will enable St. Johns County's planners to learn which risk and protective factors to target for their prevention, intervention and treatment programs.

Summary Report from 2002 County Behavior Risk Factor Surveillance System Survey

Bureau of Epidemiology, Florida Department of Health

The 2002 County Behavior Risk Factor Surveillance System Survey (BRFSS) was conducted in September 2002 through January 2003. Approximately 500 adults were randomly selected and interviewed in each county. The purpose of this telephone survey was to obtain county-level estimates of the prevalence of personal health behaviors that contribute to morbidity and mortality. These estimates might differ slightly from estimates obtained through the 2002 Florida State BRFSS because sampling methods of the two surveys were different. Data in this report can be used to make comparisons between counties and the state overall on a variety of health-related issues. These data can also be used to: (1) prioritize health issues and identify populations at highest risk for illness, disability, and death; (2) plan and evaluate prevention programs; (3) educate the community and policy makers about disease prevention; (4) support community policies that promote health and prevent disease.

	Population Size and Health Status		
Area	Population	Number of adults surveyed	Health Status is Fair or Poor
Baker	22,259	503	24.0%
Clay	140,814	507	16.0%
Nassau	57,663	503	18.4%
St. Johns	123,135	507	12.9%
Florida	15,982	34,551	16.7%

	Risk Factor: Physical Activity				
	No leisure time				
Area	physical activity	physical activity (1)	physical activity (2)		
Baker	34.5%	60.9%	81.9%		
Clay	26.1%	52.3%	72.4%		
Nassau	25.2%	54.9%	79.0%		
St. Johns	18.0%	46.6%	71.4%		
Florida	26.4%	55.1%	75.6%		

⁽¹⁾ People who do not engage in regular moderate physical activity (at least 30 minutes a day and 5 days a week) or regular vigorous physical activity (at least 20 minutes a day and 3 days a week).

⁽²⁾ People who do not engage in regular vigorous physical activity (at least 20 minutes a day and 3 days a week).

	Risk Factor: Overweight and Nutrition		
Area	Overweight (3)	Obese (4)	Less than 5-A-Day (5)
Baker	30.8%	25.5%	82.0%
Clay	35.1%	25.8%	72.0%
Nassau	37.7%	26.9%	76.6%
St. Johns	33.9%	16.4%	70.9%
Florida	35.1%	22.3%	74.3%

⁽³⁾ People with a Body Mass Index (BMI) between 25 and 30.

⁽⁴⁾ People with a Body Mass Index (BMI) equal to or greater than 30.

⁽⁵⁾ People who consume less than 5 servings of fruits and vegetables a day.

APPENDIX A-2

	Risk Factor: Tobacco and Alcohol Use		
Area	Current Smoker (6)	Ever quit smoking in	Engage in heavy or binge
		the past 12 months	drinking ⁽⁷⁾
Baker	29.2%	51.9%	13.4%
Clay	23.2%	50.5%	14.7%
Nassau	19.5%	57.0%	12.7%
St. Johns	22.2%	45.1%	22.3%
Florida	17.6%	55.3%	16.4%

⁽⁶⁾ People who have smoked at least 100 cigarettes in their lifetimes and who also smoked some days or every day in

the past month.

(7) People who have consumed 5+ drinks at one occasion in the past month (binge drinker) or men who have 2+ drinks every day or women who have 1+ drinks every day (heavy drinker).

	Risk Factor: Health Care Coverage and Access		
Area	No health care	No personal health	Unable to get medical
	coverage	care provider	care in past 12 months
Baker	20.5%	18.7%	8.2%
Clay	11.9%	18.4%	5.5%
Nassau	18.1%	18.6%	8.2%
St. Johns	17.9%	18.5%	6.9%
Florida	18.7%	23.9%	8.7%

	Oral Health		
Area	Visit a dentist	No teeth removed	Had teeth cleaned within
	within past year		past year
bAKER	60.2%	39.6%	60.7%
Clay	67.2%	56.1%	67.0%
Nassau	74.2%	46.0%	67.0%
St. Johns	75.8%	54.3%	73.8%
Florida	70.2%	46.7%	70.5%

	Chronic Health Conditions: Hypertension and Weight Control		
Area	Had high blood pressure (HBP)	Now taking HBP medication, if had HBP	Received advice about weight in past year
Baker	31.7%	78.3%	16.4%
Clay	25.4%	76.0%	20.9%
Nassau	29.4%	65.9%	21.1%
St. Johns	28.7%	75.5%	15.9%
Florida	27.7%	76.0%	21.1%

APPENDIX A-2

	Chronic Health Conditions: High Cholesterol		
Area	Ever had blood cholesterol checked	If yes, cholesterol checked in past 2	Blood cholesterol is high
	choicster or enecked	years	
Baker	79.4%	91.8%	34.3%
Clay	84.6%	90.0%	32.3%
Nassau	84.6%	92.2%	39.2%
St. Johns	86.1%	88.2%	30.0%
Florida	83.1%	91.8%	35.2%

	Chronic Health Conditions: Asthma & Diabetes							
Area	Ever had asthma	If yes, still have asthma	Have diabetes					
Baker	13.6%	73.7%	15.4%					
Clay	12.8%	73.1%	6.0%					
Nassau	13.8%	81.4%	7.4%					
St. Johns	9.2%	69.8%	7.8%					
Florida	10.7%	60.4%	8.2%					

Area	Chronic Health Cardiovascular Disease Prevention Being advised by a health professional to							
	Eat fewer higher fat or cholesterol food vegetables Eat more fruits and vegetables							
Baker	23.0%	30.3%	26.9%					
Clay	20.8%	21.3%	25.8%					
Nassau	20.6%	26.2%	29.9%					
St. Johns	17.2	22.7%	21.5%					
Florida	21.0%	27.9%	28.0%					

	Preventive Health Behaviors: Annual Flu and One-Time Pneumonia Shot						
Area	Received flu shot within past 12 months	Received flu shot at county health dept	Ever had a pneumonia shot				
Baker	22.4%	4.4%	20.4%				
Clay	26.0%	1.1%	18.8%				
Nassau	23.7%	1.5%	18.6%				
St. Johns	28.6%	2.2%	24.1%				
Florida	26.2%	1.2%	22.7%				

APPENDIX A-2

	Preventive Health Behaviors: Mammograms & Pap Smear Tests							
Area	For women age 40+:	All adult Women:	All Adult Women:					
	Had mammogram	Ever had Pap smear	Had Pap smear test in					
	in past 2 years	test	past 2 years					
Baker	68.0%	97.2%	77.9%					
Clay	84.0%	97.6%	87.7%					
Nassau	75.3%	97.0%	82.0%					
St. Johns	89.5%	98.6%	89.4%					
Florida	79.0%	93.5%	82.2%					

Area	Preventive Health Behaviors: Colorectal Screening For respondents 50 years and older						
	Ever had blood stool Had blood stool test in Ever had sigmoidoscopy						
	test	past 2 years					
Baker	45.0%	38.1%	60.4%				
Clay	36.8%	25.4%	52.2%				
Nassau	44.3%	32.9%	51.8%				
St. Johns	50%	36.5%	64.8%				
Florida	44.4%	33.5%	52.6%				

Area	Preventive Health Behaviors: HIV/AIDS Tests For respondents 64 years and younger						
	Ever been tested for HIV	If yes, the test was done in the past 2 years	In the past 12 months, health professional talked to you about preventing sexually transmitted diseases through condom use.				
Baker	49.8%	66.9%	14.9%				
Clay	45.0%	59.5%	8.1%				
Nassau	42.4%	51.0%	12.3%				
St. Johns	45.5%	53.9%	7.3%				
Florida	47.7%	65.6%	16.3%				

ST JOHNS COUNTY HEALTH RESOURCES						
SPECIALISTS	<u> </u>					
Last	First	Title	Address	Area of Specialty	Hospital Affiliation	
Mas	Juan	MD	St Augustine	Allergy/Immunology	Flagler Hosp	
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Baker	Howard	MD	St Augustine	Cardiology	Flagler Hosp	
George	Ferris	MD	St Augustine	Cardiology	Flagler Hosp	
Goel	Mukesh	MD	St Augustine	Cardiology	Flagler Hosp	
Greene	Trevor	MD	St Augustine	Cardiology	Flagler Hosp	
Kelsey	Robert	MD	St Augustine	Cardiology	Flagler Hosp	
Matthews	Laurence	MD	St Augustine	Cardiology	Flagler Hosp	
Platko	Willim	MD	St Augustine	Cardiology	Flagler Hosp	
Saikaly	B.S.	MD	St Augustine	Cardiology	Flagler Hosp	
Signor	Robert	MD	St Augustine	Cardiology	Flagler Hosp	
Sikaria	Krishna	MD	St Augustine	Cardiology	Flagler Hosp	
Tutar	Ali	MD	St Augustine	Cardiology	Flagler Hosp	
Muehrcke	Derek	MD	St Augustine	Cardiothoracic Surgery	Flagler Hosp	
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Cheiken	David	MD	St Augustine	Dermatology	Other	
Gross	David	MD	St Augustine	Dermatology	Flagler Hosp	
Paley	Bruce	MD	St Augustine	Dermatology	Flagler Hosp	
Rabey	Craig	MD	St Augustine	Dermatology	Other	
Schiavone	Frank	MD	St Augustine	Dermatology	Other	
Robins	Douglas	MD	St Augustine	Dermatology	Other	
Shvartzman	Leonard	MD	St Augustine	Dermatology	Other	
Towne	Laura	MD	St Augustine	Dermatology	Other	
				- V		
Oesterle	Robert	MD	St Augustine	Endocrine	Flagler Hosp	
Shrestha	Anil	MD	St Augustine	Endocrine	Flagler Hosp	
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Mehrotra	Badri	MD	St Augustine	GI	Flagler Hosp	
Pineau	Ben	MD	St Augustine	GI	Flagler Hosp	
Rosado	Santiago	MD	St Augustine	GI	Flagler Hosp	
Soroka	Stuart	MD	St Augustine	GI	Flagler Hosp	
Villanueva	Steven	MD	St Augustine	GI	Flagler Hosp	
Amshel	Craig	MD	St Augustine	General Surgery	Flagler Hospital	
Eyyunni	Ram	MD	St Augustine	General Surgery	Flagler Hospital	
Gonzalez	Leopoldo	MD	St Augustine	General Surgery	Flagler Hospital	
Kluger	Warren	MD	St Augustine	General Surgery	Flagler Hospital	

Last	First	Title	Address	Area of Specialty	Hospital Affiliation
Kuntz	Luiz	MD	St Augustine	General Surgery	Flagler Hospital
Sadowski	George	MD	St Augustine	General Surgery	Flagler Hospital
Tessler	Michael	MD	St Augustine	General Surgery	Flagler Hospital
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Justice	Keith	MD	St Augustine	Hematology/Oncology	Flagler Hospital
Montgomery	Daniele	MD	St Augustine	Hematology/Oncology	Flagler Hospital
Qunitero	Ricardo	MD	St Augustine	Hematology/Oncology	Flagler Hospital
Streeter	Ruth	MD	St Augustine	Hematology/Oncology	Flagler Hospital
Warmuth	Marc	MD	St Augustine	Hematology/Oncology	Flagler Hospital
Ali	Syed	MD	St Augustine	Infectious Disease	Flagler Hospital
Manikal	Vivek	MD	St Augustine	Infectious Disease	Flagler Hospital
Caputo	Richard	MD	St Augustine	Nephrology	Flagler Hospital
Jayachandra	Paul	MD	St Augustine St Augustine	Nephrology	Flagler Hospital
Malik	Amir	MD	St Augustine St Augustine	Nephrology	Flagler Hospital
Mandal	Anil	MD	St Augustine St Augustine	Nephrology	Flagler Hospital
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Torres	Carlos	טועו	St Augustine	Nephrology	Flagler Hospital
Das	Amit	MD	St Augustine	Neurology	Flagler Hospital
Das Deshmukh	Vinod	MD	St Augustine St Augustine	Neurology	Flagler Hospital
Gerling	Gerard	MD	St Augustine St Augustine	Neurology	Flagler Hospital
Perumal	Amudha	MD	St Augustine St Augustine	Neurology	Flagler Hospital
Machado	Miguel	MD	St Augustine St Augustine	Neurosurgery	Flagler Hospital
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Hale	Patrick	MD	St Augustine	Opthalmology	Flagler Hospital
Hossain	TS	MD	St Augustine	Opthalmology	Flagler Hospital
Hund	Paul	MD	St Augustine	Opthalmology	Flagler Hospital
McLeod	Elizabeth	MD	St Augustine	Opthalmology	Flagler Hospital
Okatavec	William	MD	St Augustine	Opthalmology	Flagler Hospital
Staman	John	MD	St Augustine	Opthalmology	Other
Thompson	Todd	MD	St Augustine	Opthalmology	Flagler Hospital
Vassallo	John	MD	St Augustine	Opthalmology	Flagler Hospital
Winkler	Donald	MD	St Augustine	Opthalmology	Flagler Hospital
Johnson	Douglas	DMD	St Augustine	Oral and Maxillofacial Surgery	Flagler Hospital
Wells	Marvin	DMD	St Augustine	Oral and Maxillofacial Surgery	Flagler Hospital
Charles	Michael	MD	St Augustine	Orthopedic Surgery	Flagler Hospital
Dew	Douglas	MD	St Augustine	Orthopedic Surgery	Flagler Hospital

Last	First	Title	Address	Area of Specialty	Hospital Affiliation
Girouard	Allain	MD	St Augustine	Orthopedic/Spine Surgery	Flagler Hospital
Grimes	James	MD	St Augustine	Orthopedic Surgery	Flagler Hospital
Haycook	Brian	MD	St Augustine	Orthopedic/Spine Surgery	Flagler Hospital
Hort	Kurtis	MD	St Augustine	Orthopedic Surgery	Flagler Hospital
Machado	Miguel	MD	St Augustine	Orthopedic/Spine Surgery	Flagler Hospital
Northrup	Tod	MD	St Augustine	Orthopedic Surgery	Flagler Hospital
Risch	David	MD	St Augustine	Orthopedic Surgery	Flagler Hospital
Stanescu	Stefan	MD	St Augustine	Orthopedic Surgery	Flagler Hospital
Volk	Albert	MD	St Augustine	Orthopedic Surgery	Flagler Hospital
Bishai	S	MD	St Augustine	Othopedic-not surgery	Other
Depasquale	Kalpana	DO	St Augustine	Otolaryngology	Flagler Hospital
Eyyunni	Uma	MD	St Augustine	Otolaryngology	Other
Leake	Deirdre	MD	St Augustine	Otolaryngology	Flagler Hospital
Taliaferro	Cort	MD	St Augustine	Otolaryngology	Flagler Hospital
Witten	Bruce	MD	St Augustine	Otolaryngology	Flagler Hospital
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Deshmukh	Sunanda	MD	St Augustine	Pain Management	Flagler Hospital
Dieguez	Edward	MD	St Augustine	Pain Management	Flagler Hospital
Monzon	Raul	MD	St Augustine	Pain Management	Flagler Hospital
Patel	Jyoti	MD	St Augustine	Pain Management	Flagler Hospital
Stanescu	Elana	MD	St Augustine	Pain Management	Flagler Hospital
McGuire	James	MD	St Augustine	Plastic/Reconstruc Surgery	Flagler Hospital
Smith	Gregory	MD	PVB	Plastic Surgeon	Other
Rumsey	Cayce	MD	PVB	Plastic Surgeon	Other
Burk	Robert	MD	PVB	Plastic Surgeon	Other
Scioscia	Paul	MD	PVB	Plastic Surgeon	Other
Snyder	Brett	MD	PVB	Plastic Surgeon	Other
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Camp	Victoria	DPM	St Augustine	Podiatry	Flagler Hospital
Concha	Jose	DPM	St Augustine	Podiatry	Flagler Hospital
Cutler	Brett	DPM	St Augustine	Podiatry	Other
Efron	Barry	DPM	St Augustine	Podiatry	Flagler Hospital
Johnson	Richard	DPM	St Augustine	Podiatry	Flagler Hospital
Lagoutaris	Stratis	DPM	PVB	Podiatry	Other
Matey	Mark	DPM	St Augustine	Podiatry	Flagler Hospital
Miles	Dawn	DPM	St Augustine	Podiatry	Flagler Hospital
Militello	James	DPM	St Augustine	Podiatry	Flagler Hospital
Pearce	Beth	DPM	St Augustine	Podiatry	Flagler Hospital

Last	First	Title	Address	Area of Specialty	Hospital Affiliation
Pereira	Ryan	DPM	St Augustine	Podiatry	Flagler Hospital
Rodriguez	Rosana	DPM	St Augustine	Podiatry	Flagler Hospital
Sheets	Holly	DPM	St Augustine	Podiatry	Flagler Hospital
Simonson	David	DPM	St Augustine	Podiatry	Other
Weed	Jerry	DPM	St Augustine	Podiatry	Flagler Hospital
Husain	Kishwar	MD	St Augustine	Pulmonology	Flagler Hospital
Josephkutty	Sebastian	MD	St Augustine	Pulmonology	Flagler Hospital
Kubiet	Martin	MD	St Augustine	Pulmonology	Flagler Hospital
Prakash	Manoj	MD	St Augustine	Pulmonology	Flagler Hospital
Graham	David	MD	St Augustine	Radiation Therapy	Flagler Hospital
Kuruvilla	Anand	MD	St Augustine	Radiation Therapy	Flagler Hospital
Paryani	Shyam	MD	St Augustine	Radiation Therapy	Flagler Hospital
Scott	Walter	MD	St Augustine	Radiation Therapy	Flagler Hospital
Simmons	Dwelvin	MD	St Augustine	Radiation Therapy	Flagler Hospital
Thompson	Spencer	MD	St Augustine	Radiation Therapy	Flagler Hospital
Epstein	Howard	MD	St Augustine	Urology	Flagler Hospital
Lin	Wen	MD	St Augustine	Urology	Flagler Hospital
Scarpitti	Edward	MD	St Augustine	Urology	Flagler Hospital
Kluger	Warren	MD	St Augustine	Vascular/Thoracic Surgery	Flagler Hospital
Kuntz	Luiz	MD	St Augustine	Vascular/Thoracic Surgery	Flagler Hospital
Dehgan	Robert	MD	St Augustine	Sports Medicine	Other
Olazar	Cecilia	MD	PVB	Arthritis Clinic	Other
PRIMARY CARE					
Barros	Melchor	MD	St Augustine	Family Practice	Flagler Hospital
Batenhorst	Todd	MD	St Augustine	Family Practice	Flagler Hospital
Brian	Michael	MD	PVB	Family Practice	Other
Clonch	Linda	MD	St Augustine	Family Practice	Flagler Hospital
Connor	James	DO	St Augustine	Family Practice	Flagler Hospital
Davlantes	Thomas	MD	St Augustine	Family Practice	Mayo
Dobbertien		DO	SJCHD	Family Practice	SJCHD
Dolgin	Frederick	MD	St Augustine	Family Practice	Flagler Hospital
Drew	James	DM	PVB	Family Practice	Baptist
Feaster	Lina	MD	St Augustine	Family Practice	Flagler Hospital

Last	First	Title	Address	Area of Specialty	Hospital Affiliation
Fischer	Gary	MD	St Augustine	Family Practice	Flagler Hospital
Grimard	Brian	DO	St Augustine	Family Practice	Mayo
Gunn	Andrew	MD	St Augustine	Family Practice	Flagler Hospital
Hinman	Roy	MD	St Augustine	Family Practice	Flagler Hospital
Krueger	Lothar	MD	St Augustine	Family Practice	Flagler Hospital
Kudia	Ashfaq	MD	St Augustine	Family Practice	Flagler Hospital
Larson	Jan	MD	St Augustine	Family Practice	Mayo
McBrayer	Roy	MD	St Augustine	Family Practice	Mayo
McCaulie	John	MD	PVB	Family Practice	Baptist
Sanders	Michael	MD	St Augustine	Family Practice	Flagler Hospital
Swanson	Donald	DO	St Augustine	Family Practice	Other
Whitlock	Warren	MD	St Augustine	Family Practice	Flagler Hospital
Zub	Christopher	DO	St Augustine	Family Practice	Flagler Hospital
Tomlin	Thomas	MD	PVB	Family Practice	Other
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Tessler	Michael	MD	St Augustine	General Practice	Flagler Hospital
Ybanez	Sofia	MD	St Augustine	General Practice	Flagler Hospital
Freedman	Donald	MD	St Augustine	General Practice	Other
Budd	Gerard	MD	PVB	General Practice	Walk In Medical Care
Lowney	Maria	DO	PVB	General Practice	Walk In Medical Care
Eyerly		MD	SJCHD	General Practice	SJCHD
Ali	Syed	MD	St Augustine	IM	Flagler Hospital
Barakat	Mirna	MD	St Augustine	IM/Rheum	Other
Bhide	Vandana	MD	St Augustine	Internal Medicine/Pediatrics	Flagler Hospital
Borbely	Bernard	MD	St Augustine	Internal Medicine/Pulmonology	Flagler Hospital
Caputo	Richard	MD	St Augustine	IM	Flagler Hospital
Carmaes	Ernest	MD	St Augustine	IM	Flagler Hospital
De Lamerens	Goar	MD	St Augustine	IM	Flagler Hospital
Dobies	Barry	MD	St Augustine	IM	Flagler Hospital
Farhat	Jawad	MD	St Augustine	IM	Flagler Hospital
Frady	Walter	MD	St Augustine	IM	Flagler Hospital
Gibson	Gregg	MD	St Augustine	IM	Flagler Hospital
Harris	Jean	MD	St Augustine	IM	Flagler Hospital
Huang	Qixi	MD	St Augustine	IM	Flagler Hospital
Husain	Kishwar	MD	St Augustine	IM	Flagler Hospital
Husain	Shakiraa	MD	St Augustine	IM	Flagler Hospital
Jayachandra	Paul	MD	St Augustine	IM	Flagler Hospital
Josephkyutty	Sebastian	MD	St Augustine	Internal Medicine/Pulmonology	Flagler Hospital
Kubiet	Martin	MD	St Augustine	IM	Flagler Hospital

Last	First	Title	Address	Area of Specialty	Hospital Affiliation
Lim	Rosemarie	MD	St Augustine	IM	Flagler Hospital
Long	Mson	MD	St Augustine	IM	Flagler Hospital
Malik	Amir	MD	St Augustine	IM	Flagler Hospital
Mandal	Anil	MD	St Augustine	IM	Flagler Hospital
Manikal	Vivek	MD	St Augustine	IM	Flagler Hospital
Martinez	Carmen	MD	PVB	IM	Other
Marathe	SS	MD	St Augustine/Hastings	Internal Medicine/Nephrology	Flagler Hospital
Mehrotra	Badri	MD	St Augustine	IM	Flagler Hospital
Neerukonda	S	MD	St Augustine	IM	Flagler Hospital
Patel	Jignesh	MD	St Augustine	IM	Flagler Hospital
Perez	Myriam	MD	St Augustine	IM	Other
Prakash	Manoj	MD	St Augustine	Internal Medicine/Pulmonology	Flagler Hospital
Prakash	Radhika	MD	St Augustine	IM	Flagler Hospital
Renuart	Ronald	DO	PVB	IM	Baptist
Rozas	Joseph	MD	St Augustine	IM	Flagler Hospital
Shrestha	Anil	MD	St Augustine/Hastings	IM	Flagler Hospital
Torres	Carlos	MD	St Augustine	IM	Flagler Hospital
Vivero	Carmen	MD	St Augustine	IM	Flagler Hospital
Ybanez	Dino	MD	St Augustine	IM	Flagler Hospital
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Browning	Leanne	MD	St Augustine	Ob/Gyn	Flagler Hospital
Dupree	Robert	MD	St Augustine	Ob/Gyn	Flagler Hospital
Joyner	James	MD	St Augustine	Ob/Gyn	Flagler Hospital
Kirdnual	Amnath	MD	St Augustine	Ob/Gyn	Flagler Hospital
Larroude	Juan	MD	St Augustine	Ob/Gyn	Flagler Hospital
Maetozo	Sherri	MD	St Augustine	Ob/Gyn	Flagler Hospital
Mussallem	Anthony	MD	St Augustine	Ob/Gyn	Flagler Hospital
Whitney	Robert	MD	St Augustine	Ob/Gyn	Other
Wyninger		MD	SJCHD	Ob/Gyn	SJCHD
Yarian	Susan	MD	St Augustine	Ob/Gyn	Flagler Hospital
Dembrek	Barbara	CNM	St Augustine	Nurse-Midwifery	Flagler Hospital
Lelaidier	Gloria	CNM	St Augustine	Nurse-Midwifery	Flagler Hospital
Riccitello	Maureen	CNM	St Augustine	Nurse-Midwifery	Flagler Hospital
Weaver	Georgiann	CNM	St Augustine	Nurse-Midwifery	Flagler Hospital
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Anderson	Luis	MD	St Augustine	Pediatrics	Flagler Hospital
Bhargva	Hemant	MD	St Augustine	Pediatrics	Flagler Hospital
Buckley	Julie	MD	PVB	Pediatrics	Other
Capili	Angelita	MD	St Augustine	Pediatrics	Flagler Hospital

Last	First	Title	Address	Area of Specialty	Hospital Affiliation
Erickson		MD	SJCHD	Pediatrics (also IM)	SJCHD
Ghatta		MD	SJCHD	Pediatrics	SJCHD
Leadem	Paul	MD	St Augustine	Pediatrics	Flagler Hospital
Leadem	Shirley	MD	St Augustine	Pediatrics	Flagler Hospital
Mas	Miguel	MD	St Augustine	Pediatrics	Flagler Hospital
Ng	Raphael	MD	St Augustine	Pediatrics	Flagler Hospital
Ozdemir	Aleen	MD	PVB	Pediatrics	Other
Valdez	Maria	MD	PVB	Pediatrics	Other
Weise		MD	STCHD	Pediatrics	SJCHD
Yasin	Aliya	MD	St Augustine	Pediatrics	Flagler Hospital
Baptist Pediatrics-PV	В				
Atkins	Bethany	MD	PVB	Pediatrics	Baptist
Emanuel	Christopher	MD	PVB	Pediatrics	Baptist
Granat	lloyd	MD	PVB	Pediatrics	Baptist
Horn	Kenneth	MD	PVB	Pediatrics	Baptist
Lazoff	Stephen	MD	PVB	Pediatrics	Baptist
Paton	Matt	MD	PVB	Pediatrics	Baptist
Walker	Martha	MD	PVB	Pediatrics	Baptist
Fordan-Herman	Jennifer	MD	PVB	Pediatrics	Baptist

Last	First	Title	Address	Area of Specialty	Hospital Affiliation
DENTISTS					
Alberto	David	DMD	St Aug		
	Marshall	DMD			
Bailey	Eric	DMD	St Aug PVB		
Burgess					
Carrothers	Kelly	DDS	St Aug		
Cavallazzo	Paul	DDS	St Aug		
Chamberlain	Steven	DMD	St Aug		
Cowling	David	DMD	St Aug		
Delfelice	Michelle	DDS	St Aug		
Della Porta	John	DMD	PVB		
Depetris	Eric	DMD	St Aug		
Diaz	Frank	DMD	St Aug		
Dixon	Ronald	DMD	St Aug		
Domingoes	Michael	DDS	St Aug		
Ebert	Suzanne	DMD	PVB		
Elannan	Erica	DDS	St Aug		
Elias	Nidal	DDS	St Aug		
Evans	Pamela	DDS	PVB		
Forbes	Phillip	DDS	St Aug		
Fortus	Stephen	DDS	St Aug		
Glenos	Della	DDS	St Aug		
Glenos	William	DMD	St Aug		
Gordon	Jeremiah	DDS	St Aug		
Grosselin	Pierre	DDS	St Aug		
Hackney		DDS	SJCHD		
Hayes	Randolph	DMD	PVB		
Henderson	James	DDS	St Aug		
Howland	Ronald	DMD	PVB		
Hucke	Ronald	DMD	St Aug		
Johnson	Douglas	DMD	St Aug	Oral/Maxillofacial Surgery	
Joyner	John	DMD	St Aug		
Karol	Robert	DMD	PVB		
Kessler	Micheal	DDS	PVB		
Le		DDS	SJCHD		
Maroney	William	DDS	PVB		
Martin	Steven	DDS	St Aug		
McClellan	Barbara	DDS	St Aug		
McMlellan	Matt	DMD	St Aug		
Morse	William	DDS	St Aug	-	

Last	First	Title	Address	Area of Specialty	Hospital Affiliation
Mortemore	Tanya	DMD	St Aug	-	
Narvaez	Zita	DDS	St Aug		
Nadji	Holley	DDS	PVB		
Neal	Kevin	DDS	PVB		
Nguyen	Minh	DMD	St Aug		
Oxford	Isabell	DMD	St Aug		
Oxford	Gregory	DDS	St Aug	Peridontal Surgery	
Painter	Rex	DDS	St Aug		
Poulos	Steve	DDS	St Aug		
Rourke	Daniel	DDS	St Aug		
Russell	Greg	DMD	St Aug		
Santiago	Roberto	DDS	St Aug		
Schellhase	Daniel	DDS	PVB		
Schweim	Barry	DDS	PVB		
Sears	Don	DDS	PVB		
Sindad	Greg	DMD	St Aug		
Soud	Robert	DDS	PVB		
Thousand	Robert	DDS	St Aug	Peridontal Surgery	
Tilberg	Todd	DMD	St Aug		
Townsend	Eric	DDS	PVB		
Vail	David	DDS	PVB		
Valdes-Domingoes	Maria	DDS	St Aug		
Versaggi	Michael	DDS	St Aug		
Weeks	Penney	DMD	PVB		
Wells	Marvin	DMD	St Aug	Oral/Maxillofacial Surgery	
Wilcox	Michael	DDS	Hastings		
Winter	Michael	DDS	PVB		

HEALTH CARE FACILITIES/SERVICES
Home Health Agencies
Bayview Home Health of St Augustine
Community Home Health Care
Flagler Hospital Care Tenders
Housecall Home Healthcare
Interim Healthcare of St. Augustine
Omni Home Care
Welcome Homecare
EMS
City
St Augustine Fire Department (2 locations)
County
Palm Valley- Volunteer Fire Department (VFD)
Switzerland VFD
Colee Cove VFD
Orangedale
Bakersville VFD
St. Augustine South VFD
Crescent Beach VFD
St. Augustine Beach
Hastings VFD
South Ponte Vedre VFD
St. Augustine Shores VFD
North City
Riverdale VFD
West Augustine
St. Augustine
Sampson VFD
North Shores VFD
Hospice
Community Hospice of Northeast Florida
Community Prospice of Profitieus Profituu
Ambulatory Surgical Care Centers
Eye Surgery Center of St. Augustine, Inc.
Healthsouth St. Augustine Surgery Center
Old Moultrie Surgical Cetner, Inc.
Ponte Vedra Beach Surgery Center, Inc
Ponte Verdra Plastic Surgery Center Ponte Verdra Plastic Surgery Center
Ponte Vedra Surgery Center
St. Augustine Endoscopy Center
or. Augustine Lituoscopy Center
Danal Dialysis Units
Renal Dialysis Units

FMC Dialysis Services St. Augustine	
St. Augustine Artifical Kidney Center	
Rehabilitative Services	
Performance Physical Therapy	
Ponte Vedrea Physical Therapy	
Rebound Rehabilitative Services, Inc.	
St. Johns Physical Therapy Center	
Ability Rehab Services	
Alliance Care	
Brooks Rehabilitation	
Bayview-The Pavilion	
Bodymax Physical Therapy & Personal Fitness Center	
Back to Basics Therpay	
Doan Therapy	
Flagler Hospital Rehab Services	
Healthsouth Sports Medicine & Rehab Center	
Interim Healthcare	
Bodywise Studios	
The Therapy Place	
Adult Day Care	
Sunshine Center	
Volunteer Clinics/Indigent Care Programs	
Good Samaritan	
Flagler Hospital Primary Care	
I lagior frospitar Filmary Care	
Veteran's Services	
Veteran's Administration- Community-based Outpatient Clinic	

St Johns County Inventory of Mental Health and Substance Abuse Services

Inpatient Services

Flagler Hospital: 21 psych beds

St Johns County Mental Health Department/St Johns Place: 10 beds (residential treatment facility)

Outpatient Services

St Johns County Mental Health and Recovery Services Department (SJCMHD)

SJCMHD provides comprehensive behavioral services for children, adolescents, and adults by a broad range of mental health professional disciplines. Adult services offered by SJCMHD include case management, individual/family/group therapy, psychosocial programming/day treatment, emergency/crisis response services and community workshops. Services for children include case management, in-home counseling, individual/family/group therapy, school-based counseling, and behavioral analysis. Substance abuse services offer treatment for both adolescents and adults. A staff directory and job titles of employees at SHCMHD is included at the end of this section.

The St. Johns County Community-Based Care Family Integrity Program (FIP) is a child safety agency responsible for protective services and out of home placement for St. Johns County children. FIP's mission is to work in partnership with the state of Florida and local community to develop, implement and manage a community-based system of care for abused and neglected children and their families. A staff directory is included at the end of this section.

EPIC Community Services

Licensed by the Florida Department of Children and Families, EPIC Community Services provides substance abuse prevention, intervention, outpatient treatment and aftercare services as well as mental health counseling services. EPIC also offers Community Prevention Services Program, parenting education programs, Big Brothers Big Sisters, school-based prevention programs, foster parenting programs, and a Counseling Center. A staff directory is provided at the end of this section.

Psychological Services of St Augustine

Outpatient mental health and substance abuse services for children, adolescents and adults

Cohen, Stanley, DO, Child, Adolescent and Adult Psychiatrist

Brito, Odalys, MD, Child, Adolescent and Adult Psychiatrist

Fuller, Antonia, ARNP

Merwin, Jack, PhD, Licensed Psychologist

Sappington, Andrew, PhD, Licensed Psychologist

Shulman, Sharon, PhD, Licensed Psychologist

Abbott, Kathleen, LMHC

Bartol, Valerie, LMHC

St Claire, Carol, LMHC

Dungan, Deborah, LMHC

Monoghan, Christy, LMHC

Wood, Gini, LMHC

Hackney, David LMHC

Molinaro, Catherine, LCSW

Henneka, Stephen, LCSW

Lewis-Slayton, Patricia, LCSW

Bennet, Mavis PhD, Licensed Marriage and Family Therapist

Selig, Karen, MA, Licensed Marriage and Family Therapist

Private Practice - St Augustine

Psychiatrists

Dent, Gregory, MD Fox-Fliesser, Judith, MD Fliesser, Jeffrey, MD Morgan, Stacy, MD Olds, Robert, MD

Psychologists

Coshow, Kimerly, PHD Helder, Lynn PhD, PA Martin, Paul, PhD Middleton, Sue, PhD Risch, Sherrry, PhD

Dr. Steven Dingfelder & Associates, Inc (St Aug, Pontre Vedra Beach, and Palatka)

Dingfelder, Stephen, PhD, Psychologist Gates, Joann, PhD, Psychologist Schwartz, Mark, Psychologist Evans, Deborah, LCSW Haynes, Sandra, LCSW Meehan, Michael, LCSW Ott, Melody, LCSW

Other Psychotherapists

Bauer, Nicole, LMHC Byerly, Tammy, LCSW Felison, Jan, LCSW Hays, Jontie, LCSW McDermott, Amy, LMHC Deprey, Marilyn LMHC Mark, Joe LMHC

Ponte Vedra Beach

First Coast Therapy Group

Outpatient Mental Health and Substance Abuse- children, adolescents, and adults

Heideman, Brenda, LCSW

Hanna, Deborah, LCSW

Malec, Michael, EdD, LCSW

Buckle, Neysa LMHC

Crenshaw, Kristina, LMHC

Inclan, Albert, PhD, LMHC

King, Pamela, PhD, LMHC

Wadelton, Lynn, PhD, Licensed Clinical Psychologist

Hughes, Deanna, Psy.D, Licensed Clinical Psychologist

Thomas, Nancy, PhD, Licensed Clinical Psychologist

Goyal, Reena, Psy.D. Licensed Clinical Psychologist

McQuillan, Jennifer, PhD, Licensed School Psychologist

Rojas, Claudia, Licensed Mental Health Intern

Edwards, Drew, Ed.D, Addictions Education

Ponte Vedra Medical Center- Family Counseling

Voorhes, Eileen RN, Psychiatric and Mental health nurse Devlin, Pat, LMHC Barrow, Susan, SCSW

Private Practice Psychologists

Harvey, David, PhD Kilpatrick, Ted, PhD Simon, Joan, PhD

Other Agencies

Betty Griffin House (locations in St Aug and PVB)

Counseling for domestic violence, sexual abuse, dating violence for adults, adolescents and children

• 6 licensed therapists

St Johns County Health Department

Haney, Priscella, LCSW (for HIV clients)

St Johns County Focus Group Questions

1. In general, are you satisfied with the quality of life in your community for yourself?

A. Is this a good place to raise children?

- a. School quality
- b. Day care
- c. After school care
- d. Recreation
- e. Environment

B. Is this community a good place to grow old?

- a. Elder friendly housing
- b. Transportation
- c. Churches
- d. Shopping
- e. Elder day care
- f. Social support organizations and agencies
- g. Services and activities

C. Do you feel there is economic opportunity in the community?

- a. Locally owned and operated businesses
- b. Jobs with career growth and job training
- c. Higher education opportunities
- d. Affordable housing options
- e. Reasonable commute

2. Do you feel your community is a safe place to live?

- a. Safety in the home
- b. Workplace
- c. Schools and playgrounds
- d. Parks
- e. Do the neighbors know each other and look out for one another...

3. Do you believe there is a network of support for individuals and families during times of stress and need?

- a. Medical crisis
- b. Mental health and substance abuse
- c. Pregnancy
- d. Financial
- e. Death
- f. Services for children with special needs

APPENDIX C-1

- 4. Are you satisfied with the health care system in your community?
 - a. Cost
 - b. Quality
 - c. Options
 - d. Prescription drugs
 - e. Specialty care
- 5. Are there health services you need that are not available to you?
- **6. Are you aware of the public health services that are available in St Johns County?** (i.e. County Health Department)
- 7. What do you see as the school's role in health?
- 8. If you could create any type(s) of "health program(s)" for St Johns County residents what would it/they be?

How Healthy Is St. Johns County?

The St. Johns County Community Health Assessment Task Force needs your help in better understanding the community's health. Please fill out this survey to share your opinions about healthcare services and the quality of life in St. Johns County. The survey results will be presented to the community and made available to the public. The information gathered from responses to this survey will help make St. Johns County a better place to live.

1.	How do you rate you □ Excellent	ı r overall h □ Good	nealth? <i>(check</i> □ Fair	<u>one</u> selecti □ Poor	<i>on)</i> □ Don't Know	I	
2.	Check up to 5 select						
	□Access to churches	•	laces of worshi	D .	□Good place to		
	□Access to healthca □Access to parks an	-	n		□Good jobs, he □Good education		
	☐Access to public tra				□Low crime rate	es/safe neighborhoods	
	□Affordable and/or a					nealth care (i.e. annual check-ups)	
	□Access to social se		3 - 1 - 1		□Affordable chi		
	□Clean and healthy	environmei	nt		□Good place to	grow old	
	□Absence of discrim	ination			□Other		
3.	Check up to 5 of the	health pro	oblems <u>you</u> fee	are the m			
	□Asthma					alcohol or drug	
	□Respiratory/ lung d	iseases (i.e	e. COPD, emph	ysema)	□Mental heal		
	□Cancers				□Child abuse		
	□Contagious disease □Diabetes	es (i.e. iiu,	pneumonia)		☐Teenage pro	egnancy Sexually Transmitted Diseases	
	☐Heart disease & str	roke			□Domestic vi		
	□Adult obesity	ONC				care (i.e. nursing homes, hospice)	
	□Childhood obesity					ntal health, sewers, septic tanks	
	□High blood pressur	e				le crash injuries	
	□Smoking/tobacco u					·	
	□Dental problems						
	□Rape/sexual assau	ılt					
4.	Check up to 3 unhea	althy behav			ned about in St.		
	□Alcohol abuse		□Lack of exer			□Tobacco use (i.e. cigarettes, cig	jars
	☐Being overweight		□Not getting ":		event disease	chewing tobacco)	
	□Dropping out of sch	nool	□Not using bir			□Unlicensed and/or unsafe driver	S
	□Drug abuse		□Discriminatio			□Unsafe sex	
	□Poor eating habits		□Teen sexual	activity		□Other	_
5.	What health care se						
	□Alternative therapy □Dental/oral care	(i.e. nerba	is, acupuncture			edications/medical supplies	
	□Emergency room c	aro				(i.e. annual check-ups) e. family doctor or walk-in clinic)	
	□Family planning/bir					care (i.e. heart doctor)	
	□Inpatient hospital	ui contioi				se services-drug and alcohol	
	□Lab work				□Vision care	to dervices aray and alconor	
	□Mental health/coun	selina			□X-rays/mammo	arams	
	□Physical therapy, re	_	ογ		□Other		
	, , , , , , , , , , , , , , , , , , , ,	- •	•		☐ None of the abo		
6	How do you rate the	quality of	health service	s in St.Joh	ns County?		
٠.		□ Good	□ Fair	□ Poor	☐ Don't Know	/	

7. What do you feel are		<u>ı</u> in getting h				
Lack of transportation					ar source of heal	
Can't pay for doctor	hospital visits			Lack of evenir	ig and week-end	services
Can't find providers					appointments	
Don't know what typ	es of services a					
		None	, I don't have a	ny barriers		
8. When you need to us ☐ Have your prescription ☐ Buy over-the-counter m ☐ Use leftover medication ☐ Get medications from s	filled at drugstor edicine instead prescribed for a	e/supermarke a different illne	et/mail order	☐ Go witho☐ Use med☐ Use herb		or family ead
D oct modications from a	odroco odiolac i	ine country			noopital ciricige	oney room
9. How is your health ca ☐ Health insurance offere ☐ Health insurance that y ☐ I don't have health insu	d from your job ou pay for on yo	or a family me				
10. Where would you go selection)			edical professi	onal's advice	about your hea	ilth? (check <u>one</u>
☐ Hospital emergency roo				gler Hospital F		
☐ Hospital emergency roo ☐ No where—I don't have	om <u>outside</u> the c	ounty	□ Yo	ur doctor's offi		
		nen i get sick	: ⊔In	e local health o	department	
□ Other						
11. Where would you go health? (check one sele ☐ Hospital emergency rod ☐ Hospital emergency rod ☐ No where-we don't hav ☐ Don't have children/dep	c tion) om <u>in</u> St. Johns om <u>outside</u> the c e a place to go v	County	☐ Fla ☐ Th	gler Hospital F eir doctor's offi e local health o	Primary Care ce	
12. Name of city/town w	here you live:_			Zip Code: _		-
13 . Age: □ less than 18	□18-25	□26-39	□ 40-54	□ 55-64	□ 65 –74	□ 75+
14. Gender: ☐ Female	e □ Male					
15 . Race/Ethnicity: <i>Whi</i> □Black/African American □White/Caucasian		u most ident IHispanic IAsian/Pacific	□Nat	k <u>one</u> selection ive American er (<i>Please des</i>	•	
16 . Education : <i>Please cl</i> □ Elementary/Middle Sch □ High school diploma or	ool E	∃ Technical/C	leted: (check of community Collected	ge É	∃ Graduate/Adva	anced Degree
17 . Employment Status: □Employed Full-Time □Retired		d Part-Ťime	☐ Unemploye		mployed	
18 . Household Income: (☐ Less than \$10,000 ☐ \$10,000 to \$19,999	□\$20,00	ection) 0 to \$29,999 0 to \$49,999		,000 – \$74,99 ,000 - \$99,99		000 or more

St Johns County Survey Results - Other Comments

2. Check up to 5 selections you feel are the most important features of a healthy community:

Other Comments
VA Hospital (6)
Affordable adult health care
Exposure to creative arts and music
Adult recreation
No more McDonalds
Homeless people
Good Shopping (2)
Green belts, wildlife areas, parks, forests, gardens
Self discipline (exercise, diet)
Good mental health care
Place for mentally ill to go
Good libraries
Access to fishing/boat ramps
Law enforcement that follow the law

3. Check up to 5 of the health problems that you feel are the most important in Clay County:

Other Companies

Other Comments
No drainage
Community relations – men and women staying
Overwhelming stupidity
Drowning
Venomous snakes/spiders and proper medical attention for their bites
VA Care
Homelessness (2)
Dirty/unhealthy restaurants
Police tazers
Cell phone use while driving
Animal attacks
Insect problems
Affordable health care for everyone, no exceptions
Health, clean water
Poor eating habits
Kidney disease (4)
Children not getting medical attention because they can't afford it and doctors being able to turn
them away
Alzheimer's
Trauma
Hurricanes
Abortion

4. Check up to 3 behaviors you are most concerned about in Clay County:

Other Comments
Homelessness (3)
Law needs more work
Lack of professionalism by police
Oxycontin abuse
Dirty/unhealthy restaurants
Traffic
Cell phones
Not taking showers
Not actively promoting abstinence
Drunk drivers (2)
No help for mentally ill
Littering
Doctors abusing insurance companies
Corruption
School menus
Teen drug/alcohol abuse, no teen activities

5. What health care services are difficult to obtain in your community?

Other Comments
Other Comments
VA Hospital (20)
Open VA clinic to new patients (2)
Podiatry
Pediatric specialty doctors (4)
Adult dental and health care
Dental care over 18 years old
Dental for children under 5
Kidney transplant doctor
Psychiatrist/psychologist
Orthopedics (2)
Low income day care
Mental health takes too long to get an appt
Female MD Specialists (2)
Emergency room care for poor without insurance
Christian mental health/counseling
Transportation to medical facilities
Children and families
24 hour walk in clinic, weekend clinic (2)
Cost of health care (2)
Health insurance for low income, uninsured (3)
Methadone clinic
Local dialysis (in Hastings)
Smoking prevention
Mental health services for children
Health care too expensive for elderly
Child care help
"If you have the money, we have the services"

7. What do you feel are barriers for you in getting health care?
Other Comments
High insurance costs (2)
No insurance
Prescription costs too high (3)
No kidney transplant doctor
Need socialized medicine if co-pays are excessive in number and amount per visit
Lack of quality providers
Too many foreign doctors
Copays and medications
Difficulty in qualifying
Affordable adult insurance
Certain doctor's attitudes
Quality of care
High insurance rates, making too much money for assistance and not having enough
money to have a reasonable deductible
Long waits in the ER
Local VA needed (2)
Insurance premiums to high
Medicaid doesn't cover adult vision or dental
No help for dental services for low income families
Dental insurance (2)
Share of cost too high
Doctor's that don't explain tests
Lack of quality practitioners in Hastings
Far distance for health care
Doctors won't accept you as a patient if you want to switch doctors
No good family doctors
No health insurance
Employers not providing healthcare or affordable healthcare

Care for specific illness in this area

Health dept turns you away

I don't have insurance and can't get into health department

My impatience with waiting to see a doctor

9. How is your health care covered? (check all that apply)

Other Comments
Share of cost (2)
Student health insurance
Ryan White
Medipass
Medicaid with share of cost is more than I can pay for
KidCare
AARP (2)
Supplemental insurance that we pay for on our own
My kids have Medicaid
Retirement pension
BCBS
Private – CMS

Pioneer	
At times, no insurance	
My husband doesn't have it and it's too expensive to put him on my plan	

10. Where would you go if you are sick or need a medical professional's advice about your health? (check one selection)

Other Comments
Walk-in clinic (9)
I am looking for a good PCP since Mayo doesn't take my insurance now and there are
no good PCP's taking new patients, I have to go to Jax
Mayo Clinic (2)
Chiropractor
Mother (2)
Depends on severity of illness
Baptist South Hospital
Haven't been sick
Ask a friend
Good Samaritan clinic
Herbalist

11. Where would you go if your children/dependents are sick or need a medical professional's advice about your health? (check one selection)

Other Comments
Walk-in clinic
Chirporactor
Need a VA hospital
VA
VA clinic or Baptist South Hospital
I would take children to first place available
Anywhere I could get them in to see a doctor
Pediatrician outside St Johns County
No insurance on child, I can't afford to go anywhere, I try natural/herbal first and gonly
go to ER if emergency

St. Johns County Survey Results by Select Zip Codes

1. How do you rate your overall health?

Category	Total County	32145	32095	32086
Excellent	2	3	*2	2
Good	1	1	1	1
Fair	3	2	*2	3
Poor	4	4	3	4
Don't Know	5	5	4	5

^{*}Tie

2. Check up to 5 selections you feel are the most important features of a health community:

2. Check up to 3 selections you leef are the most important leatures of a health community.					
Top 5	Total County	32145	32095	32086	
Access to health care	1	1	1	1	
Clean and healthy	2	3	3*	3*	
environment					
Good education	3		2	5	
Low crime rates/safe	4	2	4*	2	
neighborhoods					
Good place to raise kids	5	5	4*	3*	
Good jobs, economy		4	4*	4	
Affordable housing			3*		

^{*}Tie

3. Check up to 5 of the health problems you feel are the most important in St. Johns County:

Top 5	Total County	32145	32095	32086
Obesity				5
Cancers	2	3		4
Diabetes		1		
Addiction- alcohol or	1	2		1
drug				
Mental health			1	
Heart disease and stroke	3	4	2	
Smoking/tobacco use			4*	2
Respiratory diseases		5		
Child abuse/neglect	4		3	3
HIV/STD's	5		4*	
Domestic violence			4*	
Dental problems			5	

^{*}Tie

4. Check up to 3 behaviors you are the most concerned about in St. Johns County:

Top 5	Total County	32145	32095	32086
Being overweight	3	3*	3	3
Alcohol abuse	2	3*	2	2
Drug abuse	1	1	1	1
Tobacco use		3*		
Dropping out of school		2		

^{*}Tie

5. What health care services are difficult to obtain in your community?

Top 5	Total County	32145	32095	32086
Dental/oral care	1	1	1	1
Mental health/counseling	3			2
Prescription drugs	2	2	2	3
Vision care		3	3	

6. How do you rate the quality of health services in St. Johns County?

Category	Total County	32145	32095	32086
Excellent	3	5	3	4
Good	1	2	1	1
Fair	2	1	2	2
Poor	4	3	4	3
Don't Know	5	4	5	5

7. What do you feel are barriers for you in getting health care?

Category	Total County	32145	32095	32086	
Long waits for	2	2	1*	1	
appointments					
Lack of evening and	3	3	1*	2	
weekend services					
Can't pay for	1	1	1*	3	
doctor/hospital visits					
Have no regular source			3		
of care					
Lack of transportation			2		

^{*}Tie

8. When you need to use prescription medications for an illness, do you...

ov ++ non you need to use presentation medicalization on an inness, do you've				
Category	Total County	32145	32095	32086
Have your prescription	1	1	1	1
filled at the drugstore				
Buy over-the-counter	2	3	3	3
medicine instead				
Go without medicine	3	2	2	2

9. How is your health care covered?

Category	Total County	32145	32095	32086
Have your prescription	1	1	1	1
filled at the drugstore				
Buy over-the-counter	2	3	2	3
medicine instead				
Go without medicine	3	2	3	2

10. Where would you go if you are sick?

Category	Total County	32145	32095	32086
Hospital ER in St. Johns	2	2	2	2
County				
Your doctor's office	1	1	1	1
The local health	3	3	3	3
department				

11. Where would you go if your children/dependents are sick?

Category	Total County	32145	32095	32086
Hospital ER in St. Johns		3		
County				
Their doctor's office	1	1	1	1
The local health	3		2	2
department				
Don't have	2	2	3	3
children/dependents				

AGE

Category	Total County	32145	32095	32086
18-25	15.8%	19.3%	28.3%	10.8%
26-39	29.3%	36.7%	32.6%	34.8%
40-54	26.6%	20.2%	30.4%	36.8%
55-64	13.1%	11.9%	2.2%	9.3%
65-74	7.9%	9.2%	2.2%	3.9%
75+	7.3%	2.8%	4.3%	4.4%

GENDER

Category	Total County	32145	32095	32086
Male	23.3%	30.8%	21.7%	17.4%
Female	76.7%	69.2%	78.3%	82.6%

RACE/ETHNICITY

Category	Total County	32145	32095	32086
Black/African American	18.1%	46.8%	9.1%	8.3%
Hispanic	3.6%	6.4%	4.5%	4.9%
Native American	1.7%	0%	2.3%	2.0%
White/Caucasian	75.5%	45.9%	84.1%	83.9%
Asian/Pacific Islander	0.7%	0.9%	0%	0%
Other	0.4%	0%	0%	1.0%

APPENDIX C-4

EDUCATION

Category	Total County	32145	32095	32086
Elementary/middle	6.0%	12.3%	10.9%	3.4%
school				
High school diploma or	40.5%	46.2%	34.8%	42.4%
GED				
Technical/community	23.2%	26.4%	37.0%	21.7%
college				
4 year Bachelor's degree	18.3%	11.3%	8.7%	21.2%
Graduate/advanced	12.0%	3.8%	8.7%	11.3%
degree				

EMPLOYMENT STATUS

Category	Total County	32145	32095	32086
Employed full-time	49.4%	51.8%	41.3%	59.6%
Employed part-time	9.8%	7.3%	21.7%	10.1%
Unemployed	9.3%	12.7%	8.7%	8.2%
Self-employed	4.5%	4.5%	0%	3.4%
Retired	15.5%	9.1%	6.5%	8.7%
Home Maker	8.1%	7.3%	15.2%	8.2%
Student	1.7%	2.7%	4.3%	1.4%
Other	1.7%	4.5%	2.2%	0.5%

INCOME

Category	Total County	32145	32095	32086
Less than \$10,000	16.4%	21.9%	20.9%	10.9%
\$10,000 - \$19,999	20.8%	25.7%	34.9%	15.0%
\$20,000 - \$29,999	18.2%	29.5%	9.3%	14.5%
\$30,000 - \$49,999	19.7%	15.2%	16.3%	25.4%
\$50,000 - \$74,999	11.0%	6.7%	4.7%	17.1%
\$75,000 - \$99,999	7.5%	0%	7.0%	11.4%
\$100,000 or more	6.4%	1.0%	7.0%	5.7%