

**TIOGA COUNTY
ASSESSMENT**

2010

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I. DEPARTMENT OF HEALTH OVERVIEW

Over the past 100 years, no entity has had more impact upon the lives of Pennsylvanians, and Americans as a whole, than Public Health. The Pennsylvania Department of Health was created by the Act of April 27, 1905, P.L. 312 and later modified through the Administrative Code of 1929.

The Department's mission is to promote healthy lifestyles, prevent injury and to assure the safe delivery of quality health care for all Commonwealth citizens. The Department is dedicated to this mission by serving all people in the Commonwealth particularly the under-served.

The Department's Public Health services are managed by the Bureau of Community Health Systems through six District Offices that provide coordination, consultation and administrative support for 60 State Health Centers. In addition the Bureau of Community Health Systems oversees the Public Health services provided by six County and four Municipal Health Departments. The Department's primary goals focus on maintaining healthy people, healthy families, healthy communities and healthy environments through outreach, education and prevention of diseases. The Department's network of District Offices and State Health Centers work collaboratively with public and private partners in every community to facilitate and maintain effective public health program services that help people reach their full potential for wellness.

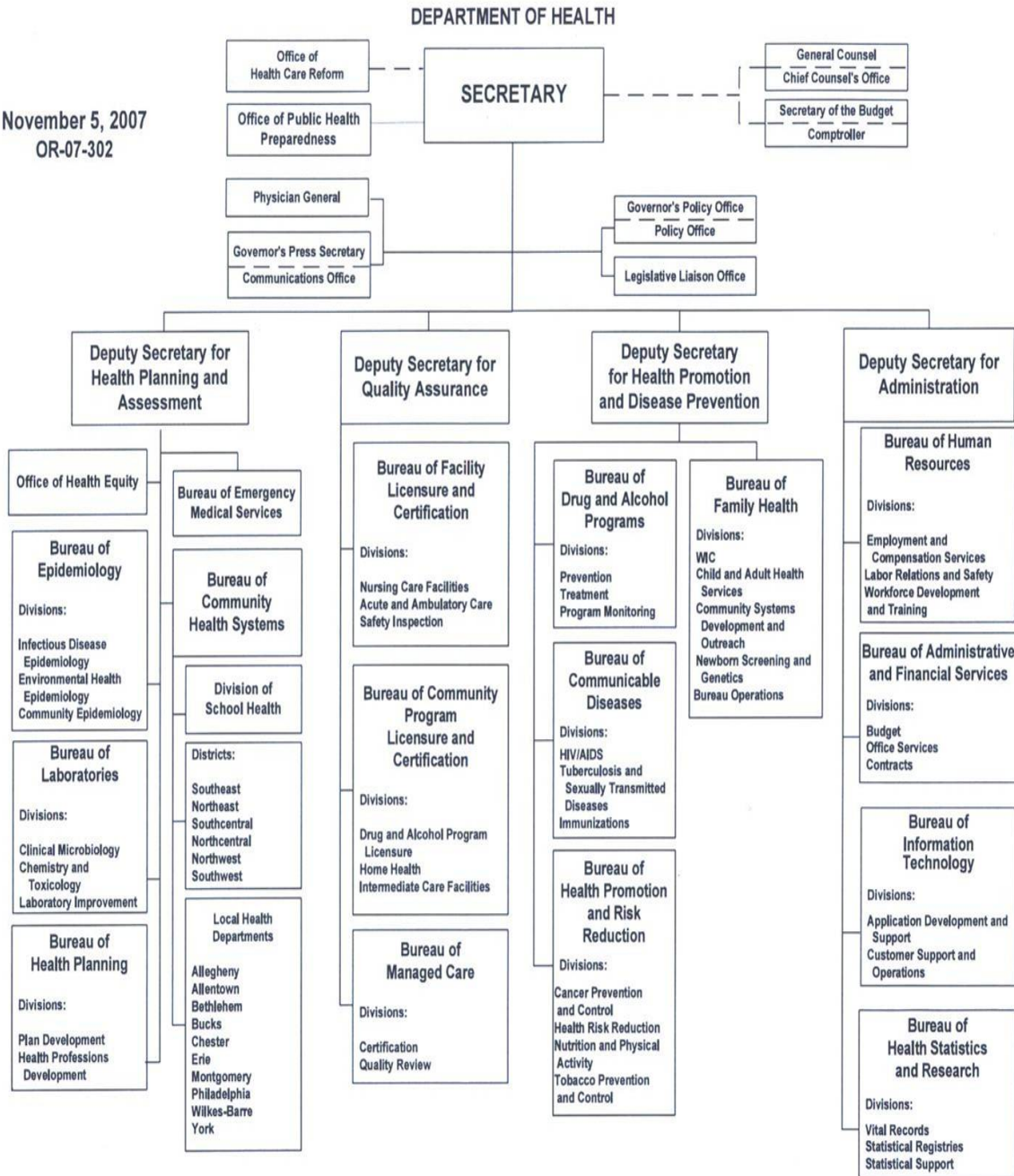
The Department's Public Health program services include communicable disease reporting, tracking, and investigation; health information and referral; chronic disease prevention and intervention; communicable disease clinical services to include screening, diagnosis and treatment; immunizations and vaccine preventable disease follow-up; family health program outreach and education; school health program services; environmental health services; and emergency and pandemic response preparedness actions. The Department's Public Health infrastructure through the District Offices and State Health Centers engage in community health assessments, quality assurance activities, and other services including community integration and outreach.

The Department's ultimate goal is to help all people to reach their full potential for wellness; to build partnerships that maximize access to affordable, high quality health care; to empower individuals and communities to help themselves; and to protect, preserve, and improve the health of all Commonwealth residents.

Source: www.health.state.pa.us

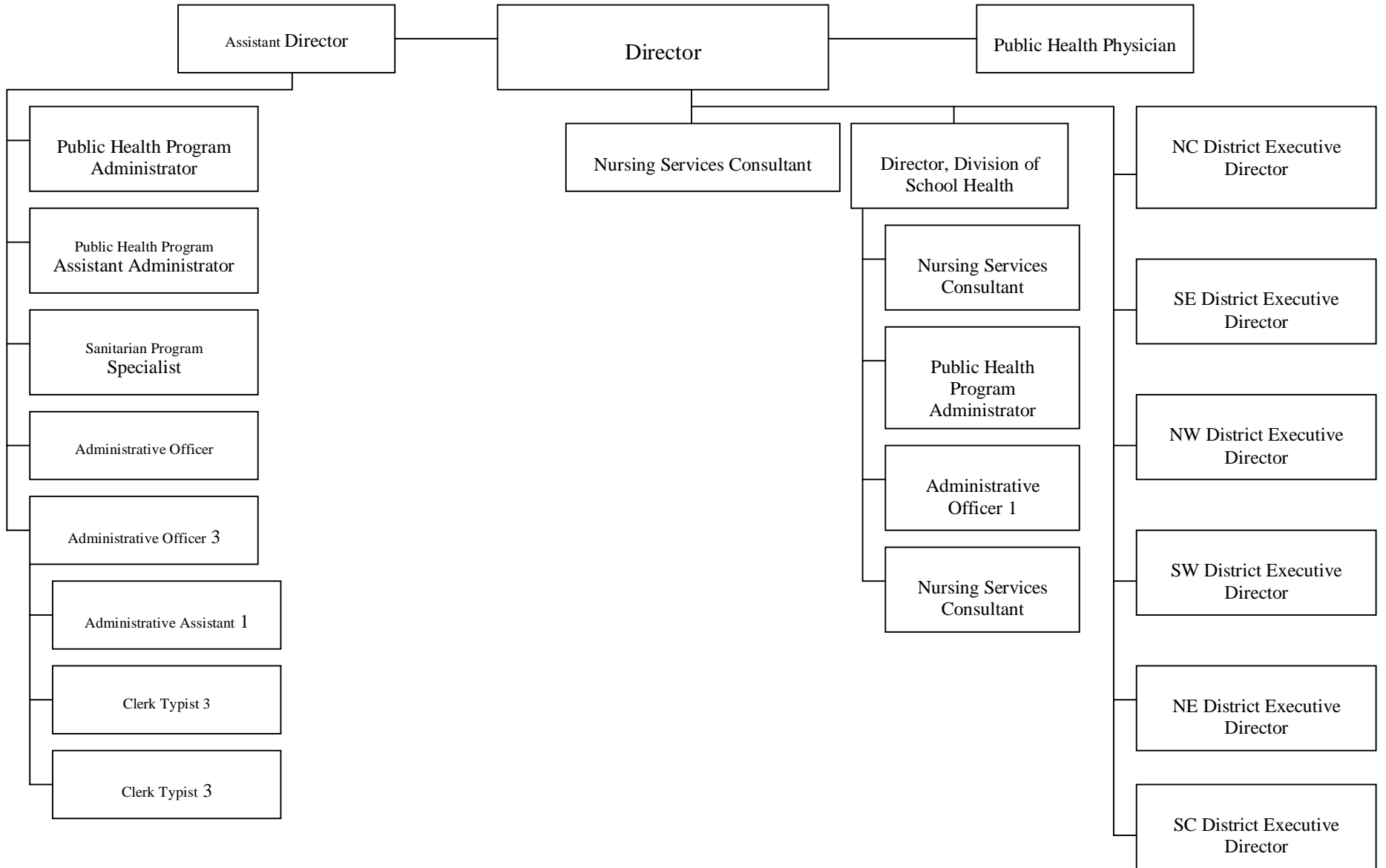
A. Department of Health State Organizational Chart

November 5, 2007
OR-07-302

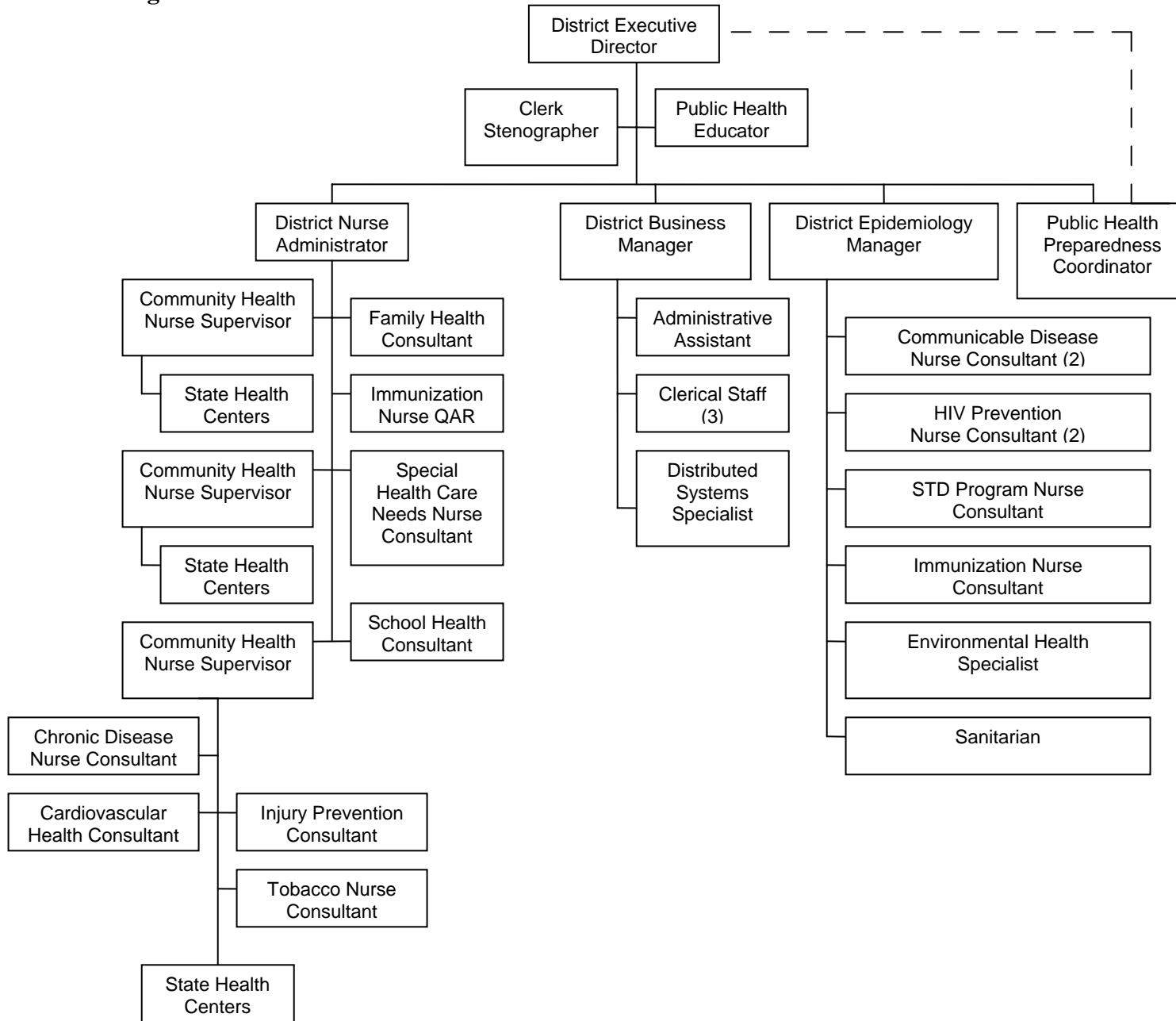


B. Bureau of Community Health Systems Org Chart

Bureau of Community Health Systems



C. District Organizational Chart



D. Tioga County State Health Center

Tioga County State Health Center	
ADDRESS	44 Plaza Lane, Wellsboro, PA 16901
TELEPHONE	(570) 724-2911
FAX	(570) 724-5307
HOURS	8:00AM – 4:30PM
DISTRICT EXECUTIVE DIRECTOR	Douglas Koszalka
DISTRICT NURSE ADMINISTRATOR	Jacqueline Battin
DISTRICT EPIDEMIOLOGY MANAGER	Michele Dincher
DISTRICT BUSINESS MANAGER	Luanne Spooner (Acting)
NURSE SUPERVISOR	Sue Judlin
SHC STAFF	Lisa Greeley, Brenda Rumsey
GEOGRAPHIC AREA	Tioga County
PURPOSE	To provide effective public health services in the prevention, detection, and control of diseases, and protection and maintenance of health
SERVICES	State Health Improvement Plan (SHIP) Partner Public Health Preparedness Health Information and Referral Immunization Clinic Disease Investigations (Communicable and Non-Communicable) Animal Bite Follow-up and Rabies Prevention Special Health Care Needs Metabolic Disease Follow-up Childhood Lead Poisoning Follow-up Sudden Infant Death/Bereavement Counseling Maternal and Child High-Risk Follow-up Newborn Hearing Follow-up Health Education HIV Testing and Counseling TB Case Management and Clinic

II. DEMOGRAPHIC ANALYSIS

A. Geography

The following is a brief description of Tioga County. The description includes Tioga County's location within the State, surrounding counties, square miles of land, significant unique geographic areas, such as waterway systems, number of townships, boroughs and/or cities, location of the County Seat, major roadways, and any other pertinent characteristics unique to the County.

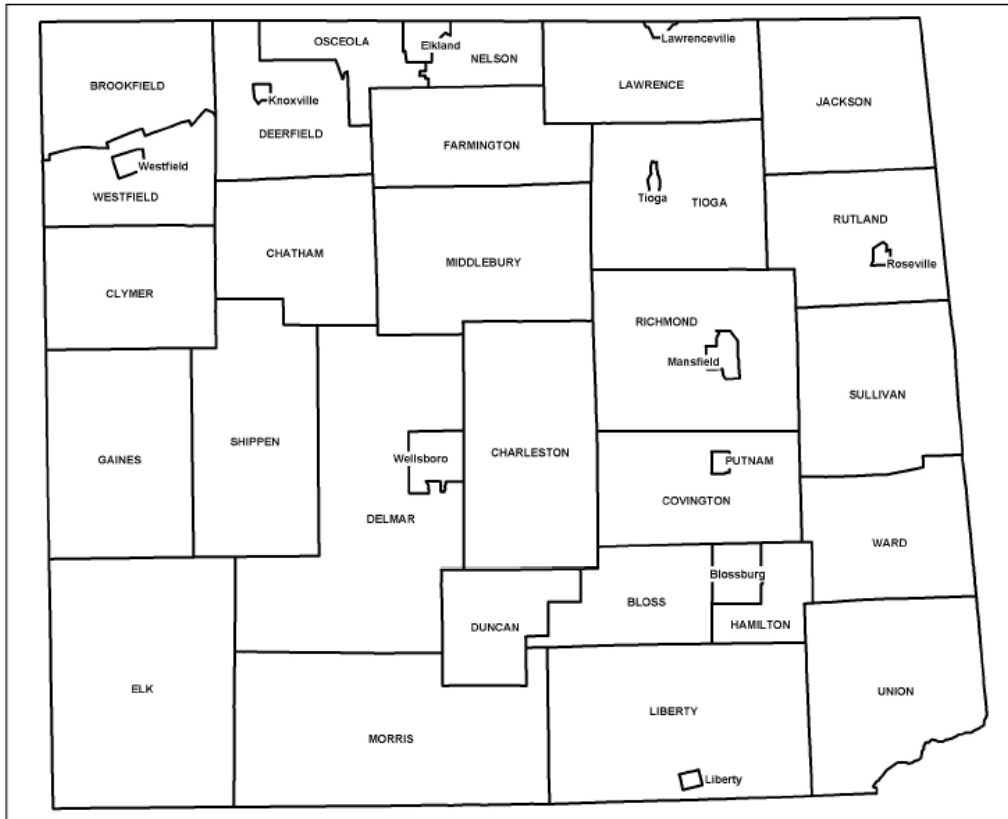
Tioga County is in north central Pennsylvania. It is bounded on the north by Steuben and Chemung Counties of New York, by Bradford County in the East, Potter County on the West, and Lycoming County on the southern border. It is 111 miles north of Harrisburg. The County seat is centrally located in Wellsboro. It is the fourth largest County in land area at 1,146 square miles, comprised of 30 townships and 20 boroughs. About 64% of the land is in the woodlands, 33% in farming, and 3% is urbanized. The average elevation is 1,600 to 1,700 feet about sea level. The lowest point is among Pine Creek beyond Blackwell near the Lycoming County border. The highest mountain is Cedar Mountain, some 2,543 feet above sea level, located in the southwestern area.

The region's two main waterways Pine Creek and the Tioga River, both eventually drain into the Susquehanna River.
Reference (1)

There are two major routes. Route 6 transects the county in its central portion and Route 15 runs north and south through the county's interior.

Source: A Compendium of Events and History of Tioga County

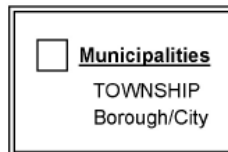
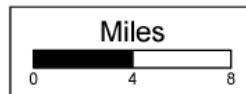
**MAP 1. MUNICIPAL OUTLINE MAP
TIOGA COUNTY**



Source of Data Files:
U.S. Department of Commerce,
Bureau of the Census, 2000
Census of Population and Housing.

Source of Cartographic Files:
U.S. Department of Commerce,
Bureau of the Census, 2000
TIGER/Line Files.

Maps Prepared by:
The Pennsylvania State
Data Center.



B. History

The following is a brief history of Tioga County. It includes the year the County was established, origin and meaning of the County name, chronological development, and any unique characteristics of the county, such as dominant ethnic heritage or pertinent events that are held there.

Tioga County was created on March 26, 1804. Originally a township of Lycoming County, it was created as its own entity to be self-governing as a solution to the difficulties of Lycoming officials reaching this wilderness area. The name Tioga is thought to be from the Iroquois word Tiagoa meaning “a gateway”. The territory now comprising Tioga County was originally occupied by the Seneca Indians and was purchased in 1784 as part of a vast tract of land west of Lycoming Creek.

The earliest known settler in Tioga County of European descent was Samuel Baker who built a log cabin in 1787 on the banks of the Tioga River where Lawrenceville now stands. Settlers that followed came mainly from Delaware and Maryland, but also from the New England States, New York, Virginia and New Jersey.

During the summer of 1806, the town plot of Wellsboro was surveyed and patterned after the city of Philadelphia. In 1813, it was selected as the county seat. When first formed, the county had between 500 and 600 residents. The county’s population peaked in 1890 at about 54,000 residents before declining with the coal and lumber industries.

Source: A Compendium of Events and History of Tioga County

C. Population

1. Population information of Tioga County includes the County’s rank within Pennsylvania’s 67 counties, specific population statistics, such as population density, median age, population distribution, sub-population information and interpretations/implications. Much of the information will be presented in a table format.

Tioga County ranks 54th in population out of Pennsylvania’s 67 Counties.

Source: Center for Rural Pennsylvania 2007

Estimated Population by Age & Sex (2007)

Area	Total Population	Male	Female
Pennsylvania	12,432,792	6,038,664	6,394,128
Tioga	40,681	19,529	21,152

Source: Pennsylvania and County Health Profile, 2009

Population Distribution

Description	Pennsylvania	Tioga
% Population Change 2000 to 2007	1.2	-1.7
Median Age of the Population	38.9	39.7
% Population Aged 65 & Over	15.2	17.4
% Population Urban	77.1	15.7
% Population Rural	22.9	84.3

Source: Pennsylvania and County Health Profile, 2009

Tioga County's Estimated Population by Age and Sex (2007)

Age	Male	Female
Under 5	1,067	1,164
5-14	2,696	2,711
15-24	3,321	3,440
25-34	1,848	2,056
35-44	2,174	2,491
45-54	2,757	2,789
55-64	2,477	2,608
65-74	1,804	1,948
75+	1,385	1,945

Source: County Health Profile, 2009

Population by Race and Ethnicity (2008)

Area	Total Population	White	Black	Hispanic	Other
Pennsylvania	12,448,279	85.4%	10.8%	4.8%	3.8%
Tioga	40,574	97.8%	0.9%	0.7%	1.4%

Source: <http://www.ruralpa.org>

2. Sub-populations

Below is a description of sub-population groups that can be found in Tioga County. The description includes pertinent information about each group, such as population within the county, location within the county, and participation, or lack of, in available medical services.

Mennonite Population

There are long established Mennonite communities that live in Tioga County. They own and operate several businesses, and are generally well integrated into the existing medical and economic infrastructures of the county. There is one Mennonite school currently operating in Tioga County.

Colleges and Universities

Mansfield University, a state university located in north central Tioga County, had approximately 3,100 students attend the 2009-2010 school year. This population is predominately young college aged students; most are from the state of Pennsylvania. This population is a high-risk group for experimentation with drugs and alcohol as well as sexually transmitted diseases.

Source: Mansfield University, 2010

Pennsylvania College of Technology, located three miles east of Wellsboro. They provided courses for approximately 34 full time students in the 2009-2010 school year. Because this small college has commuter attendees only and the fact that many more of the students are not attending directly out of high school, this facility does not have the same associated risks with regard to drug/alcohol and STDs.

Source: Pennsylvania College of Technology, 2010

Prison Population

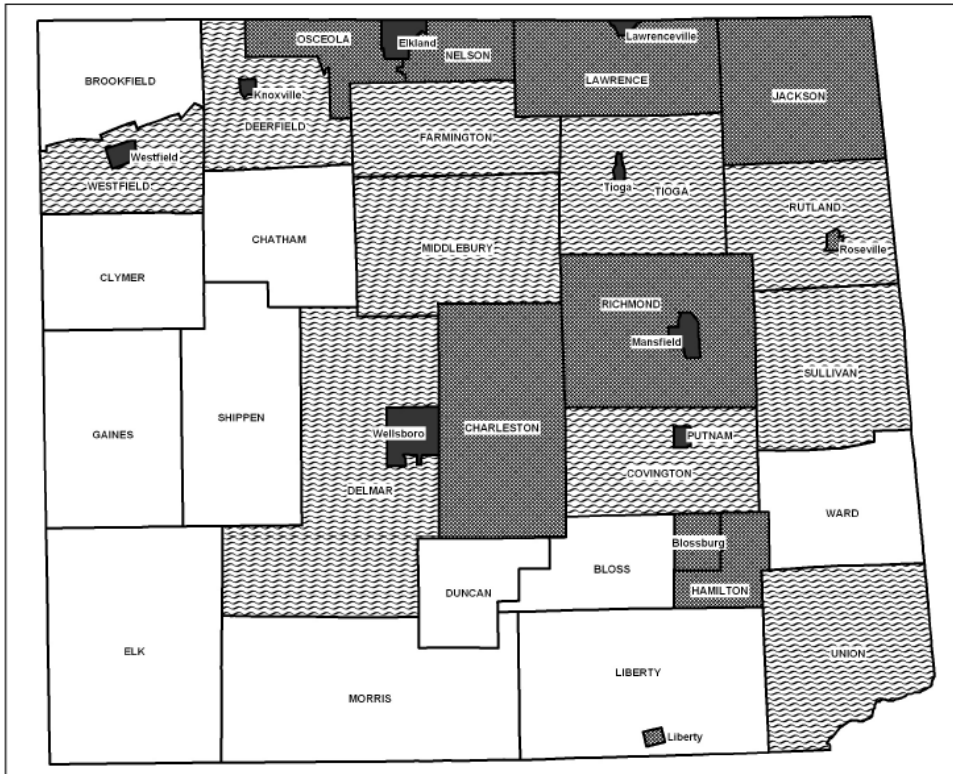
Tioga County Prison is the only prison facility in the county. It is located 1.5 miles east of Wellsboro, and housed 413 inmates in 2009. The average number of inmates incarcerated at any given time is 73. Most are local offenders, but some are housed in this facility from other counties. This population is at increased risk for certain communicable disease such as tuberculosis.

Source: Tioga County Prison, 2010

3. Interpretations/Implications

Tioga County's population has demonstrated increase over the past six years. The majority of citizens reside in rural areas. The percent of the population aged 65 and over is 17.4% which is higher than the state's rate of 15.2%. The median age of 39.7 is higher than the state rate of 38.9.

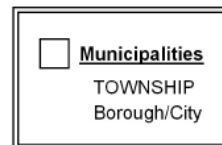
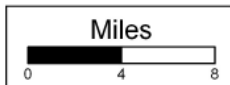
**MAP 3. MUNICIPAL POPULATION DENSITY, 2005
TIOGA COUNTY**



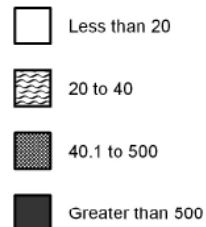
Source of Data Files:
U.S. Department of Commerce,
Bureau of the Census,
Population Division, Population
Estimates Branch, 2005.

Source of Cartographic Files:
U.S. Department of Commerce,
Bureau of the Census, 2000
TIGER/Line Files.

Maps Prepared by:
The Pennsylvania State
Data Center.



Persons/Sq. Mile



D. ECONOMY

Income

Description	Pennsylvania	Tioga County
Per Capita Personal Income (year)	20,880	15,549
Median Family Income (year)	49,184	37,907

Source: Pennsylvania County Data Book, 2009

Poverty Level

Percentage of Population Living Below Poverty Level (2007)

Area	Percent of Total Population
Pennsylvania	11.6
Tioga County	14.4

Source: Pennsylvania and County Health Profile, 2009

Percentage of Families Living Below Poverty by Type (1999)

Area	Total Families	% of Total Families	% of Married Couples	% of Male Headed	% of Female Headed
Pennsylvania	250,296	7.8	37.6	8.6	53.8
Tioga County	1,053	9.3	58.8	5.6	35.6

Source: 2009 Pennsylvania County Data Book

Percent of Labor Force Unemployed Average, (2006)	
Pennsylvania	5.4
Tioga County	6.2

Source: Pennsylvania and County Health Profile, 2009

Percent of Population Eligible for Medical Assistance (2008)

Area	Percent Eligible
Pennsylvania	16.2
Tioga County	16.0

Source: Pennsylvania and County Health Profile, 2009

Other Public Health Assistance

Type of Assistance	State Rates	County Rates
Percent population receiving cash assistance	2.2	1.1
Percent population participating in food stamp program	11.0	9.4
*Percent population participating in WIC program	2.0	2.9

Source: www.ruralpa.org

Ten Largest County Employers (4th Quarter , 2007)

Rank	Employer Name
1	Ward Manufacturing Inc.
2	State System of Higher Education
3	Soldier's & Sailors Memorial Hospital
4	Northern Tioga School District
5	Southern Tioga School District
6	North Penn Comprehensive Health Svc.
7	Wal-Mart Associates Inc.
8	Metamora Products Corporation
9	Truck Lite Co. Inc.
10	Wellsboro Area School District

Source: Pennsylvania County Data Book, 2009

INTERPRETATION/IMPLICATIONS

The median family income for Tioga County is \$37,907, approximately \$11,277 less than the state average. Within the county 14.4% of the population is living below poverty as compared to the state percentage of 11.6%. The percentage of residents who qualify for medical assistance in Tioga County is 16.0% compared to 16.2% in the state. Tioga County's unemployment rate of 6.2% is above the Pennsylvania rate of 5.4%.

Although a relatively higher percentage of Tioga County residents are impoverished when compared to state rate, a significantly comparable number of residents qualify for medical assistance.

Source: Pennsylvania and County Health Profile, 2009

E. HOUSING

Description	Pennsylvania	Tioga County
Total Housing Units	5,249,750	19,893
% of Owner Occupied	64.9	61.0
% of Renter Occupied	26.1	19.1
% of Vacant Units	9.0	19.9
Median Housing Value	97,000	72,000
Median Rent	531	421

Source: Pennsylvania County Data Book, 2009

Year Housing Unit Built (2000)

Area	Total Units	Percent of Total Units								Median Year Build
		Before 1940	1940-1949	1950-1959	1960-1969	1970-1979	1980-1989	1990-1994	After 1994	
Pennsylvania	5,249,750	30.3	10.0	14.3	11.4	13.5	10.1	5.1	5.3	1957
Tioga County	19,893	35.2	5.4	6.0	9/1	17.0	12.1	7.2	8.0	1964

Source: Pennsylvania County Data Book, 2009

Heating Fuel by Percent of Housing Units, (2000)

Source	Pennsylvania	Tioga County
Gas	51.4	70.3
Fuel Oil	25.5	7.3
Electric	16.5	4.4
LP Gas	3.0	4.4
Wood	1.6	10.6
Coal/Coke	1.4	2.5
Other	0.4	0.1

Source: 2009 Pennsylvania County Data Book

Interpretation/Implications

Approximately 61% of homes in Tioga County are owner occupied. The median housing value is \$72,000, which is \$25,000 below the state average.

The value of housing in Tioga County is less per unit than the state average. This is most likely due to the fact that Tioga County is rural. The county also has a significantly larger percentage (19.9%) of unoccupied housing units compared to the state percentage (9.0%). Tioga County has fallen behind the state rate population growth. Population growth for the period calculated the growth rate of Pennsylvania at 1.2% and Tioga County a slower 0.7%. Overall, Tioga County has fewer housing units that were built before 1980 (lead Paint use was outlawed in 1979) than does the state.

F. Education

The following is a brief description of the educational institutions located throughout Tioga County. The description, and/or tables following it, discuss the presence of any Head Start Centers or Intermediate Units, number, location, and enrollment of public institutions, private institutions and institutions of higher learning, library information, and any other pertinent information which is unique to Tioga County.

Institutions of Higher Learning

Mansfield University, a state university located in Northcentral Tioga County, had approximately 3,100 students in the 2009-2010 academic year.

Pennsylvania College of Technology, located three miles east of Wellsboro, provided courses for approximately 34 full time for the 2009-2010 academic year. They provide non-credit courses and have commuter attendees only.

Head Start Centers are well dispersed throughout the county, located in Blossburg, Elkland, Knoxville, Mansfield, Millerton, Tioga and Wellsboro. Together they serve 340 children in regular head start and 75 are currently enrolled in early head start.

Blast Intermediate Unit #17 serves Lycoming, Bradford, Sullivan and Tioga Counties. They are headquartered in Williamsport (Lycoming County) and also in Granville Summit (Bradford County). In Tioga County, 36 children on average receive early intervention services and there were approximately 1,165 special education services in the three area school districts for the 2005-2006 school year.

Libraries in Tioga County are located in Blossburg, Elkland, Lawrenceville, Mansfield, Wellsboro and Westfield.

Educational Attainment of Persons Age 25 or older, (2000)

Area	% < High School Graduate	% High School Graduate	% Earned B.A. Degree	% Professional/Graduate Degree
State	18.1	81.9	22.4	8.4
County	19.5	80.5	14.2	5.7

Source: Pennsylvania County Data Book, 2009

Public High School Graduates and Postsecondary Education Rates (2006-2007)

Description	Pennsylvania	Tioga County
Total Graduates	128,603	496
Total Postsecondary Bound	76.1	67.5
Post Secondary Non Degree	3.1	4.4
Specialized Associate Degree	3.6	1.4
2 or 4 Year College or University	69.4	61.7

Source: Pennsylvania County Data Book, 2009

Public School District Enrollments (2007-2008)

District	Enrollment	Home School
Northern Tioga	2,350	49
Southern Tioga	2,204	69
Wellsboro	1,572	61

Source: <http://www.pde.state.pa.us/k12statistics/cwp/view.asp?a=3&q=12578>

Pennsylvania Department of Education, 2008

Non-Public Schools (2008-2009)

School	Enrollment
Irving Comstock School	8
New Covenant Academy	144
Stony Fork Mennonite School	13
Trinity Lutheran School	55
Wesley Academy	16

Source: <http://www.pde.state.pa.us/k12statistics/cwp/view.asp?a=3&q=12578>

Pennsylvania Department of Education, 2008

Licensed Private Academic Schools

School	Enrollment
None	

Source: <http://www.pde.state.pa.us/k12statistics/cwp/view.asp?a=3&q=12578>

Pennsylvania Department of Education

Public Secondary School Drop-Out Rate, (2006-2007)

Area	Grade 7-12 Enrollment	Drop-outs Male	Drop-outs Female	Total Drop-outs	Drop-out rate
Pennsylvania	882,837	8,328	6,145	14,473	1.6
Tioga County	3,149	30	21	51	1.6

Source: <http://www.pde.state.pa.us/k12statistics/cwp/view.asp?a=3&q=12578>

Pennsylvania Department of Education

Enrollments in Institutions of Higher Education Pennsylvania, (Fall 2007)

College or University	Total Enrollment	Full-Time Enrollment	Male Total Enrollment	Male Full-Time Enrollment	Female Total Enrollment	Female Full-Time Enrollment
Pennsylvania	697,864	499,857	302,629	232,171	395,235	267,686
Tioga County	3,338	2,734	1,166	1,049	2,172	1,685

Source: <http://www.pde.state.pa.us/k12statistics/cwp/view.asp?a=3&q=12578>

Pennsylvania Department of Education

Interpretation/Implications

In Tioga County, non-public schools provide education to 4% with the remaining 95.9% attending public schools. The drop-out rate of 1.6% is the same as the state rate of 1.6%. There are six school nurses located throughout the School Districts.

The percentage of residents attaining higher education is 67.5 and is below the state rate of 76.1%. The percentage of Tioga County residents that acquire post secondary education is significantly less than the state rate. This is notable and may be associated with the limited economic opportunities available in the county. The percentage of home schooled children has remained constant since the 2002-2003 school year at 3%. Head start is well developed and dispersed throughout the county.

G. Transportation

The following is a brief description of the roadways and transportation services available in Tioga County. Included in this description is major roadways, availability of mass transit, including air, rail, cab service, services with handicapped accessibility, and any other services unique to Tioga County.

There is a total of 1.972 miles of highway in Tioga County and two major highways, Route 15 and Route 6.

Source: Pennsylvania County Data Book, 2009

Public Transportation

Endless Mountain Transportation Authority (EMTA)

EMTA provides door to door transportation services within Tioga, Bradford, and Sullivan Counties to persons age 65 and older for a nominal fee. EMTA also provides free transportation to Medicaid clients for medical appointments, transportation for Department of Welfare clients to get to their work sites. Human Services clients can also utilize this agency to access services for a nominal fare.

Human Services Development Program

Human Services Development Program also provides for clients referred to them, transportation to Human Service Agency services and out of town medical appointments. Persons with disabilities can use this transportation for a nominal fare. Public transportation is available to anyone on designated days to the Arnot Mall in Big Flats, NY from certain pick-up and drop-off sites.

Source: Endless Mountain Transportation Authority, 2010

Airport

The Johnston Airport located in Wellsboro, has 3,600 feet of runway and is the only public airport in the county. The airport became privately owned and operated in 2001. Prior to this, it was the last state run airport in Pennsylvania. The Oregon Hill Airport in the southern portion of the county is for private use and small twin-engine planes.

Source: Johnston Airport, 2008

Taxis

No taxi services are available in Tioga County.

Railroads

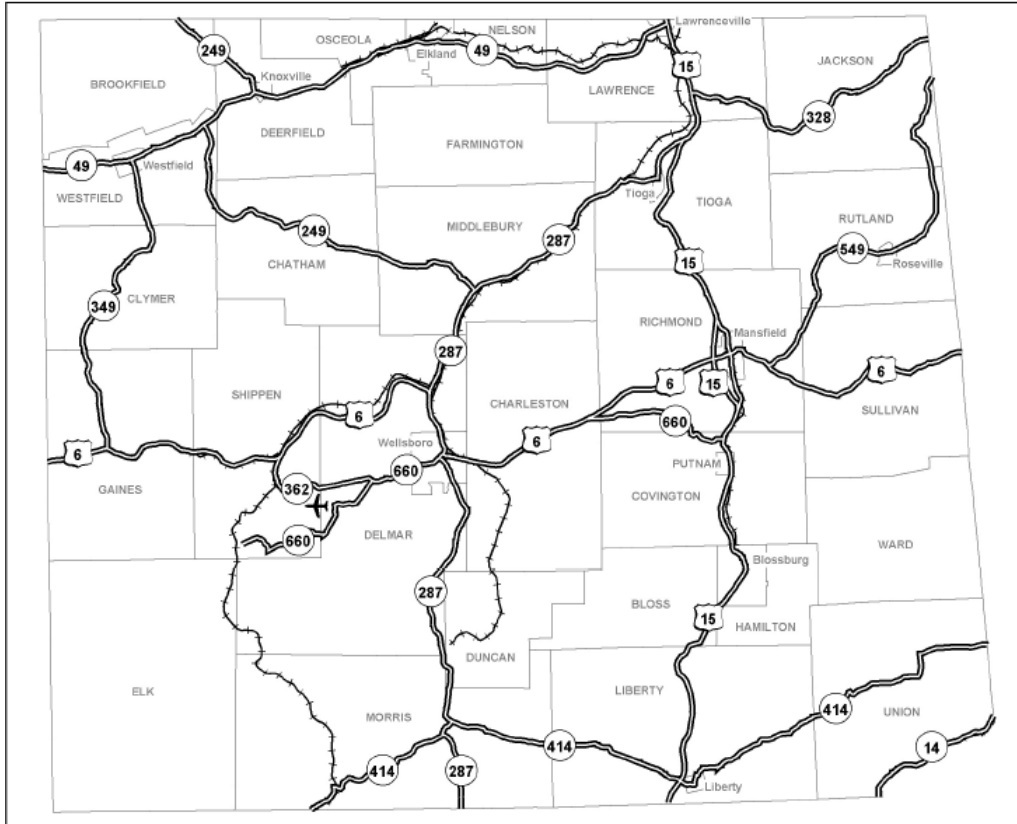
There are two railroad companies in Tioga County: Tioga Central Railroad and the Wellsboro and Corning Railway Company.

Source: Pennsylvania County Data Book, 2009

Interpretation/Implications

The lack of public transportation is a substantial disadvantage for Tioga County residents and visitors alike.

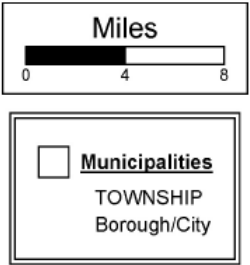
**MAP 2. TRANSPORTATION INFRASTRUCTURE
TIOGA COUNTY**



Source of Data Files:
U.S. Department of Commerce,
Bureau of the Census, 2000
Census of Population and Housing.

Source of Cartographic Files:
U.S. Department of Commerce,
Bureau of the Census, 2000
TIGER/Line Files.

Maps Prepared by:
The Pennsylvania State
Data Center.



- Interstate Highway
- U.S. Highway
- State Highway
- Airport
- Railway

H. Religion

Denomination Abbreviation	Congregations	Members	Adherents	Attendees
American Baptist Churches in the USA	9	1,322	1,602	633
Assembly of God	4	258	590	350
Baha'i	-	3	3	-
Brethren in Christ Church	1	134	134	100
Catholic	6	-	3,105	-
Christian and Missionary Alliance	2	99	281	-
Christian Church (Disciples of Christ)	2	435	527	82
Church of Jesus Christ of Latter-Day Saints	1	-	183	-
Churches of Christ	1	30	45	45
Episcopal	5	-	558	194
Evangelical Lutheran Church in America	5	431	582	190
Free Methodist Church of North America	2	63	85	83
Friends (Quakers)	1	105	127	-
General Association of Regular Baptist Churches	2	193	234	217
Lutheran Church—Missouri Synod	1	186	236	126
Mennonite Church USA	3	141	186	151
Mennonite; Other Groups	1	52	63	-
Orthodox Presbyterian Church	1	22	41	33
Presbyterian Church (USA)	7	562	682	248
Salvation Army	1	30	64	28
Seventh Day Adventist Church	2	175	208	-
United Methodist Church	33	3,506	4,247	1,665
Wesleyan Church	2	132	508	204

Source: Pennsylvania County Data Book, 2009

Interpretations/Implications

Although a wide variety of Christian denominations are present. Residents of the Jewish, Muslim or Hindu religions must travel outside the county to worship. There are no religious affiliated medical clinics in Tioga County however, two churches, the First Presbyterian in Wellsboro and the Holy Child Catholic Church in Mansfield have well established parish nursing programs. One of the two homeless shelters in the county is run by a faith based organization. There are food pantries located throughout the county, all of which are associated with local churches.

I. Safety

The following is a brief description of Tioga County’s safety services. Information included is: state, county, and local law enforcement departments; federal, state, and county prisons, and/or juvenile detention centers; paid or volunteer fire departments; ambulance services; domestic violence, child abuse, or crime survivor services; and presence of any homeless shelters, task forces, or hazmat teams.

Fire Departments

Osceola
Daggett
Knoxville
Morris
Nelson
Mansfield

Chatham
Tioga
Blossburg
Elkland
Middlebury
Millerton

Wellsboro
Crazy Horse
Clymer Hose
Lawrenceville
Liberty

Source: Tioga County Emergency Services, 2008

Police

Pennsylvania State Police
Blossburg Borough
Mansfield Borough
Wellsboro Borough

Westfield Borough
Elkland Borough
Tioga Borough
Lawrenceville Borough

Nelson Township
Osceola Township
Gaines Township

Source: Tioga County Emergency Services, 2008

Ambulance Services

Wellsboro
Mansfield
Blossburg

Tioga
Lawrenceville
Morris

Sabinsville
Valley
Soldiers & Sailors Hospital

Volunteers provide all ambulance service

Source: Tioga County Emergency Services, 2008

Jails

Tioga County Prison
Shumway Hill
Wellsboro, PA 16901
570-724-5911

Source: Tioga County Prison, 2010

SheltersWomen/Children

Haven
6 Old Tioga St.
Wellsboro, PA 16901
570-724-3549

Men/Women/Children

United Christian Ministries
167 Main St.
Osceola, PA 16942
814-258-7304

Source: Haven & United Christian Ministries, 2008

Local Domestic Violence, Child Abuse and Crime Survivor Services

Haven of Tioga County
6 Old Tioga St.
Wellsboro, PA 16901
570-724-3549

Tioga County Department of Human Services
1873 Shumway Hill Road
Wellsboro, PA 16901
570-724-5766

Juvenile Delinquent/Court Adjudicated Youth

Tioga County Department of Human Services, located 1 mile east of Wellsboro, contracts with over 30 other Pennsylvania counties to provide services to youth. There a variety of different treatment programs for juveniles.

Source: Tioga County Department of Human Services

Task Forces

Safe Kids Tioga County, a part of the Kids First Workgroup of the Tioga County Partnership of Community Health, identifies and addresses safety issues for Tioga County's children.

Child Death Review Team, newly formed in Tioga County to promote the safety and well-being of children and to identify and reduce preventable childhood fatalities.

Domestic Violence Task Force, insures the needs of domestic violence/sexual assault victims are being met in Tioga County.

Hazmat

Tioga County has a Hazmat response team whose efforts are focused on planning and response capability for the release of harmful substances, including industrial and municipal waste and sewage as well as potential releases along transportation routes within Tioga County. The expansion of route 15/I-99 corridor will potentially increase risk for highway releases.

Source: Dennis Colegrove, May 21, 2008

Types of Crimes (2007)

Type of Crime	# in Tioga County	County Rate per 100,000	# in Pennsylvania	State Rate per 100,000
Aggravated Assault	32	78.7	27,440	220.7
Arson	5	12.3	2,381	19.2
Burglary	175	430.2	54,506	438.4
Driving under the influence	125	307.3	54,065	434.9
Larceny	260	639.1	203,959	1640.5
Motor Vehicle Theft	24	59.0	25,994	209.1
Murder	0	0	727	5.8
Negligent Manslaughter	0	0	37	0.3
Property Crime	464	1,140.6	286,840	2,307.1
Rape	5	12.3	3,376	27.2
Robbery	2	4.9	19,192	154.4

Source: Pennsylvania County Data Book, 2009

Child Abuse Rates

Description	Pennsylvania			Tioga County		
	2006	2007	2008	2006	2007	2008
Substantiated reports per 1,000 children	1.4	1.4	1.5	2.2	3.5	3.7

Source: www.ruralpa.org

Interpretations/Implications

In 2008, Tioga County's serious crime rate per 100,000 residents is 3,007, which is substantially less than the state rate of 5,303. The most prevalent crimes are larceny, DUI, and burglary. Conversely, Tioga County has demonstrated consistently higher rates of substantiated reports of child abuse, and in 2008 the rate was over twice the state rate.

J. Environmental

According to the World Health Association, environmental health comprises those aspects of human health, disease, and injury that are determined or influenced by factors in the environment. Due to this environmental impact on human health, protecting the natural environment is the mainstay of public health protection practices.

In Pennsylvania, environmental health services are currently provided by a variety of State, Federal, and Local government entities, such as Department of Environmental Protection (DEP), Department of Agriculture (PDA), and Department of Health (DOH).

1. Air Quality

Outdoor

Outdoor air pollution is a widespread public health and environmental concern in the United States. Ambient air quality is regulated in the Commonwealth by DEP and by Federal Environmental Protection Agency regulations.

General information on ambient air within Tioga County can be obtained from DEP's Bureau of Air Quality website: <http://www.dep.state.pa.us/dep/deputate/airwaste/ag/default/htm>.

Tioga County meets national air quality standards with regard to carbon dioxide, nitrogen and sulfur dioxides, ozone and particulate matter.

Source: Community Health Status Report, July 2000

Indoor

Indoor air quality is currently regulated only in certain manufacturing situations by the United States Department of Labor's Occupational Safety and Health Administration (OSHA) <http://www.osha.gov/>.

The Pennsylvania Department of Health has an Environmental Health Specialist (EHS) assigned to each District to provide information and education to private citizens on reducing indoor air hazards in residential situations, schools, and other environments which are unregulated. The EHS also provides information regarding citizen concerns for indoor environment contaminants.

Resources for indoor air information can be found at: <http://www.epa.gov/iaq>

2. Water Quality

The United States Environmental Protection Agency has delegated the implementation of water quality standards to individual states. In Pennsylvania, several bureaus within DEP have responsibility to protect human health and natural environments.

An area of concern related to water quality is public bathing facilities. Public bathing facilities includes: swimming pools, wading pools, hot tubs/spas, beaches, water slides, and spray grounds. These facilities are required to be inspected annually. Adherence to operational standards of public bathing facilities is effective in reducing waterborne illnesses. “Title 28 health and Safety, Chapter 18 Public Swimming and Bathing Places,” is the regulatory code for the Commonwealth’s public swimming and bathing places. Additional information can be found at http://www.pacode.com/secure/data/028/chapter18/028_0018.pdf.

There are 17 public bathing facilities located throughout Tioga County. There were 25 inspections, zero follow-up visits, zero closures, and 27 violations for Tioga County.

The public bathing facilities located in camp settings are also of great importance. In Pennsylvania, any camps that are held for a minimum of five days are mandated to register with the Department of Health.

Upon receipt of the registration of a camp that has a public bathing facility, the Department of Health will then conduct an inspection of the camp’s facility. This is another important part of the Commonwealth’s plan to protect the health of its citizens.

Sewage disposal systems are another area of concern in relation to water quality. The Pennsylvania Code, Chapter 72 defines a sewage facility as a system of sewage collection, conveyance, treatment and disposal which will prevent the discharge of untreated or inadequately treated sewage or other waste into waters of the Commonwealth. The water quality of creeks, streams, rivers, and lakes is monitored periodically for contaminants from municipal and industrial waste water.

Several townships in the county have recently required their residents to switch from their private septic systems to newly created sewage treatment systems.

Source: Northcentral Area Health education Center, 2008

3. Land Quality

The quality of land is affected by multiple environmental and societal factors. Some examples of these are municipal waste sites, toxic waste/superfund sites, tire waste sites, and coal mining sites. The presence of things such as, recycling programs or mine reclamation programs available within a county assist to preserve or improve the quality of land within that county.

Tioga County has two unlined landfills located in Blossburg and Antrim. They accept exclusively construction/demolition waste. Municipal waste for the county is transported to landfills in New York State and Bradford County.

Many boroughs and townships in Tioga County have voluntary recycling programs.
The following locations have drop-off recycling:

Brookfield Township
Charleston Township
Chatham Township
Clymer Township
Gaines Township
Hamilton Township
Jackson Township
Liberty Township

Morris Township
Richmond Township
Rutland Township
Shippen Township
Sullivan Township
Tioga Borough
Union Township

The following have curbside recycling programs

Elkland Borough
Mansfield Borough
Putnam Township

Westfield Area
Wellsboro Borough

Source: Northern Tier Solid Waste Authority, Erin Route, May 27, 2008

Nineteen and a half miles of Babb's Creek and its tributaries have been cleaned up in a mine reclamation effort: there are several grants pending for several more reclamation projects.

Source: E. Tomlinson, Tioga County Conservation District, May 21, 2008.

Interpretation/Implications

Tioga County has few large industries capable of producing environmental hazards. This, combined with the sparseness of the population is favorable for air, water and land quality. The lack of fluoridated water supplies increases the risk of dental caries in the population. The existence of tire piles in the county, are a potential breeding ground for mosquitoes, increasing the risk of West Nile Virus.

K. Recreation

Indoor and outdoor recreational activities abound in Pennsylvania. With its natural beauty and rich history and heritage, the possibilities are almost endless. Just a few of the activities or places to visit are state parks, historical sites, trails, sports teams, theaters or Centers for the Arts, golf courses, race tracks, and attractions such as amusement parks or fairs.

Major attraction

Pennsylvania Grand Canyon-Pine Creek Gorge, commonly referred to as the Grand Canyon of Pennsylvania is surrounded by approximately 165,000 acres of the Tioga State Forest. The Canyon begins south of Ansonia along US Route 6 and continues for approximately 47 miles. The maximum depth of the canyon is 1,450 feet at Waterville, near the southern end. At Leonard Harrison and Colton Point State Parks, the depth is more than 800 feet. These overlooks offer the most spectacular view. Pine Creek Gorge received national acclaim in 1968 when the National Park Service designated a 12-mile section as a National Natural Landmark.

Source: www.visittiogapa.cpm

State forest lands

148,620 Acres

State Parks

Leonard Harrison State Park

On the east rim of the Grand Canyon of Pennsylvania, the 585-acre Leonard Harrison Stat Park has modern facilities, a visitor center and the most famous scenic views of the canyon.

Colton Point State Park

On the west rim of the Grand Canyon of Pennsylvania, the 368-acre Colton Point State Park resonates with the rustic charm of the Civilian Conservation Corps era of the 1930s. The rugged overlooks offer great views of the canyon.

Hills Creek State Park

This 407-acre State Park, located in north central Tioga County, is just north of US 6 and midway between Wellsboro and Mansfield. This park abounds in wildlife, and the focal point of the park is a 137-acre lake.

Source: www.visitiogacountypa.com

Federal Parks and Recreation Areas

Tioga-Hammond Lakes

Tioga-Hammond Lakes is located along Route 15 and 287. Ives Run, the campground located on Hammond Lake, is 12 miles north of Wellsboro and 4 miles south of Tioga on Route 287. Hammond Lake features 685-acre Lake and the park area is 3,073 acres. Tioga Lake includes the Lambs Creek areas just a few miles north of Mansfield. The lake is 498 acres of surface water, and the park area is 2,793 acres.

Cowanesque Lake

Cowanesque Lake is located two miles west of Lawrenceville along Bliss Road. It features a 2,734-acre park with a 1,085-acre lake.

Source: www.visittiogapa.com; www.nab.usace.army.mil

Outdoor Activities

Outdoor activities include: Hunting, Biking, Fishing, Horseback Riding, Skiing, Camping, Swimming, golf, boating, Tennis, Hiking and Fishing.

Main Recreation Facilities

Type	Number	Location(s)
Public Golf Courses	3	Wellsboro, Mansfield, Westfield
Miniature Golf	2	Wellsboro, Mansfield
Bowling Alleys	3	Wellsboro, Mansfield, Westfield
Public Pools	4	Wellsboro, Mansfield, Blossburg, Tioga
Ski Centers	1	Morris
Zoos	1	Wellsboro

Source: Yellow Book, 2007

Festivals/Fairs

Pennsylvania State Laurel Festival held in June in Wellsboro.

1890's Weekend held in September in Mansfield.

Rattlesnake Hunt held in June in Morris.

Tioga County Fair held in August in Whitneyville.

Dickens of a Christmas held in December in Wellsboro.

Interpretation/Implications

Most recreation in Tioga County is based on outdoor events and sports. Tourism based on outdoor activities is a large source of income for the county.

Source: www.ruralpa.org

III. HEALTH AND HUMAN SERVICES ANALYSIS

A. Medical and Dental Societies

Medical Society	Dental Society
Darius Abadi, DO 1 Main St. Wellsboro, PA 16901 570-723-0716	Dr. Richard Black, DMD, MPH 15 Meade St., U-5 Wellsboro, PA 16901 (570) 724-2141

B. ACT 315 & Boards of Health

Act 315-None

Local Boards of Health		
County/Municipality	Health Officer	Contact Agent
None		

Source: Pennsylvania Department of Health (District Offices)

C. Federal Qualified Health Center (FQHC)/Rural Health Center (RHC)

Tioga County Automatic Facility Designations

Name	Type		HPSA Type	Designation Date
North Penn Comprehensive Health Services	CHC	Wellsboro	Primary Care	10/26/02
North Penn Comprehensive Health Services	CHC	Wellsboro	Dental	10/26/02
North Penn Comprehensive Health Services	CHC	Wellsboro	Mental	10/26/02
Westfield Health Center (Charles Cole)	RHC	Westfield	Primary Care	09/30/03

CHC=Community Health Center

RHC=Rural Health Center

Source: <http://www.dsf.health.state.pa.us/health/lib/health/primarycare/autohpsa.pdf>

D. Health Profession Shortage Area (HPSA)

Tioga County HPSA Designations

Type of Designations	Name of Designation	Areas Designated	Date Designated
Primary Care Geographic HPSA	Canton Service Area	Blossburg & Liberty Boros: Bloss, Covington, Sullivan, Hamilton, Liberty, Putnam, Union & Ward Twps.	3/01/06
Primary Care Geographic HPSA	Elkland (PA/NY)	Farmington, Lawrence, Middlebury, Nelson, Osceola & Tioga Twps: Elkland, Lawrenceville, & Tioga Boros.	2/22/06
Primary Care Population HPSA	Low Income Coudersport	Gaines Twp.	10/17/06
Primary Care Geographic HPSA	Westfield	Brookfield, Chatham, Clymer, Deerfield & Westfield Twps; Knoxville & Westfield Boros.	1/10/05
Dental Population HPSA	Low Income Tioga	Total Tioga County	4/20/05
Mental Health	Tioga	Total Tioga County	11/03/05

Geographic HPSA			
Medically Underserved Area	Deerfield	Deerfield, Elkland, Farmington, Nelson & Osceola Twps; Elkland & Knoxville Boros.	5/4/94
	Jackson	Jackson, Lawrence, Richmond, Rutland, Sullivan & Tioga Twps; Lawrenceville, Mansfield, Roseville & Tioga boros.	5/14/94
	Morris	Morris Twsp.	7/12/94

Source: <http://www.dsf.health.state.pa.us/health/cwp/view.asp?A=169&Q=227909>

E. Public Health Preparedness Services

The Pennsylvania Department of Health can help all Pennsylvanians prepare for and respond to a public health emergency. There are many things that can be done to help families and communities prepare for public health emergencies.

All Commonwealth citizens need to know that there are well-developed and well-rehearsed emergency response plans at all levels of government. At the center of this effort is the important issue of citizen preparedness.

The PA Department of Health has a web page, with multiple links, which makes the most current information available to the public (<http://www.health.state.pa.us>; pandemicflu.state.pa.us).

Federal Emergency Management Agency (FEMA)

The Federal Emergency Management Agency is a federal agency that was created to deal with disasters. It provides aid and assistance to state and local agencies and governments in the form of grants, loans, supplies, and information. The United States is divided into ten (10) regions. Pennsylvania is part of Region III which includes West Virginia, Virginia, Maryland, Delaware, and Washington, D.C.

Federal Emergency Management Agency
500 C Street S. W.
Washington, DC 20472
800-621-FEMA (3362)

Source: www.fema.gov

Pennsylvania Emergency Management Agency (PEMA)

The Pennsylvania emergency Management Agency is a state agency created to deal with disasters. The mission of PEMA is to coordinate state agency response, including the Office of the State Fire Commissioner and Office of Homeland Security, to support county and local governments in the areas of civil defense, disaster mitigation and preparedness, planning, and response to and recovery from man-made or natural disasters. PEMA maintains communications with 67 county emergency management agencies, monitoring local conditions and providing state government support as appropriate. PEMA has divided the state into three geographical areas: the western area, central area, and eastern area with Tioga County falling in the Central area.

Director Central Area Office
Pennsylvania Emergency Management Agency
2605 Interstate Drive
Harrisburg, Pennsylvania 17110

Source: <http://www.pema.state.pa.us/>

Regional EMS Council

There are sixteen (16) Regional EMS Councils throughout the Commonwealth whose function is to plan, develop, maintain, expand, and improve EMS systems within a specific geographical area.

This county medical service is a branch of county management agencies dealing with local ambulance services, and medical first responders such as paramedics and hospital emergency rooms.

LTS EMS Council
542 County Farm Road, Suite 101
Montoursville, PA 17754-9621
800-433-9063

Counties served: Lycoming, Sullivan, & Tioga

Local Emergency Planning Committee (LEPC)

Every county in the Pennsylvania has an LEPC. The LEPC has input in the development of county emergency response plans and reports information to local first responders.

Membership in the LEPC includes the County Emergency Management Agency (EMA), Public Departments, Fire Departments, Haz Mat Teams, Emergency Medical Services Councils (EMS), Hospitals, and field representatives from DOH, DEP, DOA, PEMA, and local industries.

Tioga County Department of Emergency Services
Tioga County Courthouse
118 Main Street
Wellsboro, PA 16901
Administrative Office: 570-724-9110 or 877-846-4291
dcohick@tiogacountypa.us
General email: emergencyservices@tiogacountypa.us

Source: <http://www.tiogacountypa.us/tioga/cwp/view.asp?a=887&Q=432064>

LEPC

Tioga County Department of Emergency Services
Tioga County Courthouse
118 Main Street
Wellsboro, PA 16901
Administrative Office: 570-724-9110 or 877-846-4291
dcolegrove@tiogacountypa.us

Tioga County LEPC meets on the third Thursday of each month at 1500 in the EMS Conference room located in the basement of the Tioga County Court House, Wellsboro, PA.

Source: <http://www.pema.state.pa.us/pema/cwp/view.asp?a=354&q=252367&pemaNav=>

Task Forces

In response to the growing threat of the use of weapons of mass destruction, a major effort was launched several years ago to properly organize the most effective plan for Regional Counter-Terrorism Task Forces.

The development of county task forces is the first step. These task forces may consist of elected leadership, appointed officials and chief representatives for first responders.

The Regional Counter-Terrorism Task Forces are the county groups augmented by various state and federal officials having regional responsibilities in the area of Regional Counter-Terrorism. These task forces may consist of agencies such as Federal Bureau of Investigation, Bureau of Alcohol, Tobacco, and Firearms, Pennsylvania State Police, Environmental Protection, and Health and Medical organizations.

The North Central Region Task Force (NCRTF) is made up of representatives from Tioga, Potter, Bradford, Sullivan, Lycoming, Clinton, and Union Counties who are responsible for coordination and planning at the regional level. The goals of the NCRTF are response to weapons of mass destruction (WMD) events from local, regional, and state perspectives; meeting face-to-face to form relationships before an event occurs; and to identify regional resources and develop protocol to utilize resources during an event, and practice/improve response plans through scheduled functional and tabletop exercises. A decontamination trailer purchased with NCRTF funding has been assigned to Tioga County.

Source: <http://www.homelandsecurity.state.pa.us/homelandsecurity/cwp/view.asp?a=378&q=127249>

Department of Emergency Services
Sullivan County Court House
Main & Muncy Streets
Laporte, PA 18626
570-946-5010

Source: Personal communication, Dennis Colegrove, May 2008

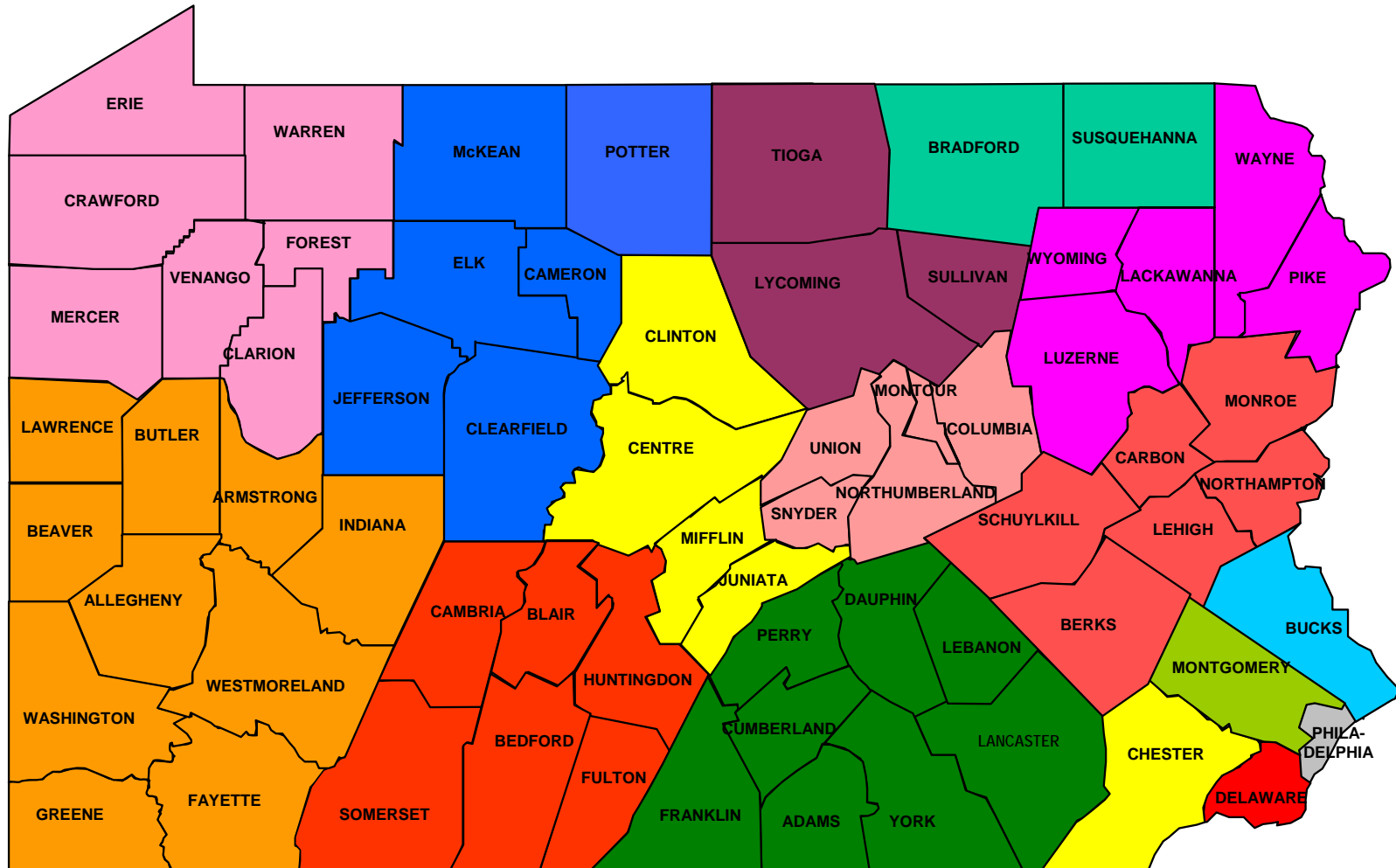
National Incident Management System (NIMS)

The National Incident Management System was developed from a Presidential Directive that was issued after the September 11, 2001 terrorist attacks on the United States. This system provides a consistent nationwide template which enables Federal, State, Local, private-sector, and nongovernmental organizations to work together effectively and efficiently in preparing for, preventing, responding to, and recovering from domestic incidents, regardless of the cause, size or complexity of the incident.

Maps for Public Health Preparedness

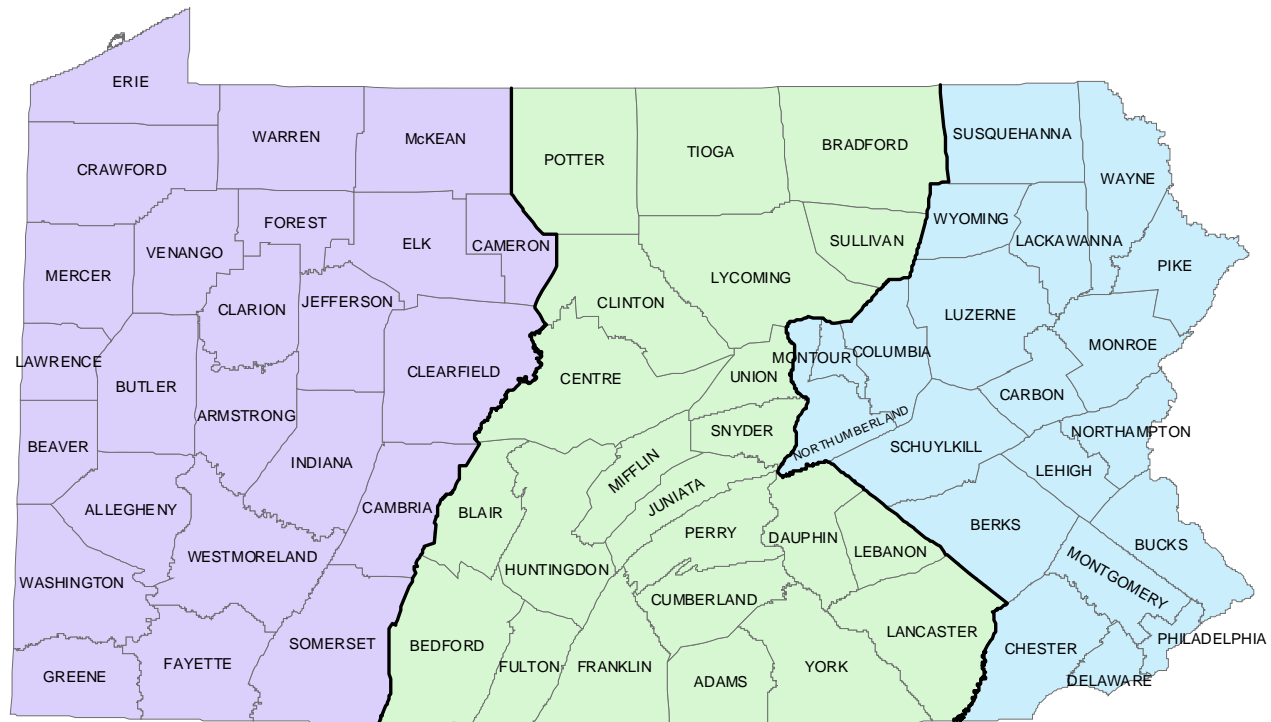
The following maps can be found on the following pages: Emergency Medical Services Regions, Department of Health District Map, PEMA Map, and Regional counter-Terrorism Task Forces Map.

EMERGENCY MEDICAL SERVICES REGIONS

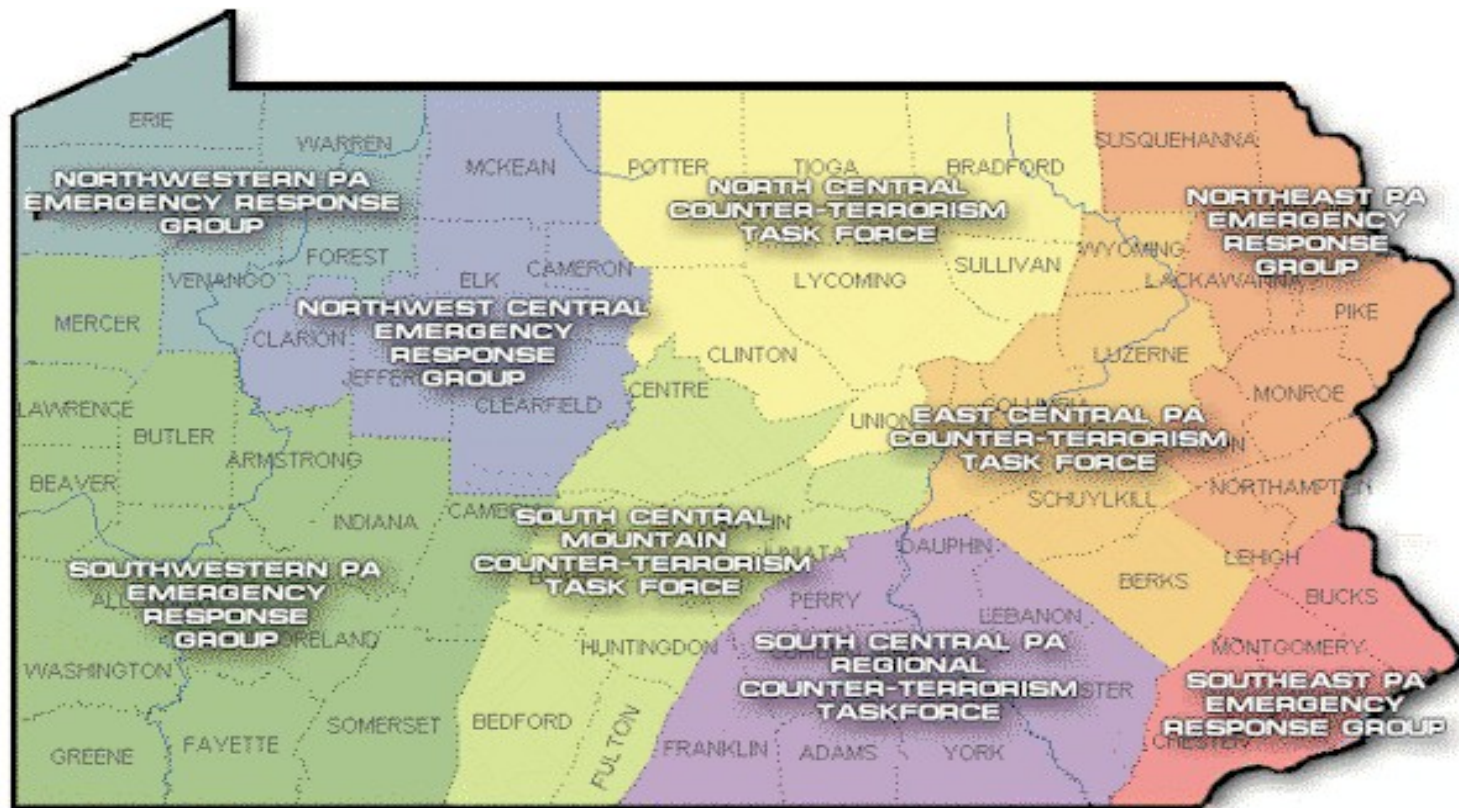


12/11/00

PEMA AREAS



Regional Counter-Terrorism Task Force



F. Hospitals and Managed Care Organizations

Hospitals		
Hospital	Licensed Beds	Long Term Care Facility
Soldiers & Sailors Memorial Hospital 32-36 Central Avenue Wellsboro, PA 16901 570-724-1631	83	No

Managed Care Organizations	
Tioga CareNet 22 Walnut Street Wellsboro, PA 16901 570-723-0560	Community Care Behavioral Health Organization 1 Chatham Center, Suite 700 112 Washington Place Pittsburgh, PA 15219 866-878-6046

Source: TCDHS, personal communication, May 2008

G. Other Health Care Services

Mental Health Facilities (Inpatient)	
Soldiers & Sailors Memorial Hospital Laurel Behavioral Health 32-36 Central Avenue Wellsboro, PA 16901 800-808-5287	Martha Lloyd Community Services 280 Brooklyn St. Mansfield, PA 16933 570-513-0818

Source: Yellow Book 2009/2010, Wellsboro/Tioga County

Mental Health Facilities (Outpatient)	
Soldiers & Sailors Memorial Hospital Laurel Behavioral Health Partial Hospitalization 32-36 Central Avenue Wellsboro, PA 16901 800-808-5287	Tioga County Department of Human Services Tioga Counseling Services St. James Complex, Building A Mansfield, PA 16933 570-662-7600
Mental Health Associates St. James Complex Mansfield, PA 16933 570-662-1064	Laurel Youth Services 520 Ruah St. Blossburg, PA 16912 570-638-1210
Martha Lloyd Community Services 280 Brooklyn St. Mansfield, PA 16933 570-513-0818	

Drug and Alcohol Centers

Harbor Counseling, Inc. 7095 Route 287, Wellsboro, PA 16901 570-724-5272	Tioga Counseling Services St. James Complex, Building A Mansfield, PA 16933 570-662-7600
Soldiers and Sailors Memorial Hospital 32-36 Central Avenue Wellsboro, PA 16901 570-724-1631	Caron Foundation 335 Church St. Westfield, PA 16850

Source: Tioga County Health Profile, 2009;
Yellow Book 2009/2010, Wellsboro/Tioga County

Dental Services

Dentists and Dental Hygienists, (2008)

Description	Dentists	Dental Hygienists
Pennsylvania	7,969	6,895
Tioga County	18	8

Source: Pennsylvania County Data Book, 2009

In early 2003, a dental clinic was established in Tioga County to serve very low income and Medical Assistance clients.

Source: Pennsylvania County Data Book, 2009

H. Nursing Homes

Nursing Homes (2007)

Description	Pennsylvania	Tioga County
Total Number	725	3
Licensed/Approved Beds	89,236	268

Source: Pennsylvania County Data Book, 2009

Nursing Homes	
Broad Acres Health & Rehabilitation Center 1883 Shumway Hill Road Wellsboro, PA 16901 570-724-3913	Carelton Senior Care & Rehabilitation Center, LLC 10 West Avenue Wellsboro, PA 16901 570-724-2637
Laurel Health System The Green Home 37 Central Avenue Wellsboro, PA 16901 570-724-3131	

Source: Yellow Book 2009/2010, Wellsboro/Tioga County

I. Health Care Professionals (2008)

Type of Professional	State	Tioga County
Active Physicians & Surgeons – MD’s	32,888	43
Licensed Certified Registered Nurse Practitioners	5,324	18
Licensed Dentists	7,969	18
Licensed Practical Nurses	51,958	215
Licensed Registered Nurses	170,149	353

Source: County Data Book, 2009

J. County Human Services

The following is a brief description of the Human Service Agencies located in Tioga County and the services they offer, and any Community Service Organizations which collaborates with the State Health Center staff.

B/S/S/T Area Agency on Aging
48 Plaza Lane
Wellsboro, PA 16901
570-723-0935

The B/S/S/T Area Agency on Aging serves as a community resource for citizens age 60 or older residing within the counties of Bradford, Sullivan, Susquehanna, and Tioga in the Endless Mountains Region of Northeastern Pennsylvania. The organization promotes independent, healthy lifestyles for seniors and provides support for family members who may serve as their caregivers.

Bradford-Tioga Head Start/Early Head Start
Laurel Health System
5 Riverside Plaza
Blossburg, PA 16912
570-638-1400

Preschool education program based on federal income guidelines. BTHS/EHS also provides a range of screenings for preschoolers enrolled in the program, including developmental, speech, hearing, vision, and dental, as well as medical examinations. Pregnant females or families with a child birth through age three may qualify for services from Early Head Start.

Early Intervention
1873 Shumway Hill Rd
Wellsboro, PA 16901
570-724-5766

Early intervention services and supports are provided to families, infants, and toddlers with disabilities and at-risk children to maximize the child's developmental potential. Service planning and delivery are founded on a partnership between families and early intervention personnel which is focused on meeting the unique needs of the child, addressing the concerns and priorities of each family and building on family and community resources.

Tioga County Housing Authority
4 Riverside Plaza
Blossburg, PA 16912
570-638-2151

Provides rental assistance to low income county residents in renting suitable housing. Section 8 housing voucher program.

Partners in Progress
332 S. Main St.
Mansfield, PA 16933
570-662-0705

Vocational training for individuals with special needs, school to work transition for teens, assist with job search and job coaching, vocational assessment and personal work adjustment training, and provide transportation for workshop employees.

Tioga County Probation Department
118 Main St.
Wellsboro, PA 16901
570-724-9340

Provides the Court of Common Pleas and community an effective and efficient delivery of correctional services involving the supervision of both adult and juvenile offenders being especially concerned with public safety along with coordinating activities designed to allow offenders to become productive members of society.

Penn State Cooperative Extension
118 Main St.
Wellsboro, PA 16901
570-724-9120

PSCE works to enhance the quality of life of Pennsylvanians by providing non-formal outreach educational opportunities to individuals, families, businesses, and communities throughout the Commonwealth. Extension provides educational programs to enable the Commonwealth to maintain a competitive, environmentally sound food and fiber system, as well as to prepare youth, adults, and families to participate more fully in community decisions.

American Red Cross
61 Main St.
Wellsboro, PA 16901
570-724-2941

The ARC is a humanitarian organization led by volunteers, guided by its Congressional Charter and the Fundamental Principles of the International Red Cross Movement, will provide relief to victims of disasters and help people prevent, prepare for, and respond to emergencies.

Tioga County Visitors Bureau
114 Main St.
Wellsboro, PA 16901
570-724-0635

Actively markets Tioga County as a desirable destination for travelers and assists in economic development by providing information about the region, with the objective of being a positive economic stimulator for the tourist industry.

CareerLink
56 Plaza Lane
Wellsboro, PA 16901
570-724-1939

One-stop delivery of career services to job seekers, employers and other interested individuals, providing access to employment, education and training resources.

The Trehab Center
52 Plaza Lane
Wellsboro, PA 16901
570-724-5252

Provides work force investment, supportive work, housing development, homeownership, and weatherization programs.

Tioga County Assistance Office
11809 Route 6
Wellsboro, PA 16901
570-724-4051

Financial, medical, and housing assistance based on income eligibility.

Helping Abuse & Violence End Now (HAVEN)
6 Old Tioga St.
Wellsboro, PA 16901
570-724-3549

Shelter and options counseling for victims of domestic violence and sexual assault.

WIC
5 East Ave.
Wellsboro, PA 16901
570-724-5910

Provides healthy supplemental foods and a range of nutrition services for pregnant women, infants, and children under age five in a supportive environment.

Domestic Relations
118 Main St.
Wellsboro, PA 16901
570-724-9330

The Domestic Relations Section is a Court-appointed office of the Tioga County Court of Common Pleas. The office is responsible for preparing Complaints and Petitions for the establishment and enforcement of child support, spousal support and/or alimony pendente lite orders for the Court. Domestic Relations will also establish paternity when necessary, locate missing parents and resolve medical insurance and expense issues between separated parents.

Blast IU #17
P.O. Box 3609
Williamsport, PA 17701
570-323-8561

Seeks to expand educational and business management services to meet the changing needs of schools in Bradford, Sullivan, Lycoming, & Tioga Counties.

Guideline
Laurel Health System
22 Walnut St.
Wellsboro, PA 16901
800-332-6718
Toll-free information and referral source.

Senior Centers

Laurel Health System

Elkland 814-258-0763

Millerton 570-537-6550

Wellsboro 570-724-3991

Mansfield 570-662-2130

Westfield 814-367-5695

The purpose of the Senior Community Center is to facilitate the social, emotional, and physical well-being of older adults. Senior Community Centers provide access to community resources as well as providing services and activities that maintain independence and wellness. Additionally, they attempt to overcome the barriers of isolation, promote self-growth, and assist older adults to attain maximum performance within the community.

Endless Mountains Transportation Authority (EMTA)

27824 Route 220

Athens, PA 18810

800-242-3484

Provides a variety of safe, reliable, and efficient mobility services to the communities of Bradford, Sullivan, and Tioga counties.

Mansfield University

Mansfield, PA 16933

570-662-4000

A four year, public liberal arts University located in Mansfield, PA.

Pennsylvania College of Technology – North Campus
12880 Route 6
Wellsboro, PA 16901
570-724-7703

Services Northern Tier business and industry training needs, as well as noncredit personal and professional development.

Tioga County Partnership for Community Health
5 East Avenue, PO Box 812
Wellsboro, PA 16901
570-723-0520

Provides innovative leadership for improving the health and quality of life of individuals and communities in Tioga County.

Tioga County Department of Human Services
1873 Shumway Hill Rd
Wellsboro, PA 16901
570-724-5766

TCDHS is modeled on three basic building blocks: administration; service management; and service provision. This structure fuses the administrative and case management functions of four traditionally separate human service programs under one umbrella: Mental Health; Mental Retardation; Drug and Alcohol; and Children and Youth.

USDA, Wellsboro Service Center
50 Plaza Lane
Wellsboro, PA 16901
570-724-4812

The *Farm Service Agency* implements agricultural policy, administers credit and loan programs, and manages conservation, commodity, disaster and farm marketing programs through a national network of offices.

The *Natural Resources Conservation Service* provides leadership in a partnership effort to help people conserve, maintain and improve our natural resources and environment.

The *TC Conservation District* was established by the Tioga County Commissioners on November 4, 1946, with the primary mission to control and prevent soil erosion. The current mission is to provide for the conservation of natural resources of Tioga County through leadership, education, and technical assistance.

Tioga County Development Corporation
114 Main St.
Wellsboro, PA 16901
570-723-8232

Fosters and promotes economic development in Tioga County.

Laurel Mountain Habitat for Humanity
P.O. Box 547
Mansfield, PA 16933
570-376-2313

Build and renovate affordable housing, the houses are then sold to those in need at no profit and with no interest charged.

Seeds of Hope Partners
P.O. Box 256
Tioga, PA 16946
570-835-5169

A volunteer organization created to assist families in crisis; providing the basic needs to maintain intact families and aid in reunifying families.

Child Care Information Services of Tioga County
5 East Avenue
Wellsboro, PA 16901
570-724-5766 or 800-242-5766

CCIS agencies are the hub of child care information providing families with information on quality child care and personalized child care referrals to child care providers based on specific needs or preferences. CCIS also administers the Child Care Works subsidized child care program in Tioga County.

K. Partnerships and Coalitions

In communities across the Commonwealth a variety of individuals and organizations come together as collaboratives to achieve common goals. Members of these groups may represent health and human service organizations, hospitals and health systems, education institutions, and local government. They strive to assess health-related needs in their communities, prioritize them, and take action to address them.

The following is a brief description of the Partnerships and Coalitions in Tioga County.

Tioga County Partnership for Community Health
Debra Atkins, Executive Director
PO Box 812
Wellsboro, PA 16901
570-723-0520

Statement of Intent: to provide innovative leadership for improving the health and quality of life of individuals and communities in Tioga County.

Affiliated Work Groups	Focus/Priority Areas
Communities that Care	To identify and facilitate needed services for healthy youth development.
ATOD Resource Network (Alcohol Tobacco, & other drug)	Serves as a forum to facilitate information sharing among providers & to serve as a community resource.
Immunization Work Group	To increase immunization rates in Tioga County
Kids First Work Group	To improve the quality of life for uninsured children in Tioga County
Healthy Families Work Group	To engage community residents and service providers in education, management and prevention of chronic health conditions
Elder Services Work Group	To address the unmet needs of senior citizens of Tioga County
Tobacco and Asthma Coalition	Promotes a tobacco-free message and clean indoor air. Seeks to reduce the number of tobacco users, and the number and severity of asthma episodes.
Measurements & Outcomes Work Group	To provide data support & information to the partners, governing structure & staff of the Partnership
Disabilities Awareness Network	To promote & encourage the employment of people with disabilities through publicity, advocacy & resolution of access barriers-both environmental & attitudinal.
Tioga County Countryside Council	To facilitate countywide communications, planning, visioning and cooperative action throughout Tioga County
Mental Health Action Team	To improve the quality of mental health services available in Tioga County
Community Health Awareness	To recruit, train, develop and engage caring individuals to become involved in community leadership activities in Tioga County
National Alliance for the Mentally Ill (NAMI)	To foster public awareness & education about mental illness, to provide support to mental health consumers, their families and friends and to advocate for all who suffer from mental illness in Tioga County
Poverty Work Group	To promote and improve quality of life and health status of people who are economically disadvantaged.
Obesity Collaborative	A forum for finding ways of responding to childhood obesity and making environments more supportive of healthy choices.
Tioga County Early Care & Education Team (TECET)	To combine the resources & services of the community, childcare providers, & parents to educate & prepare children for success in school & life.
Planning Committee	Assists the Partnership's Executive Committee in planning, evaluating, and recommending programming options for the Partnership.

Source: TCPCH Report to the Community, Spring 2008

Coalitions not associated with Tioga County Partnership for Community Health

Work Group	Focus/Priority Areas
Tioga County Children & Youth Multidisciplinary Disciplinary Team	To assist Child Protective Services in prevention, investigation and treatment of child abuse in Tioga County
Domestic Violence Task Force	To ensure that the needs of domestic violence/sexual assault victims are being met in Tioga County
Bradford/Tioga County Head Start Health Advisory Board	To provide eligible children/families with education and social services to empower them to deal with life's responsibilities.
Tioga County Department of Human Services Advisory Board/Drug & Alcohol Planning Council (SCA)	To review, evaluate and make recommendations regarding mental health and retardation, drug and alcohol and children and youth services and programs in the county to the Human Services Administrator and/or County Commissioners
Local Interagency Coordinating Council	To ensure all children/families in need of early intervention services are identified and provided with services.
Child Death Review Team	To promote the safety and well-being of children and to reduce preventable child fatalities.

Source: TC SHC, personal communication, May 2008

Voluntary Organizations		
Chambers of Commerce	Elkland Business Association	AARP
ABATE	Disabled American Veteran	American Legion
American Heart Association	Tioga County Red Cross	Special Olympics
Habitat for Humanity	Tioga County Women's Coalition	VFW's
Retired Teachers	PTA/PTO's	Rotary Clubs
Mason's	Eastern Star	55-Plub Club
Girl Scouts	Boy Scouts	Jaycees
BPW	Lions Club's	Loyal Order of the Moose
Mops	Rebekah's	Kiwanis
Home-N-Center Service	Audubon	PA Snowmobile Club
Betterment Organization of Mansfield	Hospice (North Penn Home Health)	Soldier's & Sailor's Hospital Volunteers
Head Start	Friends of Library	Tioga County Cancer Society
Guideline	Citizens Corp	CART

Source: Yellow Book 2008-2009, Wellsboro/Tioga County

L. Interpretation/Implications

Tioga County has a well-developed County Partnership with a membership in excess of 350. Through the various work groups and committees, the Partnership strives to identify and respond to community and health related issues such as education, employment, environment, and lifestyle choices. The Tioga County Partnership for Community Health celebrates 15 years of successful collaboration in 2008.

In October 2002, all of Tioga County received the Dental Low Income HPSA designation. Through the collaborative efforts of Laurel Health System, Northcentral Area Health Education Center, Tioga County Partnership for Community Health, Tioga County Dental Society, Temple University School of Dentistry, Pennsylvania Department of Health, and State Representative Matt Baker, a full service dental clinic opened its doors at the Laurel Health Center in Lawrenceville early in 2003.

The dental clinic had been instrumental in addressing the lack of available dental services for very low income and Medicaid populations. Oral health and access to dental services remain high priorities in Tioga County.

Numerous areas of the county have been designated as Medically Underserved since 1994. Six Laurel Health Federally Qualified Health Centers, located throughout Tioga County, provide primary health care on a sliding fee scale for low-income clients and families.

Tioga County, in its entirety, received Mental Health Geographic HPSA status in October 2002. Gaps in service and emerging mental health needs have been identified as a priority area for the county. The Partnership's Mental Health Action Team and NAMI Work Group have forged a partnership with the Penn State College of Medicine, Department of Psychiatry. Through the use of technology, staff and faculty at the Penn State College of Medicine facilitate educational and consultative opportunities for mental health professionals in Tioga County. Recruitment of psychiatrists continues to challenge health care delivery systems in Tioga County.

IV. HEALTH STATUS INDICATORS

A. Category for Health Action: Chronic Disease

In 1991 Health Status Indicators were initially developed by the Centers for Disease Control and Prevention (CDC) in collaboration with the National Center for Health Statistics. They serve as baseline measurements of health status outcome and/or factors that put individuals at increased risk of disease or premature death.

The indicators were developed in response to objectives of Healthy People 2000 which is a national program with goals and objectives for improving the health of Americans. The CDC encourages all State and Local agencies to use the indicators to assess community health and track their progress.

The indicators have been divided into two types, health status or risk indicators. The following reports exhibit several areas of data, such as chronic disease (cancer, asthma, cardiovascular, diabetes, tobacco) and family health. The health status indicators in Pennsylvania's 2007/08 Health Status Indicators Report were not intended to correspond to the Healthy People 2010 objectives. They are meant to be interpreted as a separate set of health data items for assessing and comparing health status, as opposed to tracking progress in achieving objectives. Much of the data was supplied by the Bureau of Health Statistics and Research, Pennsylvania Department of Health. The Department specifically disclaims responsibility for any analysis, interpretation or conclusions. (Reference – Health Status Indicators for Pennsylvania Counties and Health Districts 2007/08 Report)

Behavioral Risk Factors

Many deaths which occur annually are the result of modifiable behavioral risk factors. Some of the risk factors are uncontrolled hypertension and diabetes, smoking, physical inactivity, poor diet, alcohol abuse, violence, and risky sexual behavior. It has been estimated that control of fewer than ten (10) risk factors could prevent many cases of acute and chronic disability and premature deaths.

In the mid 1980's, the Centers for Disease Control and Prevention (CDC) implemented the Behavioral Risk Factor Surveillance System (BRFSS) in an effort to measure and address these health issues.

The BRFSS is a valuable tool for use in measuring health policies, programs, and awareness campaigns. It can also be used to guide health policy decisions, monitor progress toward achieving Healthy People 2010 objectives, propose and support legislation, develop public awareness strategies, and identify areas for future attention.

In many instances of data reporting for the following chronic disease conditions, use of the BRFSS will be utilized.

1. The Pennsylvania Health Profile 2009 lists the following as the selected major causes of death:

Selected Major Causes of Death, Number and Average annual Age-Adjusted Death Rate* (2005-2007)

Cause	Total	Rate	Cause	Total	Rate
Diseases of Heart	101,827	223.0	Diabetes Mellitus	10,395	23.1
Cancer	87,066	194.0	Alzheimer's Disease	10,190	21.8
Stroke	21,769	47.5	Nephritis/Nephrosis	9,076	19.9
C.L.R.D.**	17,717	38.9	Influenza/Pneumonia	8,254	18.0
Accidents	15,915	40.1	Septicemia	7,436	16.5

*Per 100,000 2000 U.S. standard million population. Age-adjusted rates are only comparable if the same standard million population was used in the calculation.
 **Chronic Lower Respiratory Disease

Source: Pennsylvania Health Profile 2009

2. The Chronic Lower Respiratory Diseases (C.L.R.D) consist of the following: Bronchitis, Chronic and Unspecified, Emphysema and Asthma; Bronchitis, Not Specified as Acute or Chronic; Chronic Bronchitis; Emphysema; Other Chronic Obstructive Pulmonary Disease; Asthma, Bronchiectasis.

Source: Pennsylvania Department of Health Vital Statistics 2005-page 137

1. Cardiovascular

Heart disease is any condition that impairs the structure or function of the heart. It is one of the leading causes of death among both men and women in Pennsylvania. Stroke is a leading cause of adult disability and the third leading cause of death among men and women in Pennsylvania.

Heart disease and stroke are primarily diseases of lifestyle and are preventable through changes in diet, physical activity and tobacco use.

The Pennsylvania Heart Disease and Stroke Programs (HDSP) works with other programs in the Bureau of Health Promotion and Risk Reduction to address cardiovascular disease risk factors and behaviors that can improve the cardiovascular health of Pennsylvania citizens.

In 2002, the HDSP took the lead in the establishment of the Pennsylvania Cardiovascular Health Consortium (PCHC). This Consortium is comprised of over one hundred twenty-five (125) public and private agencies, academic institutions, and governing bodies. The PCHC was instrumental in developing Cardiovascular Health: Pennsylvania's Blueprint for Action, which is Pennsylvania's State plan to guide and coordinate the cardiovascular disease prevention and treatment efforts in the Commonwealth.

Source: <http://www.health.state.pa.us/stats>
 Pennsylvania Department of Health

Cardiovascular Disease Health Status Indicators, 2010

Average Annual Age – Adjusted Heart Disease Mortality Rates

Heart Disease*	2002 – 2004	2003 – 2005	2004 – 2006	2005 – 2007	2010 Goal
Pennsylvania	247.1	237.6	229.4	223.0	166
Bradford County	274.1	270.0	251.2	231.1	166
Centre County	242.7	229.9	208.4	203.3	166
Clinton County	262.4	291.8	281.4	267.2	166
Columbia County	291.4	270.7	269.4	266.5	166
Lycoming County	238.7	227.0	222.2	220.7	166
Montour County	258.4	250.8	250.2	254.7	166
Northumberland County	290.5	283.3	278.8	267.5	166
Potter County	240.5	229.1	220.5	211.8	166
Snyder County	240.3	218.1	213.3	191.4	166
Sullivan County	254.0	244.4	263.1	255.9	166
Tioga County	215.3	205.0	203.0	195.5	166
Union County	224.5	234.9	220.9	228.6	166

(*Heart Disease includes ICD codes 390 – 398, 402, 404 – 429.)

Source: <http://www.health.state.pa.us/stats>
 Pennsylvania Department of Health

Trends: Heart disease death rates are higher than the state rate in Bradford, Clinton, Columbia, Montour, Northumberland, Sullivan, and Union Counties.

Based on rate per 100,000 2000 US standard million population.

Disclaimer: “These data were provided by the Bureau of Health Statistics and Research, Pennsylvania Department of Health. The Department specifically disclaims responsibility for any analyses, interpretations, or conclusions.”

Cardiovascular Disease Health Status Indicators, 2010

Average Annual Age – Adjusted Stroke Mortality Rates

Stroke*	2002 – 2004	2003 – 2005	2004 – 2006	2005 – 2007	2010 Goal
Pennsylvania	53.3	50.5	48.6	47.5	48
Bradford County	51.5	45.6	41.5	35.8	48
Centre County	50.9	53.7	47.8	45.7	48
Clinton County	64.6	61.2	63.6	60.6	48
Columbia County	67.4	58.0	52.1	53.8	48
Lycoming County	59.6	58.4	53.8	53.4	48
Montour County	65.1	70.5	68.6	63.4	48
Northumberland County	51.5	48.7	46.7	45.2	48
Potter County	46.5	48.4	44.6	32.3	48
Snyder County	54.0	56.2	48.6	45.6	48
Sullivan County	70.2	74.6	70.5	Statistically unreliable	48
Tioga County	51.6	45.6	45.9	37.4	48
Union County	45.6	38.0	43.9	48.9	48

(*Stroke includes all Cerebrovascular Diseases included in ICD codes 430 – 438.)

Source: <http://www.health.state.pa.us/stats>

Pennsylvania Department of Health

Trends: Stroke rates are higher than the state rate in Clinton, Columbia, Lycoming, Montour, and Union Counties.

Based on rate per 100,000 2000 US standard million population.

Disclaimer: “These data were provided by the Bureau of Health Statistics and Research, Pennsylvania Department of Health. The Department specifically disclaims responsibility for any analysis, interpretations, or conclusions.

2. Cancer

In 2001 an unprecedented partnership was initiated by the Pennsylvania Department of Health to develop the Commonwealth's first-ever comprehensive cancer control plan. Many organizations, from areas such as health care, cancer research, academia, and industry, joined the Pennsylvania Department of Health and the Pennsylvania Division of the American Cancer Society to form the Pennsylvania Cancer Control Consortium (PAC3).

The members of the PAC3 developed the Pennsylvania Comprehensive Cancer Control Plan. This plan provides a clear, unifying vision of cancer related priorities and steps that can be taken to reduce the impact of cancer on the citizens of the Commonwealth.

For additional information regarding PAC3, call 1-877-PA-HEALTH or visit the PAC3 website at www.pac3.org.

The following tables illustrate cancer data for the Northcentral District Counties.

Cancer, Health Status Indicators, 2010
Average Annual Age-Adjusted Cancer Incidence, All Cancer Sites

All Cancer Sites	Incidence 2003 - 2005					Incidence 2004 - 2006				
	Total	Males		Females		Total	Males		Females	
		Number	Rate	Number	Rate		Number	Rate	Number	Rate
Pennsylvania	213,914	108,833	577.9	105,081	436.1	216,518	110,237	582.3	106,281	440.0
Northcentral District										
Bradford County	1,149	601	588.7	548	441.9	1,232	653	639.6	579	463.4
Centre County	1,653	853	522.8	800	420.3	1,727	908	550.2	819	424.8
Clinton County	647	358	587.7	289	393.5	663	364	593.7	299	413.8
Columbia County	1,140	603	600.2	537	421.6	1,128	608	598.4	520	413.9
Lycoming County	2,117	1,087	573.6	1,030	435.6	2,040	1,054	555.4	986	416.8
Montour County	379	187	635.0	192	496.1	386	195	661.5	191	497.1
Northumberland County	1,800	908	562.9	892	435.7	1,831	940	584.9	891	432.69
Potter County	310	153	488.6	157	448.2	345	184	580.3	161	449.8
Snyder County	521	264	470.8	257	380.9	551	283	498.1	268	396.9
Sullivan County	133	76	526.4	57	411.4	150	87	586.5	63	434.2
Tioga County	796	417	581.9	379	476.9	813	440	608.0	373	467.3
Union County	669	367	583.4	302	435.0	691	385	593.9	306	437.1

Rates: Age – adjusted rates are per 100,000 and are computed by the direct method using the 2000 U.S. standard million population.

Analysis: Bradford, Clinton, Columbia, Montour, Northumberland, Potter, Sullivan, Tioga, and Union Counties had cancer incidence rates (all cancer sites) higher than the state rates in at least one or more categories (male and/or female).

Source: <http://www.health.state.pa.us/stats>
 Pennsylvania Department of Health

Disclaimer: “These data were provided by the Bureau of Health Statistics and Research, Pennsylvania Department of Health. The Department specifically disclaims responsibility for any analyses, interpretations, or conclusions.”

Cancer, Health Status Indicators, 2010
Average Annual Age-Adjusted Cancer Mortality Rates
Mortality

All Cancer Sites	2003 - 2005		2004 – 2006		2005 – 2007		2010 Goal
	Total	Rate	Total	Rate	Total	Rate	
Pennsylvania	88,174	196.9	87,528	195.3	87,066	194.0	159.9
Northcentral District							
Bradford County	437	186.5	448	189.8	449	189.5	159.9
Centre County	583	165.5	581	162.7	621	172.1	159.9
Clinton County	311	220.1	301	215.6	279	198.9	159.9
Columbia County	475	197.7	459	190.9	491	205.7	159.9
Lycoming County	854	192.5	808	182.1	830	187.1	159.9
Montour County	158	217.8	172	239.1	171	242.5	159.9
Northumberland County	761	192.6	783	199.9	754	192.7	159.9
Potter County	140	201.2	150	211.1	157	222.9	159.9
Snyder County	230	181.0	228	179.3	233	183.8	159.9
Sullivan County	62	199.1	58	187.4	60	197.6	159.9
Tioga County	311	199.8	313	201.0	311	197.4	159.9
Union County	228	166.0	229	164.2	229	164.0	159.9

Rates: Age – Adjusted rates are per 100,000 and are computed by the direct method using the 2000 U.S. standard million population.

Analysis: Clinton, Columbia, Montour, Potter, Sullivan, and Tioga Counties had rates higher than the state rates for deaths due to cancer (all cancer sites).

Source: <http://www.health.state.pa.us/stats>
 Pennsylvania Department of Health

Disclaimer: “These data were provided by the Bureau of Health Statistics and Research, Pennsylvania Department of Health. The Department specifically disclaims responsibility for any analyses, interpretations, or conclusions.

3. Asthma (Chronic Lower Respiratory Diseases “C.L.R.D.”)

Asthma has been recognized as a growing public health problem throughout Pennsylvania. As a result of this, the Pennsylvania Asthma Action Plan 2006 has been created. The major focus of the plan is to improve the health status and quality of life of all commonwealth individuals affected by asthma.

The plan was created by a coalition of over twenty (20) public and private groups throughout Pennsylvania and is funded by a grant from the CDC. The plan has six main components: surveillance, environment/workplace, awareness/education, provider, disparities, and public policy.

Asthma is contained in focus 24, Respiratory Disease, of Healthy People 2010. The overall goal of this Focus is to promote respiratory health through better prevention, detection, treatment, and education efforts.

Source: Pennsylvania Action Plan 2006; Healthy People 2010

Asthma Health Status Indicators, 2010

2008 Resident Deaths: Asthma ICD – 10/ICD – 9: J45 – J46/493 (All Ages, Genders, Races)

	Count	Expected	Population
Pennsylvania	184	184	12,448,279
Bradford County	2	1	61,233
Centre County	0	2	144,779
Clinton County	0	1	37,038
Columbia County	0	1	65,004
Lycoming County	1	2	116,670
Montour County	1	0	17,705
Northumberland County	0	1	91,091
Potter County	0	0	16,720
Snyder County	1	1	38,074
Sullivan County	0	0	6,124
Tioga County	0	1	40,574
Union County	1	1	43,640

Source: EpiQMS – <http://health.state.pa.us> . “These data were provided by the Bureau of Health Statistics and Research, Pennsylvania Department of Health. The Department specifically disclaims responsibility for any analyses, interpretations, or conclusions.”

Respiratory Disease Health Status Indicators, 2010

Selected Major Causes of Death, Number and Average Annual Age – Adjusted Death Rate* (2006 – 2008)

C. L. R. D.**	Total	Rate
Pennsylvania	18,301	40.0
Bradford County	87	36.4
Centre County	152	42.3
Clinton County	70	48.4
Columbia County	88	35.7
Lycoming County	242	53.5
Montour County	35	48.3
Northumberland County	176	42.8
Potter County	35	47.3
Snyder County	39	31.2
Sullivan County	16	47.5
Tioga County	61	34.2
Union County	42	29.0

* Per 100,000 2000 standard million population. Age – adjusted rates are only comparable if the same standard million population was used in the calculation.

**Chronic Lower Respiratory Disease (C. L. R. D.) consist of the following: Bronchitis, Chronic and unspecified, Emphysema, and Asthma: Bronchitis, Not Specified as Acute or Chronic; Chronic Bronchitis; Emphysema; Other Chronic Obstructive Pulmonary Disease; Asthma, Bronchiectasis.

Source: County Health Profile 2009.

4. Injury Prevention

The Pennsylvania Department of Health has prepared a comprehensive report entitled “Injury Deaths and Hospitalizations in Pennsylvania 2002 to 2006” in which injury data has been compiled for that period of time. In 2006, unintentional injuries ranked as the fifth leading cause of death overall for Pennsylvanians, contributing to 5,299 unintentional injury deaths. The data contained in the report is a critical component in the development of injury prevention strategies to reduce the number and severity of life threatening injuries in the Commonwealth.

The report revealed that in 2006, unintentional injury was the leading cause of death among children and adults ages one through 44, both in Pennsylvania and on the national level. For many causes of injury hospitalization, the rates in Pennsylvania exceed the national target rates set in Healthy People 2010.

The entire report can be found at the Pennsylvania Department of Health Statistics and Research webpage, Health Statistics A to Z, Injury Statistics, Combined Injury Reports 2002-2006.

Source: <http://www.health.state.pa.us/stats>
Pennsylvania Department of Health

Northcentral District Pennsylvania Department of Health

Injury Death Statistics, 2010

County	Unintentional Injuries		+/-	Motor Vehicle Accidents		+/-	Suicide		+/-
	2002-2006			2002-2006			2002-2006		
	Number	Rate		Number	Rate		Number	Rate	
Pennsylvania	25,056	38.0		7,790	12.2		6,829	10.7	
Northcentral	1,369	37.5		606	16.8	+	334	9.6	-
Bradford	138	43.2		58	20.6	+	35	11.0	
Centre	194	32.1	-	86	11.3		62	10.0	
Clinton	80	39.0		41	20.1	+	19	-	
Columbia	153	44.0		62	18.8	+	31	9.0	
Lycoming	246	37.8		113	16.2	+	57	9.1	
Montour	46	48.8		15	23.0		7	-	
Northumberland	223	43.9	+	78	14.6	+	39	8.4	
Potter	37	37.5		14	12.6		19	-	
Snyder	74	37.2		40	16.0	+	16	-	
Sullivan	15	-		9	39.0		4	-	
Tioga	85	37.4		47	18.5	+	26	13.2	
Union	78	33.9		43	17.1	+	19	-	

(*Note: A + or – after the rate denotes if the county rate was significantly higher or lower than the state rate.)
Data for 2002-2006 based on ICD-10 cause of death codes.

Northcentral District Pennsylvania Department of Health

Injury Death Statistics, 2010 (continued)

County	Poisoning		+/-	Homicide		+/-
	2002-2006			2002-2006		
	Number	Rate		Number	Rate	
Pennsylvania	7,778	12.8		3,474	5.8	
Northcentral	228	6.7	-	54	1.6	
Bradford	12	-		9	-	
Centre	50	8.3	-	8	-	
Clinton	8	-		5	-	
Columbia	28	9.4	-	4	-	
Lycoming	37	5.8		11	-	
Montour	9	-		1	-	
Northumberland	50	11.8		10	-	
Potter	4	-		1	-	
Snyder	7	-		2	-	
Sullivan	2	-		1	-	
Tioga	8	-		-	-	
Union	13	-		2	-	

(*Note: A + or – after the rate denotes if the county rate was significantly higher or lower than the state rate.)

Data for 2002-2006 based on ICD-10 cause of death codes.

Northcentral District Pennsylvania Department of Health

Injury Death Statistics, 2010 (continued)

County	Unintentional Fall-Related Deaths			Firearm-Related Deaths		
	2002-2006		+/-	2002-2006		+/-
	Number	Rate		Number	Rate	
Pennsylvania	4,502	6.0		6,382	10.2	
Northcentral	196	4.0	-	240	6.8	-
Bradford	9	-		33	10.1	
Centre	35	6.0		32	5.2	-
Clinton	5	-		20	10.7	
Columbia	26	6.8		26	7.8	
Lycoming	27	3.7	-	45	7.5	-
Montour	10	-		4	-	
Northumberland	41	6.2		21	4.3	-
Potter	12	-		10	-	
Snyder	7	-		7	-	
Sullivan	1	-		5	-	
Tioga	10	-		24	11.7	
Union	13	-		13	-	

(*Note: A + or – after the rate denotes if the county rate was significantly higher or lower than the state rate.)

Data for 2002-2006 based on ICD-10 cause of death codes.

**LEADING CAUSES OF INJURY DEATH, 2010
TOTAL NUMBER OF DEATHS
PENNSYLVANIA RESIDENTS BY AGE, 2002-2006**

AGE GROUP

Rank	< 1	1-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-64	65+
1	Unint. Suff. 53	Unint. MVT 63	Unint. MVT 80	Unint. MVT 125	Unint. VMT 939	Unint. MVT 1,049	Unint. Poison 1,241	Unint. Poison 1,948	Unint. Poison 1,603	Unint. MVT 679	Unint. Fall 3,642
2	Hom. Other Unspec. 37	Unint. Drown 46	Unint. Fire 29	Suic. Suff. 42	Hom. Firearm 414	Unint. Poison 681	Unint. MVT 1,125	Unint. MVT 1,104	Unint. MVT 989	Suic. Firearm 466	Unint. MV 1,647
3	Unint. Other Unspec. 16	Unint. Fire 46	Unint. Drown 17	Hom. Firearm 29	Unint. Poison 190	Hom. Firearm 614	Hom. Firearm 773	Suic. Firearm 680	Suic. Firearm 786	Unint. Poison 323	Unint. MVT 1,624
4	Unint. Resp. Obs. 14	Hom. Other Unspec. 34	Unint. Other Unspec. 17	Unint. Fire 26	Suic. Firearm 152	Suic. Firearm 258	Suic. Firearm 473	Hom. Firearm 378	Suic. Poison 334	Unint. Fall 317	Unint. Resp. Obs. 1,117
5	Unint. MVT 11	Unint. Other Unspec. 26	Hom. Firearm 9	Unint. Drown 24	Suic. Suff. 125	Suic. Suff. 183	Suic. Suff. 279	Suic. Suffoc. 357	Suic. Suff. 292	Unint. Other Unspec. 256	Suic. Firearm 799
6	Undet. Suffoc. 10	Unint. MVNT 12	Hom. Firearm 8	Suic. Firearm 20	Unint. Other Unspec. 55	Unint. Other Unspec. 79	Suic. Poison 152	Suic. Poison 305	Unint. Other Unspec. 289	Suic. Poison 151	Unint. Fire 306
7	Hom. Suffoc. 7	Unint. Fall 11	Hom. Other Unspec. 5	Unint. Other Unspec. 18	Unint. Drown 42	Hom. Sharp Obj. 48	Unint. Other Unspec. 122	Unint. Other Unspec. 240	Unint. Fall 268	Suic. Suffoc. 141	Unint. Poison 237
8	Undet. Other Unspec. 5	Unint. Resp. Obs. 11	Unint. Poison 5	Unint. Poison 15	Suic. Poison 26	Suic. Poison 47	Hom. Sharp Obj. 69	Unint. Fall 154	Hom. Firearm 189	Unint. Resp. Obs. 97	Suic. Suffoc. 124
9	Unint. Drown 4	Unint. Poison 9	Unint. MVNT 4	Unint. MVNT 11	Hom. Sharp Obj. 20	Unint. Fall 33	Unint. Fall 54	Undet. Poison 131	Unint. Fire 113	Unint. Fire 84	Suic. Poison 113
10	Unint. Fire 4	Hom. Fire 8	Unint. Resp. Obs. 4	Hom. Fire Unint. Suffoc. 7	Unint. Fire 20	Hom. Other Unspec. 31	Undet. Poison 52	Unint. Fire 92	Undet. Poison 103	Hom. Firearm 67	Unint. Drown 74

Source: <http://www.health.state.pa.us/stats>
Pennsylvania Department of Health

Hospitalized Injury Profile, 2010

	Centre County							Pennsylvania						
	Under 5 yrs.	5-14 yrs.	15-24 yrs.	25-44 yrs.	45-64 yrs.	65-74 yrs.	75 yrs. +	Under 5 yrs.	5-14 yrs.	15-24 yrs.	25-44 yrs.	45-64 yrs.	65-74 yrs.	75 yrs. +
Overall Total	9	26	112	182	221	134	381	2,331	3,469	12,620	25,248	34,616	15,962	54,206
Male	5	16	66	90	122	57	112	1,367	2,256	8,177	15,664	19,664	7,106	17,151
Female	4	10	46	92	99	77	269	962	1,213	4,437	9,571	14,941	8,852	37,047
Unknown	0	0	0	0	0	0	0	2	0	6	13	11	4	8
Race														
White	9	26	105	176	216	132	376	1,306	2,344	8,816	17,813	26,644	13,669	49,650
Black	0	0	0	1	1	0	0	552	697	2,371	4,738	5,455	1,352	2,269
Asian/Pac. Isl.	0	0	1	0	1	0	0	35	30	79	159	176	74	156
Native Am./Esk	0	0	0	0	0	0	0	8	1	7	11	15	4	11
Other	0	0	2	0	1	1	1	289	228	624	1,171	798	233	426
Unknown	0	0	4	5	2	1	4	141	169	723	1,356	1,528	630	1,694
Mechanism														
Fall	1	9	14	34	81	93	287	639	986	1,324	4,082	12,219	9,182	40,382
Fire/Flame	0	0	0	1	1	0	0	35	46	127	224	281	89	79
Firearm	0	0	0	1	0	0	0	2	27	701	587	145	21	17
MVT Occupant	0	0	22	20	14	3	9	62	182	2,123	2,569	2,242	749	1,123
Poisoning	2	2	36	51	28	7	7	294	196	2,769	6,242	5,731	865	1,122

Source: <http://www.health.state.pa.us/stats>
 Pennsylvania Department of Health

5. Diabetes

The Pennsylvania Diabetes Prevention and Control Program is an important part of the Pennsylvania Department of Health. The goal of the program is to reduce the burden of diabetes in Pennsylvania and improve the quality of life of Commonwealth citizens who have diabetes by preventing and controlling potential complications.

The Pennsylvania Diabetes Action Plan 2007 was developed by the Diabetes Stakeholder Group and is Pennsylvania's first ever Diabetes Action Plan. This Plan represents the combined effort of more than two hundred (200) various agencies, academic institutions, consumers, corporations, and communities with an interest in diabetes prevention and control. The Plan provides a blueprint for the combination of resources and interests to strengthen the capacity for Pennsylvania to prevent diabetes whenever possible and assist individuals with diabetes to live their best and healthiest lives. For more in-depth statistics related to diabetes in PA, see: "The Burden of Diabetes in Pennsylvania 2007: report which may be accessed at:

<http://www.dsf.health.state.pa.us/health/liv/health/2007BurdenOfDiabetes-Web.pdf>

Nine percent of Pennsylvania adults responded "yes" in the 2007 and 2008 surveys to ever being told by a doctor that they had diabetes. Non-Hispanic black adults had a significantly higher percentage (15 percent) compared to non-Hispanic white adults (8 percent).

Diabetes Health Status Indicators, 2010

Age – Adjusted Diabetes Death Rates (Includes Diabetes As An Underlying and Contributing Cause of Death)

Note: Diabetes death rate (per 100,000) (age-adjusted to 2000 standard population)

Diabetes	2002	2003	2004	2005	2006	2010 Goal
Pennsylvania	84.5	83.5	80.7	80.0	80.7	45
Bradford County	101.9	112.3	138.0	112.1	106.7	45
Centre County	77.7	108.1	89.7	68.7	91.3	45
Clinton County	125.4	135.4	118.2	122.7	97.7	45
Columbia County	85.3	82.9	70.0	80.0	88.3	45
Lycoming County	138.7	124.8	126.9	150.2	125.5	45
Montour County	91.0	DSU	DSU	119.6	DSU	45
Northumberland County	85.5	84.8	87.2	87.3	70.3	45
Potter County	DSU	119.7	DSU	101.9	DSU	45
Snyder County	68.1	69.8	76.8	47.4	61.5	45
Sullivan County	DSU	DSU	DSU	DSU	DSU	45
Tioga County	74.8	82.0	83.5	82.0	94.1	45
Union County	87.6	110.5	111.0	110.5	102.5	45

DSU = Data statistically unreliable to small numbers.

Source: <http://www.portal.state.pa.us/portal/server.pt?open=514&objID=590079&mode=2>, Health Statistics and Research, Healthy People 2010

Analysis: Pennsylvania and Northcentral District rates are all higher than the desired 2010 Goal. In four of the five years reported, seven of the 12 counties in the Northcentral District had rates higher than the state rate. Bradford, Clinton, Lycoming, and Union Counties consistently had rates higher than the state rate.

Diabetes Health Status Indicators, 2010

Age – Adjusted Diabetes Death Rates (Includes Diabetes As The Underlying Cause of Death)

Note: Diabetes death rate (per 100,000) (age-adjusted to 2000 standard population)

Diabetes	2004	2005	2006	2007	2008
Pennsylvania	23.7	23.2	23.3	22.9	21.3
Bradford County	39.0	31.0	35.9	25.0	35.2
Centre County	23.4	13.0	16.0	18.9	18.4
Clinton County	31.3	26.2	28.2	28.4	20.5
Columbia County	23.0	31.4	32.6	23.3	22.3
Lycoming County	21.7	38.8	25.0	25.7	19.6
Montour County	ND	43.5	ND	ND	ND
Northumberland County	22.8	20.5	15.7	18.7	24.9
Potter County	ND	ND	ND	47.7	ND
Snyder County	23.0	ND	23.5	29.9	23.4
Sullivan County	ND	ND	ND	ND	ND
Tioga County	32.4	37.0	35.6	43.9	21.9
Union County	29.7	ND	33.1	20.6	ND

DISCLAIMER: "These data were provided by the Bureau of Health Statistics and Research, Pennsylvania Department of Health. The Department specifically disclaims responsibility for any analyses, interpretations or conclusions."

Source: http://app2.health.state.pa.us/epiqms/Asp/SelectParams_Tbl.asp?Queried=0, Health Statistics and Research, EpiQMS

Analysis: Bradford and Tioga Counties consistently had rates higher than the state rate.

6. Tobacco

The leading cause of preventable death in the United States is tobacco use. In Pennsylvania alone, tobacco use kills 20,000 adults every year. Over five (5) billion dollars are spent annually in Pennsylvania for health care costs caused by smoking.

In 2001 Act 77 was signed into law. This Act established a tobacco use prevention and cessation program within the Department of Health. The Act also established several requirements for the Department of Health to follow, such as statewide, community, and school programs designed to reduce tobacco use, tobacco cessation programs, and monitoring program accountability.

In 2008, Act 27 2008, Pennsylvania's Clean Indoor Air Act (CIAA), was enacted into law. This act restricted smoking in indoor workplaces and public places with the exception of some drinking establishments, cigar bars, and tobacco shops.

The Division of Tobacco Prevention and Control is a division within the Pennsylvania Department of Health and is responsible for Pennsylvania's tobacco and control programs. This division leads and coordinates strategic efforts aimed at preventing tobacco use among youth, promoting smoking cessation among youth and adults, protecting nonsmokers from environmental tobacco smoke, and eliminating tobacco-related health disparities.

Pennsylvania has developed a statewide comprehensive tobacco-use prevention program to accomplish the goals of the Tobacco Prevention and Control Division. Some of the initiatives in the prevention program are a telephone quitline, efforts to counter tobacco marketing, surveillance of tobacco sales to minors, promotion of clinical-practice guidelines for assessment and treatment of tobacco addiction, and program evaluation.

Tobacco – Health Status Indicators, 2010

Tobacco Use 2006 - 2008

Percentage of PA Women Who Reported Not Smoking During Pregnancy

	2008	2007	2006
Pennsylvania	83.0	82.5	82.4
Bradford County	74.3	70.4	70.3
Centre County	86.4	86.9	86.1
Clinton County	74.3	77.3	76.1
Columbia County	78.9	75.9	78.4
Lycoming County	73.6	73.2	71.6
Montour County	81.6	83.5	82.4
Northumberland County	75.7	74.5	76.1
Potter County	68.2	70.7	67.8
Snyder County	86.7	85.0	86.3
Sullivan County	56.9	69.8	62.5
Tioga County	73.7	70.8	73.8
Union County	84.6	88.5	81.0

Source: <http://www.dsf.health.state.pa.us/health> EpiQms

Disclaimer: “These data were provided by the Bureau of Health Statistics and Research, Pennsylvania Department of Health. The Department specifically disclaims responsibility for any analyses, interpretations, or conclusions.”

Youth Tobacco Survey Data Trending Tables

Category	Ever tried a cigarette – even a puff or two % (95% CI)			Smoked cigarettes on 1 or more of the past 30 days % (95% CI)		
	2002-2003	2006-2007	2008-2009	2002-2003	2006-2007	2008-2009
Middle School (Grades 6-8)						
Total	25.3 (22.4-28.4)	15.3 (12.8-18.2)	16.0 (14.1-18.2)	7.8 (6.8- 8.9)	4.1 (3.0- 5.7)	4.3 (3.1- 5.9)
Sex						
Female	25.1 (21.9-28.6)	14.0 (10.7-18.1)	13.8 (11.5-16.3)	8.0 (6.9- 9.3)	4.3 (2.8- 6.5)	4.2 (3.0- 5.9)
Male	25.4 (22.6-28.4)	16.1 (12.8-20.1)	18.2 (15.9-20.8)	7.5 (6.4- 8.8)	4.0 (2.6- 6.2)	4.4 (3.1- 6.3)
Grade						
6th	13.7 (10.9-17.2)	7.0 (4.4-11.1)	6.5 (4.2- 9.9)	3.5 (2.3- 5.2)	1.9 (0.9- 3.8)	0.6 (0.2- 1.4)
7th	25.4 (21.8-29.5)	14.6 (11.0-19.1)	14.9 (11.2-19.5)	7.4 (6.1- 9.1)	2.8 (1.5- 5.4)	3.4 (1.9- 5.9)
8th	36.3 (32.3-40.6)	22.8 (16.9-30.1)	26.2 (21.3-31.7)	12.0 (9.9-14.3)	7.3 (4.6-11.3)	8.8 (6.1-12.5)
Race/Ethnicity						
Black Non-Hispanic	33.8 (29.2-38.7)	20.3 (12.5-31.3)	21.3 (15.6-28.4)	6.0 (4.6- 7.7)	5.1 (2.5-10.1)	3.5 (1.8- 6.6)
Hispanic	26.4 (20.6-33.2)	27.3 (17.1-40.5)	18.2 (12.2-26.1)	11.4 (7.6-16.8)	3.5 (1.3- 9.2)	3.2 (1.3- 7.5)
White Non-Hispanic	23.0 (20.2-26.1)	12.8 (9.8-16.4)	14.8 (12.8-17.1)	7.7 (6.5- 9.1)	3.7 (2.4- 5.8)	4.6 (3.2- 6.4)
High School (Grades 9-12)						
Total	55.1 (52.5-57.6)	41.9 (37.3-46.6)	41.2 (37.4-45.1)	23.1 (21.0-25.4)	17.5 (14.9-20.4)	18.4 (15.9-21.2)
Sex						
Female	55.5 (52.8-58.2)	42.4 (37.1-47.9)	39.7 (35.0-44.6)	23.8 (21.4-26.4)	17.3 (14.3-20.8)	16.0 (13.1-19.4)
Male	54.5 (51.5-57.5)	41.3 (35.6-47.3)	42.6 (38.1-47.2)	22.4 (19.9-25.0)	17.7 (14.0-22.0)	20.7 (17.7-24.0)
Grade						
9th	46.6 (42.1-51.2)	28.2 (22.5-34.7)	31.1 (25.6-37.1)	19.1 (16.2-22.4)	10.4 (7.3-14.8)	13.4 (9.9-18.0)
10th	51.5 (47.3-55.8)	36.8 (30.8-43.2)	38.4 (33.1-44.0)	20.6 (17.9-23.7)	15.2 (11.1-20.5)	17.6 (13.7-22.4)
11th	58.9 (54.9-62.7)	52.6 (46.4-58.7)	42.5 (36.8-48.4)	25.2 (21.8-28.9)	23.6 (19.3-28.5)	15.8 (12.4-19.8)
12th	65.0 (61.0-68.8)	53.6 (44.6-62.4)	54.7 (47.7-61.5)	28.4 (24.9-32.3)	22.7 (16.4-30.6)	27.8 (22.1-34.4)
Race/Ethnicity						
Black Non-Hispanic	55.6 (51.2-59.9)	38.3 (27.2-50.8)	43.3 (37.1-49.8)	14.0 (11.2-17.4)	9.7 (6.2-15.1)	11.9 (8.0-17.2)
Hispanic	62.9 (57.7-67.9)	54.4 (47.8-60.8)	36.3 (29.4-43.9)	26.9 (22.0-32.4)	13.9 (7.6-24.2)	10.8 (6.1-18.4)
White Non-Hispanic	54.3 (51.3-57.3)	42.0 (37.2-46.9)	40.9 (36.5-45.4)	24.7 (22.7-26.8)	19.3 (16.4-22.6)	20.0 (17.1-23.2)

Source: <http://www.portal.state.pa.us/portal/server.pt?open=514&objID=598865&mode=2> Trending Tables

Youth Tobacco Survey Data Trending Tables

Category	Used smokeless tobacco on 1 or more of the past 30 days % (95% CI)		
	2002-2003	2006-2007	2008-2009
Middle School (Grades 6-8)			
Total	2.8 (2.4- 3.3)	1.9 (1.2- 2.9)	3.4 (2.2- 5.2)
Sex			
Female	1.0 (0.7- 1.6)	0.7 (0.3- 1.7)	0.7 (0.3- 2.1)
Male	4.5 (3.7- 5.4)	3.1 (1.8- 5.2)	5.9 (3.9- 8.9)
Grade			
6 th	1.3 (0.8- 2.1)	1.2 (0.4- 3.2)	1.5 (0.4- 4.9)
7 th	2.9 (2.3- 3.7)	1.3 (0.5- 3.4)	2.8 (1.4- 5.4)
8 th	4.0 (3.2- 5.0)	2.8 (1.5- 5.1)	5.9 (3.4-10.0)
Race/Ethnicity			
Black Non-Hispanic	1.8 (1.1- 3.0)	2.1 (0.6- 7.7)	3.7 (1.9- 7.0)
Hispanic	2.2 (1.0- 4.8)	4.0 (1.0-15.2)	1.3 (0.3- 5.4)
White Non-Hispanic	2.9 (2.4- 3.6)	1.7 (1.0- 2.7)	3.5 (2.1- 5.6)
High School (Grades 9-12)			
Total	8.0 (7.0- 9.2)	5.8 (4.2- 8.0)	8.7 (6.8-10.9)
Sex			
Female	1.9 (1.3- 2.7)	1.2 (0.5- 2.7)	3.4 (2.3- 4.8)
Male	13.8 (12.1-15.6)	10.3 (7.2-14.7)	13.8 (10.7-17.5)
Grade			
9 th	5.9 (4.8- 7.4)	3.4 (2.0- 5.5)	6.3 (4.0- 9.8)
10 th	8.0 (6.2-10.1)	4.9 (3.0- 7.7)	8.0 (5.4-11.6)
11 th	8.1 (6.4-10.4)	7.4 (4.4-12.1)	8.8 (5.8-13.2)
12 th	10.1 (7.9-12.9)	8.3 (4.7-14.1)	12.3 (8.1-18.2)
Race/Ethnicity			
Black Non-Hispanic	3.6 (2.1- 6.0)	1.7 (0.6- 4.7)	4.5 (2.2- 8.8)
Hispanic	4.7 (2.9- 7.6)	5.5 (2.3-12.5)	3.0 (0.9- 9.0)
White Non-Hispanic	8.9 (7.8-10.1)	6.3 (4.3- 9.1)	9.8 (7.7-12.4)

Source: <http://www.portal.state.pa.us/portal/server.pt?open=514&objID=598865&mode=2> Trending Tables

SYNAR SURVEY**

Rate of sales of tobacco products to minors 2007 - 2009
(% Sales per purchase attempts)

	<u>2009</u>	<u>2008</u>	<u>2007</u>	<u>HP2010</u>
Pennsylvania	6%	5%	7%	5%

Note: Statistics are reported as State level data only.

** In 1992, Congress passed the Synar Legislation of the Alcohol, Drug Abuse, and Mental Health Reorganization Act (Public Law 102-321, Section 1926.) This law requires states to:

- Have laws that prohibit the distribution or sale of tobacco products to anyone under age 18.
- Conduct random unannounced inspections of tobacco outlets.
- Report the outcome of the inspection and enforcement activities to the Federal Substance Abuse and Mental Health Services Administration (SAMHSA) with their substance abuse prevention and treatment (SAPT) block grant applications for each year.
- This grant is used to fund the substance abuse prevention and treatment activities administered by Pennsylvania's single county authorities (SCA's.)

In Pennsylvania, the Department of Health conducts scientifically sound yearly unannounced surveys of Pennsylvania tobacco retailers in an effort to measure youth access to tobacco products. Pennsylvania must maintain a Synar compliance rate of less than twenty (20) percent or face penalties in the form of a loss of part of the Commonwealth's Substance Abuse Prevention and Treatment Block Grant.

Source: Pennsylvania Synar Survey Instructions 2010
Pennsylvania Department of Health

Primary Tobacco Contractors. 2010 Northcentral District

Name: Family Health Council of Central Pennsylvania, Inc.

Address: 3461 Market Street, Suite 200
Camp Hill, PA 17011 . 4412

Phone: 717 – 761 – 7380 or toll free 1 – 877 – 743 - 1372

Source: http://www.portal.state.pa.us/portal/server.pt/community/smoke_free/14315

Pennsylvania Department of Health

B. Category for Health Action: Family Health

Family Health

The goal of the Bureau of Family Health is to maintain and improve the health of pregnant women, infants, children and their families through education and health promotion, food benefits, and improved access to quality health care to meet the needs of families and also provide services in a timely manner. They do contract with local providers for services funded through Maternal and Child Health (MCH) Programs and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).

1. Maternal/Child Health

Maternal and Child Health – Health Status Indicators Tioga County

	2010 Goal	2008	2007	2005
Low Birth Weight (less than 2500 grams) (per 100 births)				
United States	5.0		8.3	8.2
Pennsylvania	5.0		8.4	
Northcentral District	5.0		6.9	
Tioga County	5.0		6.3	
Trends/Analysis: (Please note and if action plan is necessary)				
Lack of Prenatal Care in First Trimester (per 100 births)				
United States	10.0		31.0	
Pennsylvania	10.0		20.4	
Northcentral District	10.0		17.5	
Tioga County	10.0		13.4	
Trends/Analysis: (Please note and if action plan is necessary)				
Tobacco Use During Pregnancy (percentage of PA women who reported smoking during pregnancy)				
United States	1.0			
Pennsylvania	1.0	17.0	17.5	
Northcentral District	1.0			
Tioga County	1.0	26.3	29.2	
Trends/Analysis: (Please note and if action plan is necessary)				
Percentage of Tioga County women who report smoking during pregnancy is higher than state rate.				

Source: <http://www.portal.state.pa.us/portal/server.pt?open=514&objID=590079&mode=2>
Pennsylvania Department of Health

	2010 Goal	2008	2007	2006
Infant Mortality (per 1000 births)				
United States	4.5		6.8	6.7
Pennsylvania	4.5		7.5	7.3
Northcentral District	4.5		7.1	5.3
Tioga County	4.5		ND	4.9
Trends/Analysis: (Please note and if action plan is necessary)				
Child Deaths 1-4 yrs (per 100,000 children 1-4)	2010 Goal	2003-2007		
United States	18.6	29.4		
Pennsylvania	18.6	27.6		
Northcentral District				
Tioga County	18.6	DSU		
Trends/Analysis: (Please note and if action plan is necessary)				
Child Deaths 5-9 yrs (per 100,000 children 5-9)	2010 Goal	2003-2007		
United States	12.3	14.5		
Pennsylvania	12.3	27.6		
Northcentral District				
Tioga County	12.3	DSU		
Trends/Analysis: (Please note and if action plan is necessary)				

Source: <http://www.portal.state.pa.us/portal/server.pt?open=514&objID=590079&mode=2>

Pennsylvania Department of Health

	2010 Goal	2008	2003-2007	2006
Child Deaths 10-14 yrs (per 100,000 children 10-14)				
United States	16.8		18.1	
Pennsylvania	16.8		16.5	
Northcentral District				
Tioga County	16.8		DSU	
Trends/Analysis: (Please note and if action plan is necessary)				
Child Deaths 15-19 yrs (per 100,000 children 15-19)				
United States	39.8		65.1	
Pennsylvania	39.8		59.5	
Northcentral District				
Tioga County	39.8		52.7	
Trends/Analysis: (Please note and if action plan is necessary)				
Percentage of Child Deaths 15-19 years in Tioga County is higher than state rate.				
Births to mothers <18 yrs (per 100 births)			2007	2006
United States			3.4	3.4
Pennsylvania			3.0	3.0
Northcentral District			2.2	2.1
Tioga County			3.0	1.8
Trends/Analysis: (Please note and if action plan is necessary)				

Source: <http://www.dpw.state.pa.us/ServicesPrograms/Childwelfare>
Pennsylvania Department of Welfare, Annual Report
County Health Profile

	2010 Goal	2009	2008	2006
Child Abuse Reports (per 1000 children)				
United States				
Pennsylvania		9.2	9.2	
Northcentral District				
Tioga County		8.6	13.4	
Trends/Analysis: (Please note and if action plan is necessary)				
Child Abuse – Number of Substantiated Reports (per 1000 children)				
United States				
Pennsylvania		1.4	1.5	
Northcentral District				
Tioga County		1.9	3.7	
Trends/Analysis: (Please note and if action plan is necessary)				

DSU=Data Statistically Unreliable (small number – less than 10 events)

ND-No Data

NE=No Event

Source: <http://www.dpw.state.pa.us/ServicesPrograms/ChildWelfare>
 Pennsylvania Department of Welfare Annual Report

2. Special Health Care Needs

The Bureau of Family Health provides access to comprehensive specialty medical services to eligible Commonwealth individuals who do not have the financial resources or health insurance coverage that enables them to access those services. Reimbursed services are limited by age and condition, but may include inpatient, outpatient, specialized therapies, laboratory, radiology, medications, medical equipment, supplies, and care coordination.

Some examples of services offered for eligible individuals under twenty-two (22) years of age are the cardiac program, cleft palate program, hearing and speech impairment program, orthopedic program and ventilator dependency program. Some examples of services offered for eligible individuals of any age are Cooley's Anemia, Cystic Fibrosis, Hemophilia, Sickle Cell Disease, Spina Bifida, and Chronic Renal Disease. Eligible individuals over twenty-one (21) years of age are also offered services which assist with traumatic brain injury.

The Bureau of Family Health funds a Special Health Care Needs (SHCN) Nursing Consultant in each of the Department of Health's six Community Health Districts. This consultant is responsible for the coordination of Special Health Care Needs program services, public health education, and outreach activities within the District.

The Consultants are a resource for the community and can link individuals to needed services and coordinate follow-up referrals for these services. They are also involved in various District and local organizations that serve children with special needs.

Children with Special Health Care Needs – Estimate (2006)

	Ages	<1 year	1-4 years	5-9 years	10-14 years	15-17 years	18-19 years
Pennsylvania		22,044	89,816	117,201	124,903	83,980	58,159
Northcentral District		1708	4297	5602	6107	4602	5330
Bradford County		98	448	595	670	444	223
Centre County		196	743	948	1012	868	1985
Clinton County		69	256	325	339	255	297
Columbia		100	391	513	548	463	605
Lycoming		210	781	1019	1120	814	556
Montour		31	121	162	178	114	78
Northumberland		156	598	775	843	601	293
Potter		31	131	181	194	109	79
Snyder		74	274	347	371	278	254
Sullivan		8	34	43	49	64	39
Tioga		50	286	397	442	323	256
Union		62	234	297	341	269	372

Source: *Data from the Pennsylvania Vital Statistics

http://www.dsf.health.state.pa.us/health/lib/health/Vital_Stat/2006/2006_pop.pdf

2006 Numbers based 15.3% (State % is 15.3%) of total population are children with special needs (2005/2006 National Survey of Children with Special Health Care Needs. www.childhealthdata.org

Health Status Indicators – Children Served in Early Intervention by County

	2008-2009	2007-2008	2006-2007	2005-2006	2004-2005	2003-2004
Pennsylvania	81,061	73,600	69,633	66,549	63,563	58,463
Northcentral District	3746	3467	3374	3294	3062	3085
Bradford County	392	372	320	282	248	238
Centre County	636	557	570	526	525	520
Clinton County	214	193	180	189	176	178
Columbia	352	323	325	343	298	312
Lycoming	803	742	786	742	684	697
Montour	73	88	77	73	82	55
Northumberland	569	530	481	507	464	481
Potter	126	129	133	135	134	121
Snyder	213	196	199	194	165	169
Sullivan	18	18	20	18	13	17
Tioga	175	155	141	143	118	160
Union	175	164	142	142	155	137

Source: <http://www.pattan.net/files/EI/SICC-Annual-Rpt1108.pdf>

Pennsylvania Early Intervention

Resident Live Births by Age of Mother and Type of Medical Condition

Number and Percent: Pennsylvania and Counties, 2007

UNABLE TO LOCATE COUNTY DATA DUE TO BREECH IN CONFIDENTIALITY IF THE STATISTICS ARE LOW

County	Total Births	Risk Factors in this pregnancy		Infections present/treated during this pregnancy		Maternal Morbidity		Abnormal Conditions of Newborn		Selected congenital anomalies**	
		Number	%	Number	%	Number	%	Number	%	Number	%
Pennsylvania	150,322	40,956	27.9	6545	4.5	2042	1.4	13,675	9.3	665	0.4
Bradford County	807										
Centre County	1334										
Clinton County	442										
Columbia County	615										
Lycoming County	1302										
Montour County	238										
Northumberland County	1006										
Potter County	208										
Snyder County	469										
Sullivan County	56										
Tioga County	428										
Union County	416										

Source: (More than one type of congenital anomaly may be reported for a live birth.
 Data for residents who were not born in Pennsylvania are included as unknown.
 Starting with 2003, the collection process for congenital anomaly data has changed.
 Some data may not be comparable to previous years.)

Daily Use of Vitamin Containing Folic Acid
% of Women Ages 18 – 45
No State/County Data Available

	2008	2007	2006	2005	2004
United States	39%	40%	No Data Available	33%	40%

*While 84% of women ages 18-45 surveyed in 2008 had heard of folic acid, only 11% of these women knew to take folic acid before pregnancy.

Source: http://www.marchofdimes.com/peristats/pdflib/999/pds_42_all.pdf

Binge Alcohol Use
% of Women Ages 18 – 44
No County Level Data Available

	2008	2007	2006	2005	2004
United States	14.8%	14.6%	15.%	11.4%	12.0%
Pennsylvania	18.9%	16.2	19.4%	15.5%	19.0%

*Drinking alcohol during pregnancy, particularly binge drinking can cause birth defects and mental retardation.

*Binge alcohol use is defined as ≥ 4 drinks on at least one occasion in the past month beginning in 2006, and ≥ 5 drinks on at least one occasion in the past month prior to 2006.

Source: http://www.marchofdimes.com/peristats/pdflib/999/pds_42_all.pdf

3. School Health

Mandated School Health Services 2007 - 2008

Every child of school age attending or who should attend a public or private/non-public school within the Commonwealth must receive the following health services. Private/non-public schools may request these services from their local public school district. Via submission of an annual school health report, the local school district is reimbursed by the Pennsylvania Department of Health for provision of the mandated services.

SERVICE	K		2	3	4	5	6	7	8	9	10	11	12	Special Education	Notes
Medical Examination	*	*					X					X		Age Appropriate	*Required on original entry-K or 1 st grade
Dental Examination	*	*		X				X						Age Appropriate	*Required on original entry-K or 1 st grade
Growth Screen	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
Vision Screen	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
Hearing Screen	X	X	X	X				X				X		X	
Scoliosis Screen							X	X							
Tuberculin Test (unless approved to discontinue)	*	*								X				Age Appropriate	*Required on original entry-K or 1 st grade Unless approved to discontinue
School Nurse Services	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
Maintenance of Health Record	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
Immunization Assessment	X	X	X	X	X	X	X	X	X	X	X	X	X	X	

**Select Chronic Conditions
School Years: 2007 - 2008**

Tioga County						
Student Chronic Conditions	Total # of Students Statewide	Total Number of Students Statewide with Diagnosis	% of Students Statewide with Diagnosis	Total # of Tioga County Students	Total Number of Tioga County Students with Diagnosis	% of Tioga County Students with Diagnosis
Asthma	2,009,600	215,615	10.73%	6,208	416	6.70%
Diabetes Type I	2,009,600	5,740	0.29%	6,208	18	0.29%
Diabetes Type II	2,009,600	1,226	0.06%	6,208	5	0.08%
Diabetes Total (Type I & II)	2,009,600	6,966	0.35%	6,208	23	0.37%
The data for this report was obtained from information submitted by school districts in the “Request for Reimbursement and Report of School Health Services.” It is preliminary data that has not been validated.						

Disclaimer: Data is reported annually by Educational Institutions to the Pennsylvania Department of Health. Responsibility for data accuracy lies with individual Educational Institutions. The Department specifically disclaims responsibility for any analysis, interpretations or conclusions made by the user.

**Growth Screens/BMI-For-Age Percentiles
School Year: 2007 – 2008**

	Grades K - 6								
	# Students Screened for BMI	BMI < 5 th Percentile	Percent	BMI 5 th to < 85 th Percentile	Percent	BMI 85 th to < 95 th Percentile	Percent	BMI ≥ 95 th Percentile	Percent
Bradford County	5,526	96	1.74%	3,309	59.88%	938	16.97%	1,183	21.41%
Centre County	7,263	200	2.75%	4,802	66.12%	1,149	15.82%	1,112	15.31%
Clinton County	2,411	49	2.03%	1,430	59.31%	406	16.84%	526	21.82%
Columbia County	5,430	85	1.57%	3,294	60.66%	891	16.41%	1,160	21.36%
Lycoming County	9,190	157	1.71%	5,933	64.56%	1,445	15.72%	1,655	18.01%
Montour County	1,385	22	1.59%	880	63.54%	210	15.16%	273	19.71%
Northumberland County	7,571	202	2.67%	4,809	63.52%	1,099	14.52%	1,461	19.30%
Potter County	1,253	14	1.12%	752	60.02%	201	16.04%	286	22.83%
Snyder County	2,625	64	2.44%	1,488	56.69%	482	18.36%	591	22.51%
Sullivan County	292	3	1.03%	186	63.7%	50	17.12%	53	18.15%
Tioga County	3,564	59	1.66%	2,384	66.89%	499	14.00%	622	17.45%
Union County	2,322	41	1.77%	1,555	66.97%	320	13.78%	406	17.48%
Northcentral District Summary	48,832	992	2.03%	30,822	63.12%	7,690	15.75%	9,328	19.10%
Statewide Totals	982,238	23,580	2.40%	646,987	65.87%	148,602	15.13%	163,069	16.60%

Legend: <5th Percentile = At risk for underweight; 5th to <85th Percentile = Healthy weight; 85th to <95th Percentile = Overweight; ≥ 95th Percentile = Obese

	Grades 7 - 12								
	# Students Screened for BMI	BMI < 5 th Percentile	Percent	BMI 5 th to < 85 th Percentile	Percent	BMI 85 th to < 95 th Percentile	Percent	BMI ≥ 95 th Percentile	Percent
Bradford County	5,141	74	1.44%	3,176	61.78%	825	16.05%	1,066	20.74%
Centre County	7,232	107	1.48%	4,882	67.51%	1,037	14.34%	1,206	16.68%
Clinton County	2,310	40	1.73%	1,365	59.09%	383	16.58%	522	22.60%
Columbia County	4,634	52	1.12%	2,797	60.36%	745	16.08%	1,040	22.44%
Lycoming County	8,661	139	1.60%	5,252	60.64%	1,411	16.29%	1,859	21.46%
Montour County	1,252	30	2.4%	804	64.22%	180	14.38%	238	19.01%
Northumberland County	6,671	146	2.19%	3,921	58.78%	1,117	16.74%	1,487	22.29%
Potter County	1,288	10	0.78%	753	58.46%	212	16.46%	313	24.30%
Snyder County	2,726	46	1.69%	1,716	62.95%	456	16.73%	508	18.64%
Sullivan County	355	15	4.23%	207	58.31%	60	16.90%	73	20.56%
Tioga County	3,325	67	2.02%	2,051	61.68%	559	16.81%	648	19.49%
Union County	2,046	33	1.61%	1,377	67.30%	308	15.05%	328	16.03%
Northcentral District Summary	45,641	759	1.66%	28,301	62.01%	7,293	15.98%	9,288	20.35%
Statewide Totals	865,969	18,156	2.10%	560,462	64.72%	138,503	15.99%	148,848	17.19%

Disclaimer: Data is reported by School Districts (SD) to the PA Dept. of Health. Responsibility for data accuracy lies with each SD. The Dept. specifically disclaims responsibility for any analysis, interpretations or conclusions made by the user.

**Tioga County
School Health Program**

School Health Program Staffing Patterns 2007 - 2008

School Entity	# of CSNs	# of Buildings Assigned	# of Students Assigned	# of RNs*	# of LPNs*	# of UAPs*
Northern Tioga	3	6	2,277	1	0	0
Southern Tioga	2	7	2,280	0	2	0
Wellsboro	2	4	1,559	0	2	0
County Total	7	17	6,116	1	4	0
State Total	2,069	4,540	2,016,263	885	570	442

*Total Full Time and Part Time

Note: CSN(Certified School Nurse); RN(Registered Nurse); LPN (Licensed Practical Nurse); and UAP (Unlicensed Assistive Personnel)

Source: (Annual Reimbursement and Report of School Health Services. The data for this report was obtained from information submitted by school districts in the “Request for Reimbursement and Report of School Health Services.” It is preliminary data that has not been validated.)

Tioga County

Healthy People 2010 Objective: % of School Districts that have a nurse-to-student ratio of 1:750 or less.*								
School Year: 2007-2008								
	School District	# of CSNs	# of RNs or LPNs	Total Nurses	# of Students Assigned	Ratio Nurse to Student		% of County w/ 1:750 ratio or less
	Northern Tioga	3	1	4	2,277	1	569	100.00%
	Southern Tioga	2	2	4	2,280	1	570	100.00%
	Wellsboro	2	2	4	1,559	1	390	100.00%
	COUNTY TOTAL	7	5	12	6,116	1	510	100.00%
	STATE TOTALS	2,075	1,370	3,445	1,948,675	1	582	83.07%
*For purposes of the Healthy People 2010 objective, a nurse is defined as a Certified School Nurse (CSN), Registered Nurse (RN), or Licensed Practical Nurse (LPN).								

Tioga County

Healthy People 2010 Objective: % of School Districts that have a nurse-to-student ratio of 1:750 or less.*								
School Year: 2006-2007								
	School District	# of CSNs	# of RNs or LPNs	Total Nurses	# of Students Assigned	Ratio Nurse to Student		% of County w/ 1:750 ratio or less
	Northern Tioga	3	1	4	2,396	1	599	100.00%
	Southern Tioga	2	2	4	2,311	1	578	100.00%
	Wellsboro	2	2	4	1,570	1	393	100.00%
	COUNTY TOTAL	7	5	12	6,277	1	523	100.00%
	STATE TOTALS	2,069	1,307	3,376	1,969,324	1	603	79.84%
*For purposes of the Healthy People 2010 objective, a nurse is defined as a Certified School Nurse (CSN), Registered Nurse (RN), or Licensed Practical Nurse (LPN).								

E. Category for Health Action: Communicable Disease

1. Communicable Disease

The Bureau of Communicable Diseases is comprised of three divisions, HIV/AIDS, Immunizations, and Tuberculosis/Sexually Transmitted Diseases. The Bureau's mission is to prevent, monitor, and control communicable diseases through state health centers and contractual agreements with a variety of community based organizations. Through its' mission, the Bureau ensures that HIV prevention and care services are available to those who desire it, tuberculosis and sexually transmitted disease control strategies are in place and effective in preventing disease, and immunization services are comprehensive and accessible and utilized by all citizens of the Commonwealth.

Source: <http://www.health.state.pa.us/stats>

Pennsylvania Department of Health

Tioga County

Selected Morbidity: Incidence and Average Annual Rate (per 100,000 population)

	2002 – 2004		2003-2005		2006-2008	
	# Cases	Rates	# Cases	Rates	#Cases	Rates
Campylobacteriosis						
Pennsylvania	4209	11.3	4294	11.5	4,224	11.3
Tioga County	64	34.0	68	36.2	37	30.2
Giardiasis						
Pennsylvania	3089	8.3	2933	7.9	2,461	6.6
Tioga County	69	36.7	22	11.7	16	13.1
Hepatitis Type A						
Pennsylvania	1415	3.8	1215	3.3	231	0.6
Tioga County	2	1.1	3	1.6	0	ND
Hepatitis Type B Acute						
Pennsylvania	905	2.4	771	2.1	517	1.4
Tioga County	4	2.1	1	0.5	1	ND
Hepatitis Type B Chronic						
Pennsylvania	ND	ND	ND	ND	5,077	13.6
Tioga County	ND	ND	ND	ND	3	ND
Lyme Disease						
Pennsylvania	12649	34.1	12994	34.9	11,227	30.1
Tioga County	8	4.3	10	5.3	12	9.8
Meningococcal Disease						
Pennsylvania	ND	ND	ND	ND	160	0.4
Tioga County	ND	ND	ND	ND	0	ND
Rabies (Animals)						
Pennsylvania	1340	N/A	1250	N/A	1,371	N/A
Tioga County	19	N/A	20	N/A	26	N/A
Salmonellosis						
Pennsylvania	5301	14.3	5250	14.1	5,412	14.5
Tioga County	41	21.8	41	21.8	24	19.6
Shigellosis						
Pennsylvania	1274	3.4	1315	3.5	688	1.8
Tioga County	1	0.5	106	56.5	0	ND

Source: Pennsylvania and County Health Profiles 2010, N/A = Not Applicable, ND = Not Displayed

2. HIV/AIDS

The Division of HIV/AIDS works with community partners to ensure that HIV prevention and care services are available and accessible throughout Pennsylvania for individuals infected with, and affected by HIV and AIDS and those at risk for contracting HIV. Some of the services provided are HIV counseling, testing, and referral, partner counseling and referral, prevention services for HIV-infected individuals and health education.

**Number Publicly Funded HIV Counseling and Testing Visits*
By Client's County of Residence: [Year – Year]**

County	2003	2004	2005	2006	2007
Bradford	109	161	93	145	124
Centre	1,573	1,535	1,363	1,327	1,572
Clinton	140	243	397	345	471
Columbia	423	664	619	499	566
Lycoming	1,383	1,371	1,236	1,051	1,246
Montour	147	105	168	100	61
Northumberland	733	659	295	300	308
Potter	11	22	23	13	32
Snyder	85	108	107	104	157
Sullivan	2	3	19	5	9
Tioga	108	155	153	87	147
Union	231	220	221	234	280

- A visit consists of a client meeting face to face with a counselor for counseling only or counseling and testing.

Source: Pennsylvania Department of Health, Division of HIV/AIDS, HIV/AIDS Surveillance Bi-Annual Summary 2008

AIDS Annual Incidence 2004 - 2009
For Pennsylvania and 12 Counties of the Northcentral District

County	2004	2005	2006	2007*	2008*	2009*	2008* Incidence per 100,000
Pennsylvania	1,341	1,193	1,598	1,384	1,086	752	8.70
Bradford	1	1	2	1	1	2	1.60
Centre	0	4	10	6	4	6	2.80
Clinton	1	0	2	0	0	0	0.00
Columbia	1	0	1	3	0	0	0.00
Lycoming	7	10	12	10	9	3	7.70
Montour	1	0	0	2	1	0	5.60
Northumberland	3	3	9	7	2	4	2.20
Potter	0	1	0	0	0	0	0.00
Snyder	0	0	2	0	0	0	0.00
Sullivan	1	0	0	0	0	0	0.00
Tioga	1	0	3	0	1	0	2.50
Union	4	2	4	3	3	0	6.90

Rates = per 100,000 based on Estimated 2008 Population

Source: Pennsylvania Department of Health, Bureau of Epidemiology, Division of HIV/AIDS, HIV/AIDS Surveillance Summary Report, December 2009

*Decline in AIDS incidence may be due to decrease in AIDS diagnosis attributable to improved antiretroviral therapy; and partially due to reporting delay.

Cause of Death HIV Infection

County	2004	2005	2006	2007	2008	2008 Incidence per 100,000
Pennsylvania	458	358	360	371	304	2.4
Bradford	3	2	2	1	1	ND
Centre	1	0	2	0	0	ND
Clinton	0	1	0	0	0	ND
Columbia	1	0	0	0	0	ND
Lycoming	8	1	5	3	2	ND
Montour	0	0	0	0	0	ND
Northumberland	3	1	1	1	0	ND
Potter	0	0	0	0	0	ND
Snyder	0	0	0	0	0	ND
Sullivan	0	0	0	0	0	ND
Tioga	0	0	0	0	0	ND
Union	1	0	0	1	0	ND

(Rates = per 100,000 based on (2005) population estimates)

Source: Pennsylvania Department of Health Vital Statistics
Population Total – PA DOH – Health Statistics & Research – County Health Profiles 2010 – 2008 Population Totals

3. Immunization

The Pennsylvania Department of Health's Division of Immunizations focuses on the reduction or elimination of vaccine-preventable diseases. Vaccines are provided for specific diseases that affect infants, children, adolescents and adults and are available from public and private health care providers. The Division of Immunizations also offers educational programs, ongoing disease surveillance systems, enforcement of school immunization regulations, disease investigations, assessment of immunization coverage, immunization registry and tracking systems, outbreak control interventions, and special efforts toward the prevention of Hepatitis B disease.

The Division of Immunizations is a provider for the Vaccines for Children (VFC) Program. This program provides publicly purchased vaccines for children birth through eighteen years old who are enrolled in the Medicaid Program, uninsured or are of American Indian/Alaskan Native descent. Children who have health insurance that does not cover immunizations are eligible also if they receive the vaccine at a Federally Qualified Health Center or Rural Health Clinic.

4. Sexually Transmitted Disease

The Sexually Transmitted Disease Program’s mission is the prevention of and the intervention in the transmission of sexually transmitted diseases. The main functions of the Program are the management of STD service delivery, education, training, surveillance and interaction with professional health care provides and community-based organizations.

The STD Program provides support for a variety of free and confidential STD services at various State Health Department Clinics, the Commonwealth’s independent county and municipal health departments, and by contract with numerous community-based health care providers throughout the state. These services include examinations, testing and treatment for STD’s.

Source: Pennsylvania Department of Health, PA EpiQMS Sexually Transmitted Diseases, Primary and Secondary Syphilis, Chlamydia and Gonorrhea

STD

Selected Morbidity: Incidence and Average Annual Rate (per 100,000 population)

	2006		2007		2008	
	# Cases	Rate				
Syphilis						
PA	264	2.1	263	2.1	272	2.2
Tioga County	0	ND	0	ND	0	ND
Chlamydia						
PA	39,487	317.4	42,469	341.6	42,233	339.3
Tioga County	48	116.7	41	100.8	59	145.4
Gonorrhea						
PA	11,466	92.2	12,706	102.2	11,071	88.9
Tioga County	1	ND	1	ND	7	ND

* No Data

5. Tuberculosis

The Tuberculosis Program provides a variety of services, such as TB skin testing, diagnostic and treatment services, contact investigations, and patient case management from the beginning of anti-tuberculosis therapy through its completion. These services are free to anyone who has active tuberculosis disease or latent tuberculosis infection, including those who are at high risk for TB infection or disease.

Tuberculosis services are provided by the State Health Department, county/municipal health departments, and other contractors.

Tuberculosis

Number of Cases and Case Rates (per 100,000)

Tuberculosis	2005		2006		2007	
	Cases	Rate	Cases	Rate	Cases	Rate
United States	14067	4.8	13727	4.6	13288	4.4
Pennsylvania	325	2.62	337	2.7	276	2.2
Northcentral District	5	0.70	6	0.9	0	0
Tioga County	0	0	0	0	0	0

Source: Pennsylvania Department of Health, 2005, 2006, & 2007 Tuberculosis in the Commonwealth of Pennsylvania
Reported Tuberculosis in the United States, 2008

D. Category for Health Action: Environmental Health

Environmental Health




Radon

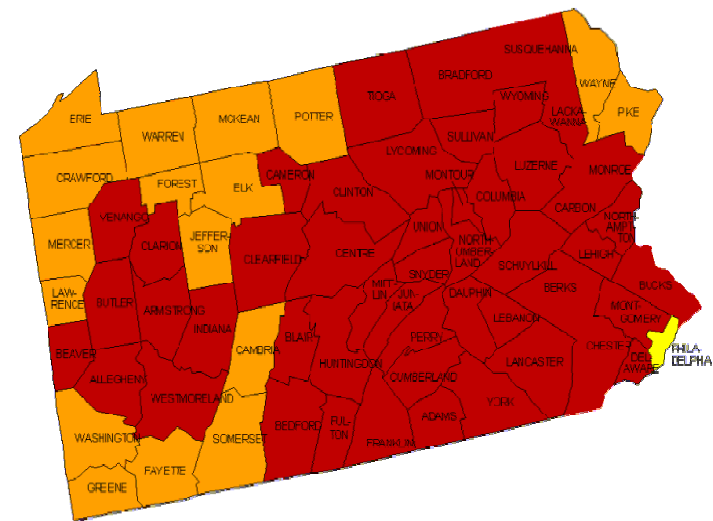
Radon is a cancer-causing natural radioactive gas that is colorless and odorless. It seeps into homes undetected through foundation cracks and, if trapped indoors, can reach harmful levels. Sources of radon include earth and rock beneath a home, well water, and building materials.

The only definitive health effect linked to radon exposure is lung cancer, which has been shown to occur five (5) to twenty-five (25) years after exposure.

EPA Map of Radon Zones

The United States Environmental Protection Agency (EPA) and the United States Geological Survey have evaluated the radon potential in the U.S. and have developed this map to assist National, State, and local organizations to target their resources and to assist building code officials in deciding whether radon-resistant features are applicable in new construction. This map is not intended to be used to determine if a home in a given zone should be tested for radon. Homes with elevated levels of radon have been found in all three zones. All homes should be tested regardless of geographic location. The map assigns each of the 3,141 counties in the U.S. to one of three zones based on radon potential. Each zone designation reflects the average short-term radon measurement that can be expected to be measured in a building without the implementation of radon control methods. The radon zone designation of the highest priority is Zone 1.

-  **Zone 1** Highest Potential (greater than 4 pCi/L)
-  **Zone 2** Moderate Potential (from 2 to 4 pCi/L)
-  **Zone 3** Low Potential (less than 2 pCi/L)



Important: Consult the EPA Map of Radon Zones document (EPA-402-R-93-071) before using this map. This document contains information on radon potential variations within counties. EPA also recommends that this map be supplemented with any available local data in order to further understand and predict the radon potential of a specific area.

EPA map of Pennsylvania Radon Zones can be found at <http://www.epa.gov/iaq/radon/zonemap/pennsylvania.htm>.

V. STATE HEALTH IMPROVEMENT PLAN (SHIP)

Starting in 1997, the Pennsylvania Department of Health embarked on a new direction for health planning. The Department has worked with subcommittees of its Health Policy Board composed of representatives of the community health improvement partnerships and a wide range of stakeholder groups to develop recommendations for a State Health Improvement Plan (SHIP). Through the SHIP, the Department engages and facilitates local health improvement partnerships in developing self-directed action steps to address health disparities and access barriers within their individual communities. SHIP related activities focus on three priorities.

1. Working with community health improvement partnerships to establish a method for mutual identification of priorities, resources, roles and responsibilities, as well as outcomes and evaluation measures;
2. Emphasizing planning and prevention to address the root causes of diseases, death and disability: Studies have shown that modifiable behavioral risk factors may be the cause of as much as 50 percent of deaths in the United States. The SHIP groups these root causes into six main *Categories for Health Action*: Communicable Disease, Chronic Disease, Family Health, Violence and Injury, Environmental Health, and Service Delivery Systems. The use of the *Categories for Health Action* permits the use of a broad definition of health, and creates greater latitude for communities to address local problems.
3. Improving access to data and sharing health status information with communities. The Department is developing a virtual (Internet-based) clearinghouse “web ring” to provide a wide range of access to demographic, economic and health status information. Community health improvement partnerships will be able to access information and data to help identify health disparities in their communities, and assess how they compare to statewide and national health indicators.

By changing the focus of health planning from a facility-oriented planning approach, SHIP encourages the development of public/private partnerships to develop and implement programs and share responsibility and accountability. SHIP implementation has four main health improvement priorities.

1. Integrate population-based health improvement principles into the local health and social services system.
2. Reduce fragmentation and increase coordination of programs.
3. Reflect national health improvement objectives such as those found in *Healthy People 2010*, the national health prevention agenda.
4. Support and encourage the linkage of preventive, social and personal health services into local health improvement systems.

**NORTHCENTRAL DISTRICT
SHIP PARTNERS**

SERVING COUNTIES	NAME	ADDRESS	PHONE FAX	CONTACT E MAIL
Bradford County	Bradford County Partners in Family & Community Development	4 Bridge Street Towanda, PA 18848	P: 570-265-6246 F: 570-265-6337	dspencer@pfc.org
Centre County	Centre County Partnership for Community Health	PO Box 563 Lemont, PA 16851	P: 814-689-3637 F: 814-689-3643	Ron.Banerjee@gmail.com
Clinton County	Clinton County Healthy Communities	c/o Clinton County Coop. Ext. Pennsylvania State University 47 Cooperation Lane Mill Hall, PA 17751	P: 570-726-002	Law27@psu.edu
Columbia County	ACTION Health	113 Mill Street, Suite 1-N Danville, PA 17821	P: 570-275-9150 F: 570-275-9152	allisonclark@verizon.net
Lycoming County	Lycoming County Health Improvement Coalition	49 East Fourth Street Williamsport, PA 17701	P: 570-323-0390	health@csrlink.net
Montour County	ACTION Health	113 Mill Street, Suite 1-N Danville, PA 17821	P: 570-275-9150 F: 570-275-9152	allisonclark@verizon.net
Northumberland County	ACTION Health	113 Mill Street, Suite 1-N Danville, PA 17821	P: 570-275-9150 F: 570-275-9152	allisonclark@verizon.net
Potter County	Family Collaborative Council	c/o Potter County Human Services North Street Roulette, PA 16746	P: 814-544-7315	lkaple@pottercountyhumannsvcs.org
Snyder County	ACTION Health	113 Mill Street, Suite 1-N Danville, PA 17821	P: 570-275-9150 F: 570-275-9152	allisonclark@verizon.net
Sullivan County	N/A			
Tioga County	Tioga County Partnership for Community Health	PO Box 812 5 East Avenue Wellsboro, PA 16901	P: 570-723-0520	tiogap@epix.net
Union County	ACTION Health	113 Mill Street, Suite 1-N Danville, PA 17821	P: 570-275-9150 F: 570-275-9152	allisonclark@verizon.net

<http://webservice.health.state.pa.us/health/lib/health/partnerships.pdf>

VI. Action Plans for Tioga County

Tioga County Asthma Plan 2008-2010

Objective(s):

By 6/30/2010, increase the proportion of persons with asthma who receive formal patient education, including information about community and self-help resources as an essential part of the management of their condition to 30%.

By 6/30/2010, increase the proportion of persons with asthma who receive appropriate asthma care according to the NAEPP Guidelines.

BASELINE	BENCHMARK
In 1998, 8.4% of persons with asthma received formal patient education (age adjusted to the year 2000 standard population). The average annual age-adjusted death rate (2003-2005) for Chronic Lower Respiratory Disease (C.L.R.D. consists of the following: Bronchitis, Chronic & unspecified, Emphysema, and Asthma: Bronchitis, Not Specified as Acute or Chronic; Chronic Bronchitis; Emphysema; Other Chronic Obstructive Pulmonary Disease; Asthma, Bronchiectasis) in Tioga County was 42.9, higher than the state rate of 39.2.	By 2010, increase the proportion of persons with asthma who receive formal patient education, including information about community and self-help resources, as an essential part of the management of their condition to 30%. By 2010, increase the proportion of persons with asthma who receive appropriate asthma care according to the NAEPP Guidelines.

#	ACTION STEPS	RESPONSIBILITY	TARGET DATE	PROGRESS TO DATE
3,4	Provide educational programs to the community upon request.	CDNC, CHN	6/2010	
3,4	Collaborate with the Steps to a Healthier PA Asthma Coalition to coordinate community education initiatives.	CDNC, CHN	6/2010	
3,4	Promote written asthma action plans as per NAEPP Guidelines and the Pennsylvania Asthma Plan via distribution of literature at health fairs, state health centers, work sites,	CDNC, CHN	6/2010	

	senior centers, health care provider offices, etc.			
3,4	Distribute asthma education information during immunization clinics and initiatives.	CHN	6/2010	
3,4	Disseminate information received from the Pennsylvania Asthma Partnership.	CDNC	6/2010	
3,4	Collaborate with School Nurse Consultant to provide updated asthma care guidelines and PA Action Plans for the annual school nurse update.	CDNC	6/2010	

Tioga County Cardiovascular Plan 2008-2010

- Objective(s):
1. To increase the percentage of people ages 18 and older who engage in 30 minutes of exercise per day in Tioga County.
 2. To decrease the percentage of Tioga County adult residents who are overweight.
 3. To increase cardiovascular awareness among Tioga County residents.

BASELINE	BENCHMARK
1. BRFSS 1996-2000 No leisure time activity - PA 27.3%; Bradford, Sullivan, Tioga, Lycoming, Clinton, and Potter Counties 29.3%. 2. BRFSS 1996-2000 Overweight adults – PA 55.9%; Bradford, Sullivan, Tioga, Lycoming, Clinton, and Potter Counties 60.5% 3. 2003-2005 Rates per 100,000: Heart Disease PA- 237.6; Tioga County 205.0. Stroke – PA 50.5; Tioga County 45.6	1. Decrease adults who participate in no leisure time physical activity to 20% by 2010. 2. Decrease adults who are overweight to 40% by 2010. 3. Reduce CHD to 166/100,000 and stroke to 48/100,000 by 2010.

#	ACTION STEPS	RESPONSIBILITY	TARGET DATE	PROGRESS TO DATE
4,5	Collaborate with local community organizations, schools, work sites etc. to implement physical activity programs for persons with sedentary lifestyles.	CHC, CHN	6/10	
4,5	Participate in a minimum of one initiative yearly that raises awareness of cardiovascular disease risk reduction to an at risk populations.	CHC, CHN	6/10	
3,4	Participate in and promote activities related to the STEPS to a Healthier US initiative.	CHC, CHN	6/10	

Tioga County Immunizations/VPD Plan 2008-2010

- Objectives:
1. Increase the proportion of children entered into the Statewide Immunization Information System (SIIS).
 2. Increase the number of providers entering data into SIIS.
 3. Increase awareness of and demand for childhood, adolescent and adult immunization services.

BASELINE	BENCHMARK
<ol style="list-style-type: none"> 1. In 2008, 30 Tioga County children under 6 years were entered into SIIS. 2. In 2008, the SHC remains the only provider enrolled in SIIS in Tioga County. 3. In 2008, active work group members include representation from PA DOH, SSMH, AAA, TCPCH, and community. 	<ol style="list-style-type: none"> 1. By 2010, increase the percentage of children under age 6 years entered into the immunization registry to 95%*. 2. By 2010, support the operationalization of SIIS within Soldiers & Sailors Memorial Hospital/Laurel Health System. 3. Expand representation and participation in Immunization Work Group (IWG). <p style="margin-top: 10px;">*HP 2010</p>

#	ACTION STEPS	RESPONSIBILITY	TARGET DATE	PROGRESS TO DATE
1,3,4,5,7	Partner with LHS and BIT to plan and implement SIIS within SSMH and LHC's.	INC, CHN	6/10	
3,4,7	Participate in at least 75% of IWG meetings to support ongoing and new immunization initiatives.	INC, CHN	6/10	
3,4,7	Increase efforts to actively recruit at least 2 new organizations/members to participate in IWG activities.	CHN, INC	6/10	
1,2,3,4,5,7,9	Promote awareness and demand for immunizations through: <ul style="list-style-type: none"> ▪ bulletin boards and dissemination of information at SHC, 	CHN, INC	6/10	

	<ul style="list-style-type: none"> ▪ community/professional education, ▪ NIIW activities (April), ▪ NIAM (August), ▪ Participation in health fairs, ▪ Targeted community immunization clinics. 			
8	Update current immunization skills/knowledge by participating in at least 1 CE program annually.	CHN. INC	6/10	

Tioga County Injury Prevention Plan 2008-2010

- Objective: 1. Increase the average age of first alcohol use among adolescents 12 to 17 years.
 2. Increase clear community level anti-drug messages to reduce risk factors *Laws and Norms Favorable to Drug Use* and *Parental Attitudes Favorable Toward ATOD Use*.
 3. Reduce preventable injuries and deaths of Tioga County residents.

BASELINE	BENCHMARK
1. PA Youth Survey (PAYS) 2005 <ul style="list-style-type: none"> ▪ Average age of first alcohol use: PA 12.8, Tioga Co 12.5; ▪ Laws and norms favorable to drug use: PA 50, Tioga Co 52; ▪ Parental attitudes favorable toward ATOD use: PA 47, Tioga Co 50. 	1. Increase the average age of first alcohol use among Tioga County youth by 2 years. 2. Reduce identified youth risk factor scale scores to level at or below State scores.
2. Tioga County had 77 deaths due to injury related incidents. [2000-2004 Injury Death Statistics]	1. Reduce hospital emergency department visits and deaths caused by injuries.

#	ACTION STEPS	RESPONSIBILITY	TARGET DATE	PROGRESS TO DATE
3	1. Provide injury prevention/substance abuse prevention education to the community upon request and/or proactively through community partners.	CHN, IPC	6/10	
3,4,5	2. Participate in at least 75% of ATOD Resource Network and CTC meetings annually.	CHN	6/10	
3,4,5,7	3. Promote awareness and decrease stigma associated with addiction through: <ul style="list-style-type: none"> ▪ Community forums, ▪ National Recovery Month activities, ▪ Tree of Hope, 	CHN	6/10	

	<ul style="list-style-type: none"> ▪ Community/professional education. 			
8	4. Participate in at least 1 CE activity to enhance knowledge/skills related to adolescent/family development or substance abuse.	CHN	6/10	
3,4,5	5. Participate in the newly formed Tioga County Child Death Review Team.	CHN, MCHNC	6/10	
3	6. Collaborate with Safe Kids Tioga County and other community partners to address issues of car seat/seat belt safety, bicycle helmet use, or other safety issues for children at a minimum of one community event or presentation yearly.	CHN, IPC	6/10	

Tioga County School Health Plan 2008 - 2010

Objective(s): By 2010 increase the proportion of elementary, middle and high schools that provide school health education and ensure practices that promote optimal health to the students, faculty and staff to 70%

BASELINE	BENCHMARK
<ol style="list-style-type: none"> 1. Four private/charter schools in the Northcentral District have been monitored and audited. 2. Northcentral District, 69% overall average of participants in the School Health Update and Annual Orientation programs for 2007-2008 school year. 3. Northcentral District, 65% school districts that have provided a bloodborne pathogen program to staff and faculty since October, 2006. 	<ol style="list-style-type: none"> 1. Increase the proportion of private/charter schools in Centre, Columbia, and Tioga Counties that provide health services and maintain school health records to 10% by school year 2010. 2. Increase the proportion of participants attending yearly School Health Update programs and the Annual Orientation program to 75%. 3. Increase the proportion of public schools that provide an annual bloodborne pathogen program to faculty and staff to 75%.

#	ACTION STEPS	RESPONSIBILITY	TARGET DATE	PROGRESS TO DATE
6	Monitor and audit private/charter school health and immunization records for compliance of the School Code of 1949.	SHC, INC	June 30, 2010	
3, 6	Monitor private/charter schools for compliance of mandated health screenings.	SHC	June 30, 2010	
3, 8	Plan, develop and facilitate one school health update program yearly for school nurses and health room staff.	SHC	June 30, 2010	
3,8	Present an Annual Orientation program to new certified school nurses that have been employed by a school district for 1-3 years.	SHC	August, 2010	
3, 6, 8	Provide a bloodborne pathogen program to public schools upon request to meet the Act	SHC, CDN	June 30, 2010	

	96, Bloodborne Pathogen Standard Act.			
6, 9	Assess the number of school districts that are in compliance with the Bloodborne Pathogen Standard Act through the responses on the School Health Update evaluation form.	SHC	June 30, 2010	
3, 6	Provide technical support/consultation to schools to ensure compliance of mandated school immunizations for the school age population.	SHC, INC	June 30, 2010	
3, 5, 6, 8	Present school health information to school administrators through presentations at the Intermediate Units, email and mail.	SHC	June 30, 2010	
3,4	Provide school health information through phone calls, emails, and programs as requested by the public.	SHC	June 30, 2010	

Tioga County Special Health Care Needs 2008 - 2010

Objective(s): By 2010 increase access to services and improve care coordination for people with special health care needs as measured by an increase of 5% of children receiving Early Intervention services or transition services.

BASELINE	BENCHMARK
<p>In 2006-2007, children served by Early Intervention services was 141. In 2005-2006 percentage of children served in Special Education Programs was 14.2%.</p>	<p>By 2010, increase the number of referrals to early intervention, Special Kids Network and other state and community resources by 5%. By 2010, increase the number of youth with special health care needs who receive the services necessary to make appropriate transitions to adult health care, work, and independence.</p>

#	ACTION STEPS	RESPONSIBILITY	TARGET DATE	PROGRESS TO DATE
3, 4	Participate as an active member of the LICC by attending monthly meetings (as held) and supporting council initiatives when appropriate.	SHCNC	June 30, 2010	
3, 4	Participate as an active member in the Disability Awareness Network (DAN) by attending monthly meetings (as held) and supporting initiatives when appropriate.	SHCNC	June 30, 2010	
3, 4	Provide education and/or consultation on Special Needs as requested.	SHCNC	June 30, 2010	
3, 7	Track children needing follow-up (as needed) due to not passing Newborn Hearing Screening.	SHCNC	June 30, 2010	
3, 7	Provide outreach to families regarding availability of resources such as MA, MAWD, CHIP, Adultbasic (COMPASS)	SHCNC	June 30, 2010	
3, 7	Provide linkage and/or referrals to appropriate	SHCNC	June 30, 2010	

	community resources for CSHCN.			
3, 7	Provide education to “medical home” physicians as requested.	SHCNC	June 30, 2010	
3, 7	Participate as an active member in the Transition Council by attending meetings and supporting initiatives.	SHCNC	June 30, 2010	

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