

Jefferson County
Community Health Assessment



2019

Introduction



Jefferson County is a rural county in southwest Montana encompassing 1,650 square miles. With a population of 11,625, it is in the top 15 most populous of the 56 counties in the state. The population density of the county is 7 people per square mile, the same as Montana as a whole. There are three census tracts containing the communities of: Montana City and Clancy in the north; Boulder, Basin and Jefferson City in the central part of the county; and Whitehall and Cardwell in the south. The county is home to the

Elkhorn Mountains and is a hub for outdoor recreation with more than half a million acres of public lands and ample opportunities to hike, bike, float, fish and hunt. Unique attractions within the county include Ghost Towns of Elkhorn and Comet, the historic Boulder Hot Springs Retreat Center, and three radon mines which attract visitors from around the world. Jefferson County is also home to the longest continuously functioning school in Montana, the Basin Grade School. The county has a portion of the famed Continental Divide Trail, over 800 miles of which passes through our state.

Jefferson County is governed by three county commissioners. The Jefferson County Government operates a health department which provides services through two offices: Public Health and Environmental Health. The Health Department is overseen by a Health Board consisting of 5 county residents appointed by the county commission. The Public Health Department programs include Communicable Disease Control and Prevention, Immunizations, Maternal Child Health, School Nursing, Public Health Emergency Preparedness, and Blood Pressure Screening. Services are offered in Boulder Monday through Friday, and satellite services are offered weekly in Whitehall and Clancy. Off-site immunization clinics are held periodically throughout the year. The Environmental Health Department programs include the following: Licensing and Inspection, Subdivision Review, and Septic System Permitting, Junk Vehicle Removal, and Animal Bite Investigation.

There is not a hospital in Jefferson County; medical needs of residents are met by Whitehall Medical Clinic 5 days per week and Boulder Medical Clinic 3 days per week. Because the nearest hospitals serving county residents are in Bozeman, Butte and Helena, emergency medical needs are met through Boulder and Whitehall volunteer ambulance services and a paid private ambulance service in Montana City.

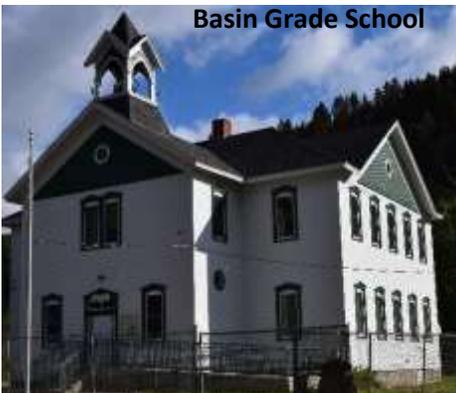
In August 2018, the Jefferson County Health Department received funding from the Montana Department of Public Health and Human Services (DPHHS) to develop a Community Health Assessment for Jefferson County. The health department convened a steering committee of community partners to guide the process.

This document provides an overview of the data available on the current health status of the population of Jefferson County, Montana. It includes data from an online survey of local stakeholders along with an analysis of available secondary data from various sources such as Montana Vital Statistics, US Census Bureau, Centers for Disease Control and Prevention, Montana DPHHS, County Health Rankings Report, and others. The stakeholder assessment was structured by Loveland Consulting, LLC, which also provided analysis of the primary and secondary data.

For more information contact Karen Wandel at (406) 225-4009 or kwandel@jeffersoncounty-mt.gov.



Hwy 69 N of Cardwell/Whitehall



Basin Grade School



Boulder Hot Springs



Historic kilns by Warm Springs



Clancy Library

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- Katie Loveland, Loveland Consulting, LLC
- Karen Wandel, RN, Jefferson County Health Department

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- Doug Dodge, Disaster and Emergency Services (DES), for the additional survey questions regarding emergency planning
- Megan Bullock, RS, Jefferson County Health Department, for water quality section
- Molly Carey, Jefferson County Health Department, for editing the final report

Special thanks to the stakeholders, those working in Jefferson County and serving community members, for participating in the survey. Your feedback was crucial to the completion of this project.

- Staff and Leadership from our schools, which comprised 24% of the survey respondents
- Representatives of Jefferson County (elected officials, department heads, employees, and board members)
- Healthcare Communities of Whitehall and Boulder including medical providers, dental and chiropractic providers, mental health providers, substance abuse service providers, and paid emergency responders
- Volunteer responders for Fire, Search and Rescue, and Ambulance departments
- Pastors/Church Representatives from the county
- City Council and CTAC/BTAC Members of Whitehall and Boulder
- Members of Whitehall and Boulder Chambers of Commerce
- Daycare, Head Start, and Preschool providers

Whitehall Frontier Days Parade Entries/"Floats"



Jefferson County Fair Rodeo



Farmer's markets are available during the summers in Boulder and Whitehall.



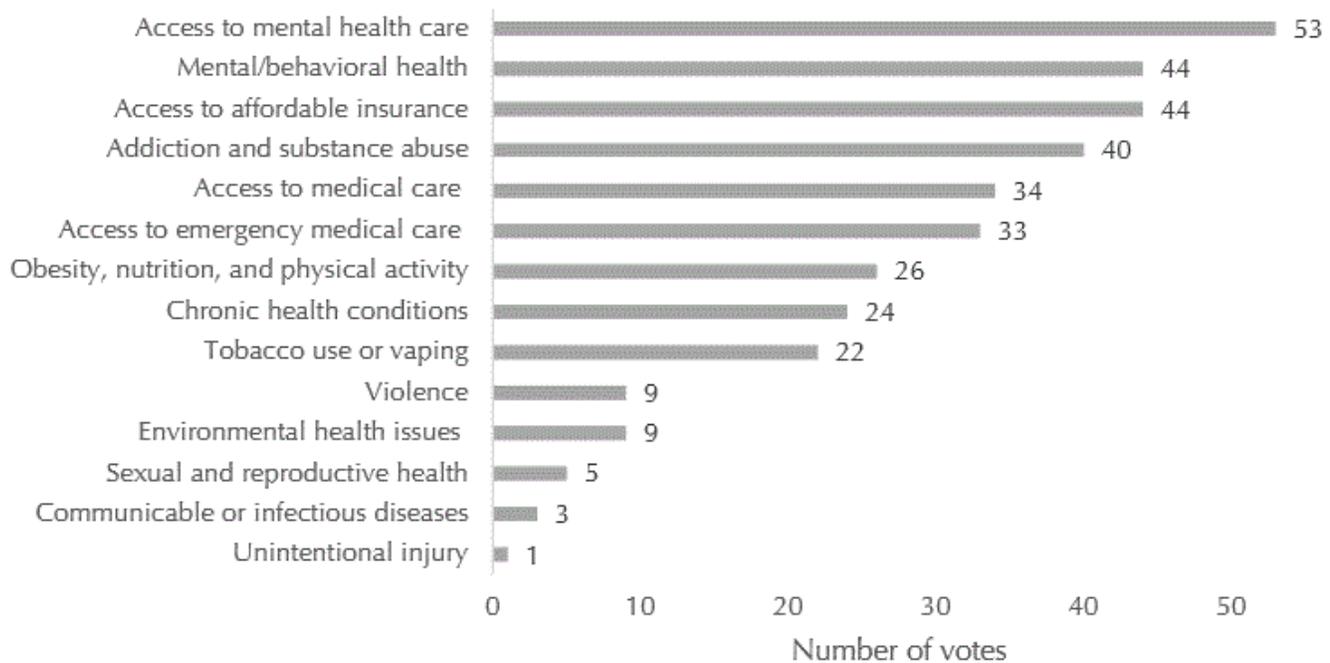
Jefferson County Fair entertainment



Community Stakeholder Survey

In March 2019, an electronic survey was sent to community stakeholders in Jefferson County to assess their perceptions of the top health challenges in our community. A total of 101 responses were received. This section details the results of that survey.

Top health issues of concern in Jefferson County, ranked



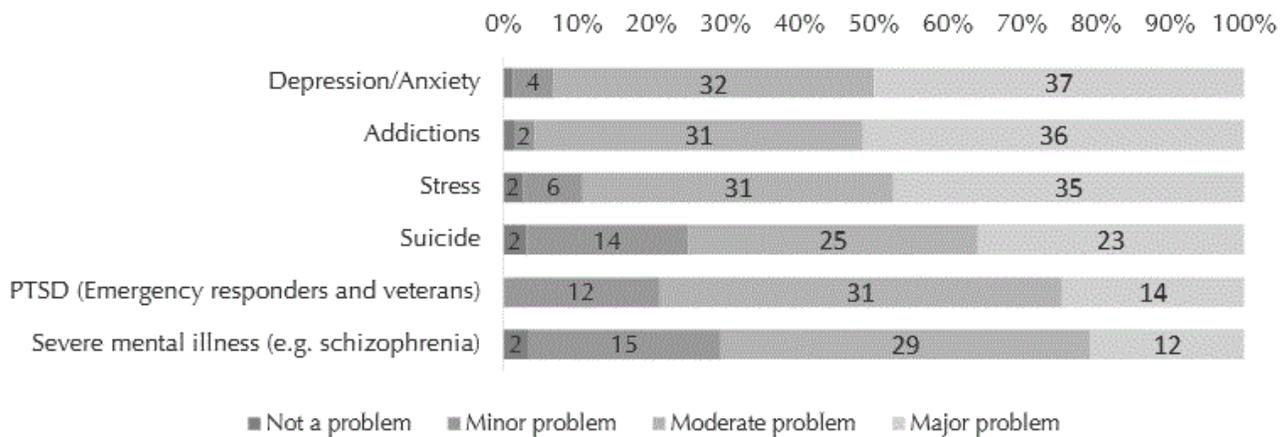
Stakeholders were asked to rank their top four health concerns in Jefferson County. *Overall, access to mental health care was the top concern, followed by mental/behavioral health.* The third highest concern was access to affordable insurance, then addiction and substance abuse, access to medical care, and access to emergency medical care.

The next section will look at these top health concerns in more detail.



Mental health and substance use

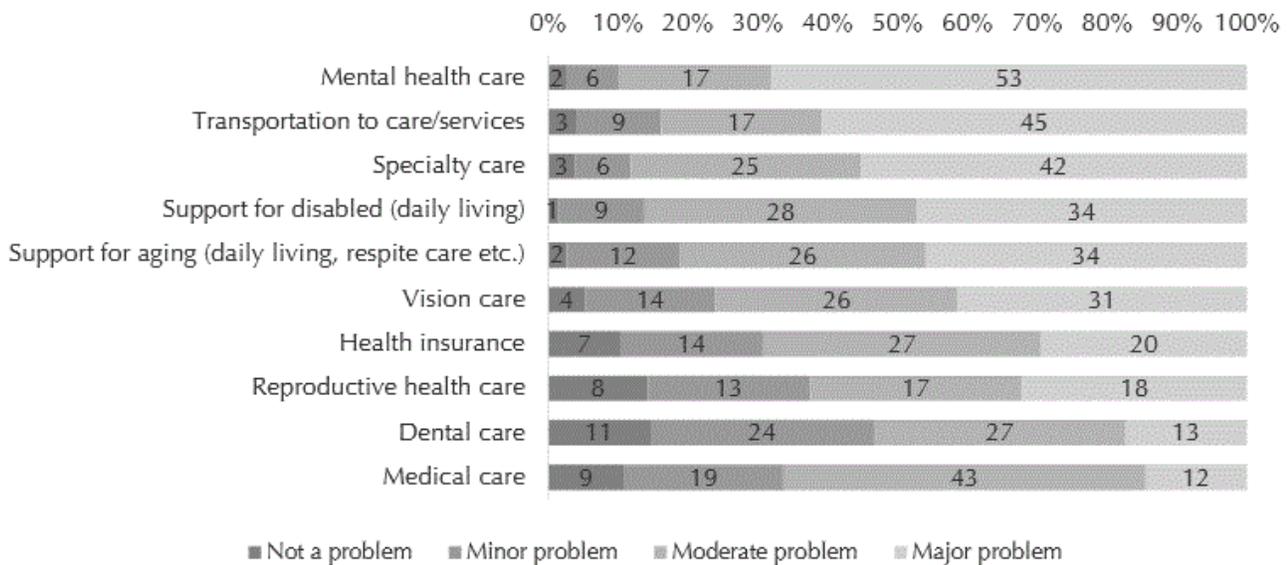
Mental health and substance use issues in Jefferson County, ranked



In the area of behavioral health, stakeholders rated depression/anxiety, addictions and stress as the top concerns.

Access to care

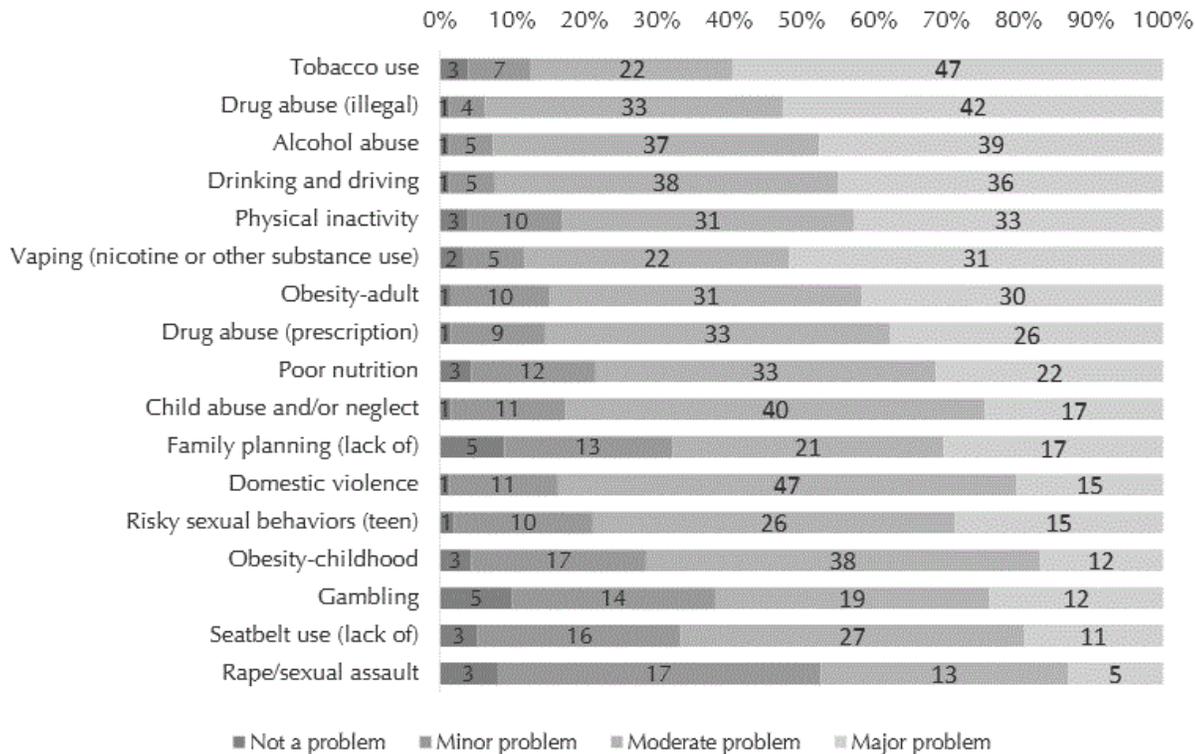
Access to care issues in Jefferson County, ranked



Without a hospital and with limited clinical services in the county, **access to care ranked as a key concern** among survey respondents. Stakeholders were asked to rank access to different types of care that are most concerning. *Access to mental health care was the top concern, with no providers in Boulder and few in Whitehall and Montana City.* Ranked next highest were access to transportation, specialty care and support for disabled and aging individuals.

Health behaviors

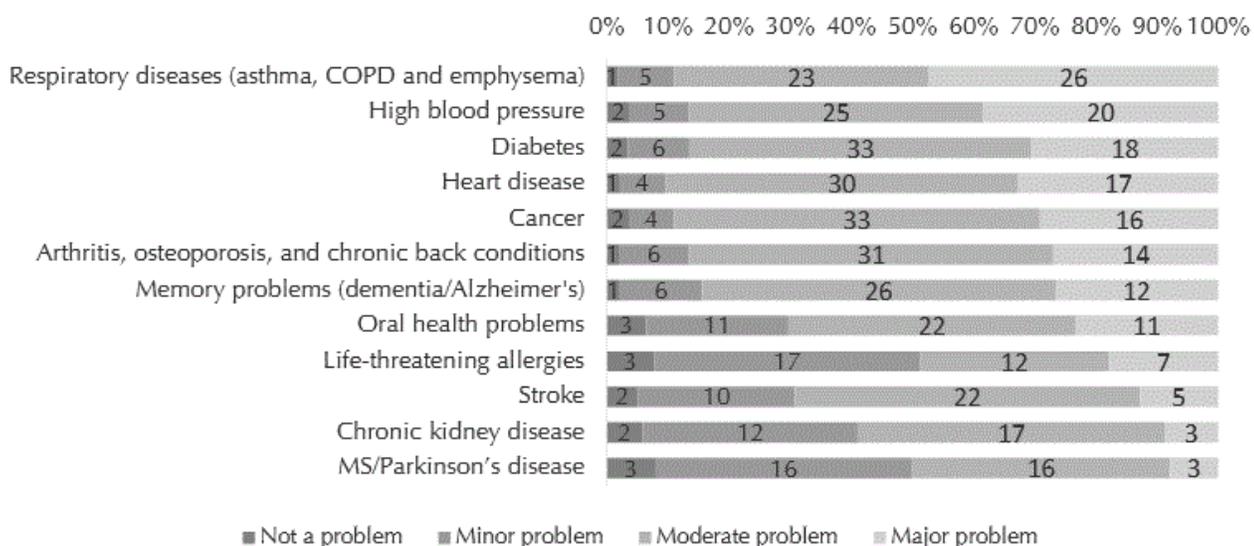
Health behaviors of concern in Jefferson County, ranked



Stakeholders selected substance use issues as the most concerning health behaviors in the county. Illegal drug abuse, alcohol abuse, and drinking and driving were rated as major or moderate problems by about 75% of the respondents. Tobacco use was also listed as a health behavior of major to moderate concern by just under 70% of the respondents.

Chronic disease

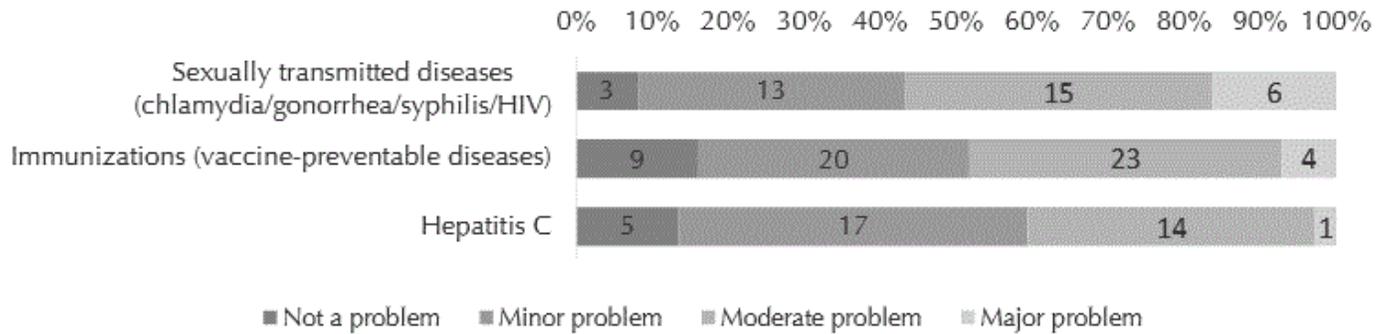
Chronic disease issues in Jefferson County, ranked



Chronic respiratory diseases and high blood pressure were ranked as the top chronic disease concerns by stakeholders, followed by diabetes, heart disease and cancer. However, roughly half responded that they didn't know how big of a problem these chronic diseases were.

Communicable disease

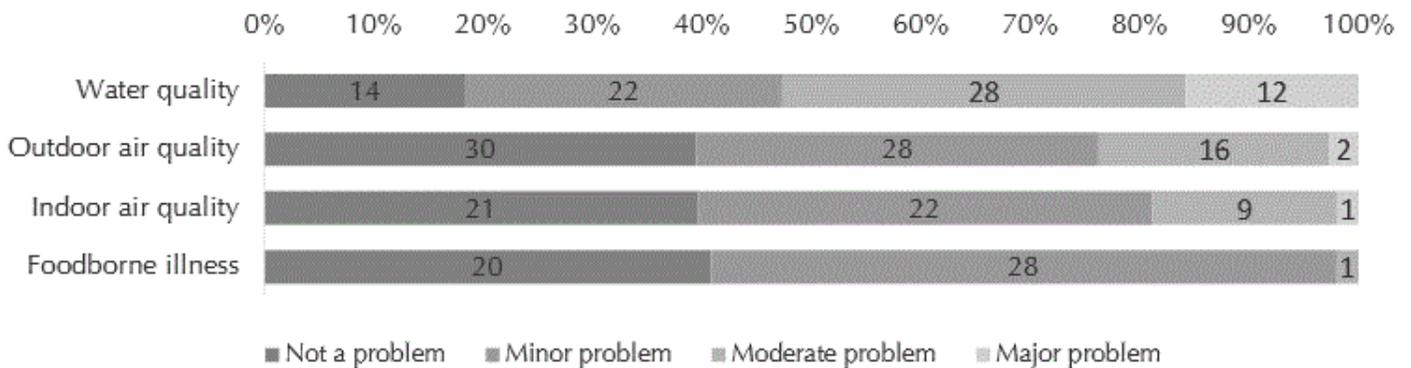
Communicable disease issues in Jefferson County, ranked



Most stakeholders responded that they didn't know how big of a problem the listed communicable diseases were in Jefferson County. However, of those who responded, sexually transmitted diseases (STDs) were ranked as a highest of the three choices.

Environmental health

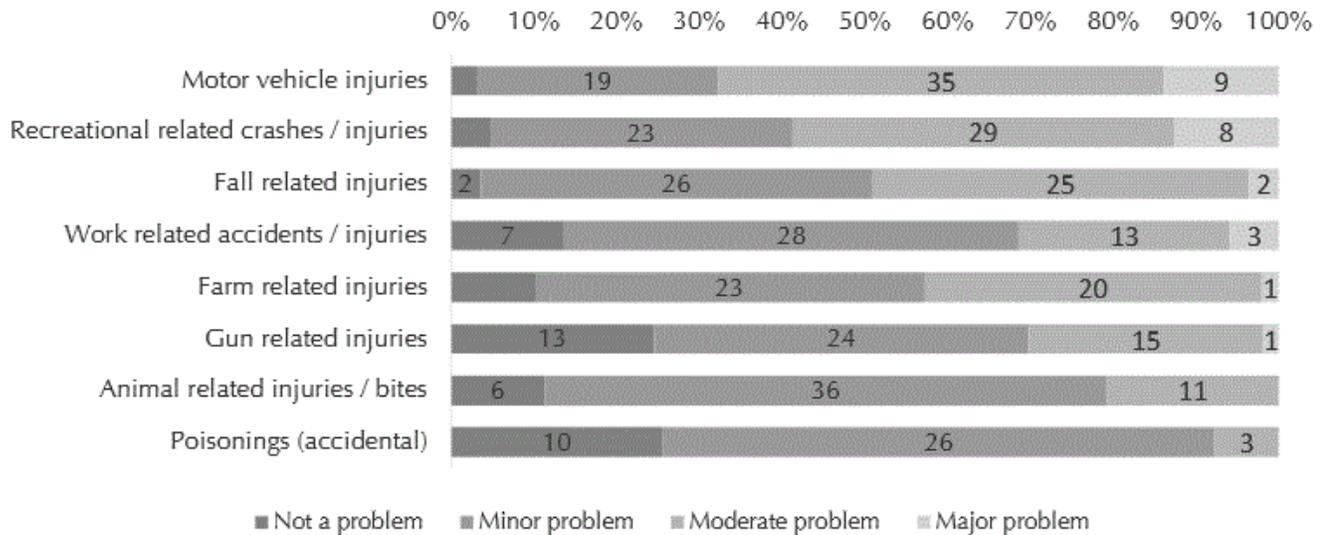
Environmental health issues in Jefferson County, ranked



Water quality ranked as the number one issue of concern in the area of environmental health. Approximately half of the stakeholders responded that they didn't know how big of a problem indoor air quality or foodborne illness was.

Injury

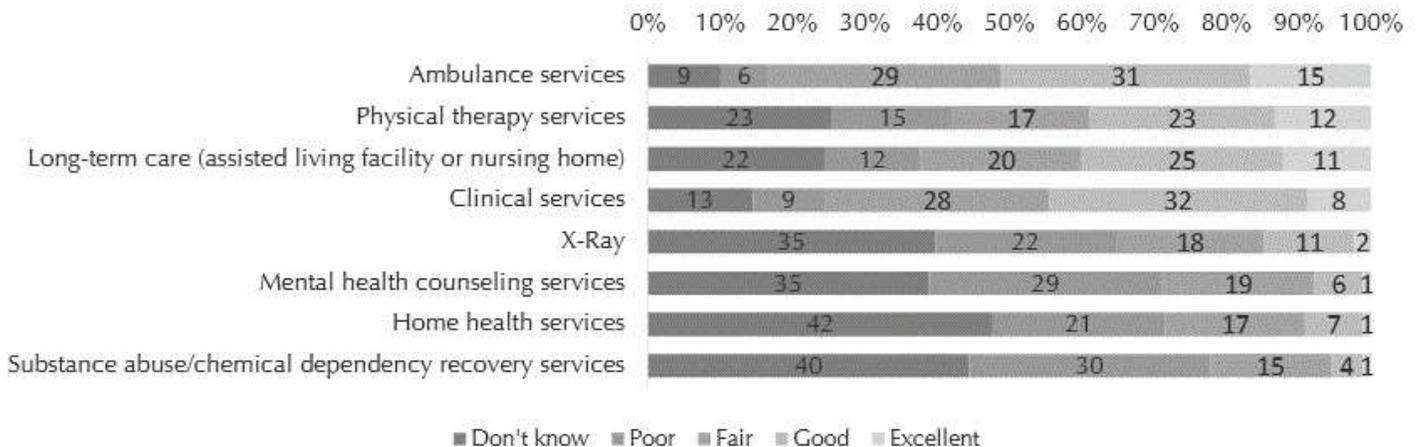
Unintentional injury health issues in Jefferson County, ranked



Motor vehicle injuries and recreational related crashes/injuries were ranked as the top unintentional injury concern in Jefferson County. A significant number of respondents ranked falls and farm related injuries as moderate problems.

Quality of health services

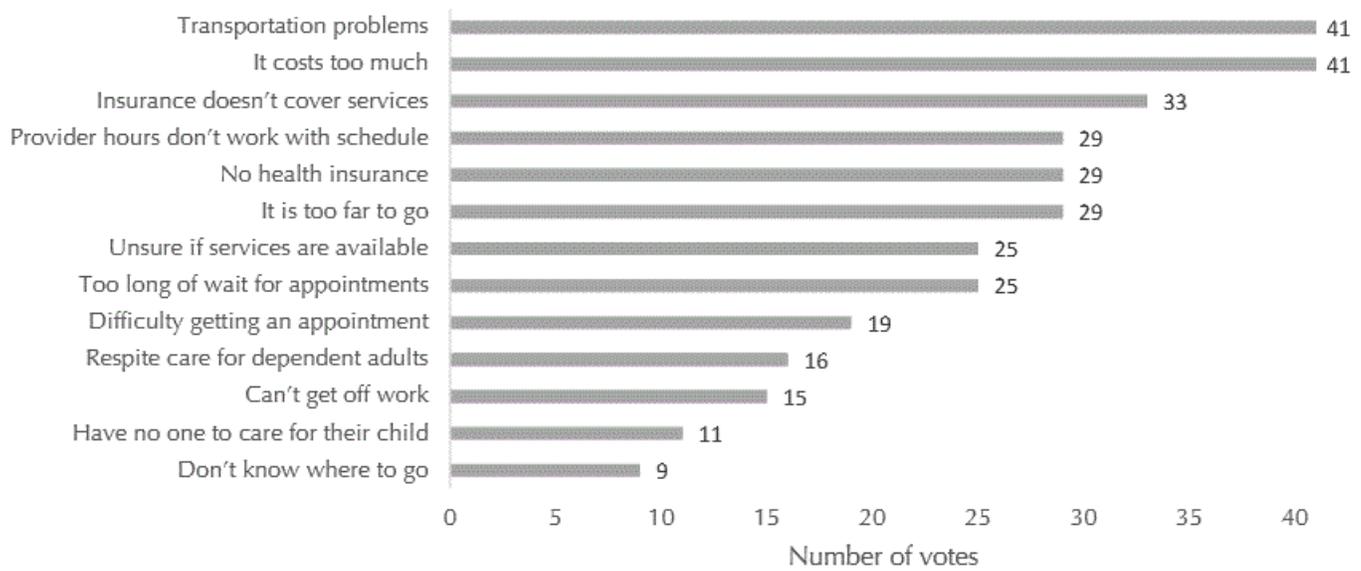
Perceived quality of health services in Jefferson County



Stakeholders were asked to rate their perception of the quality of services in Jefferson County. Ambulance services were the only health services ranked by the majority as “Excellent” or “Good”. Clinical services were rated at 44% “Excellent” or “Good”. Mental health counseling services and substance use recovery services were perceived to be of the lowest quality at 8% and 4%, respectively. Over 40 percent of the respondents stated they didn’t know the quality of the home health or substance abuse recovery services.

Barriers to care

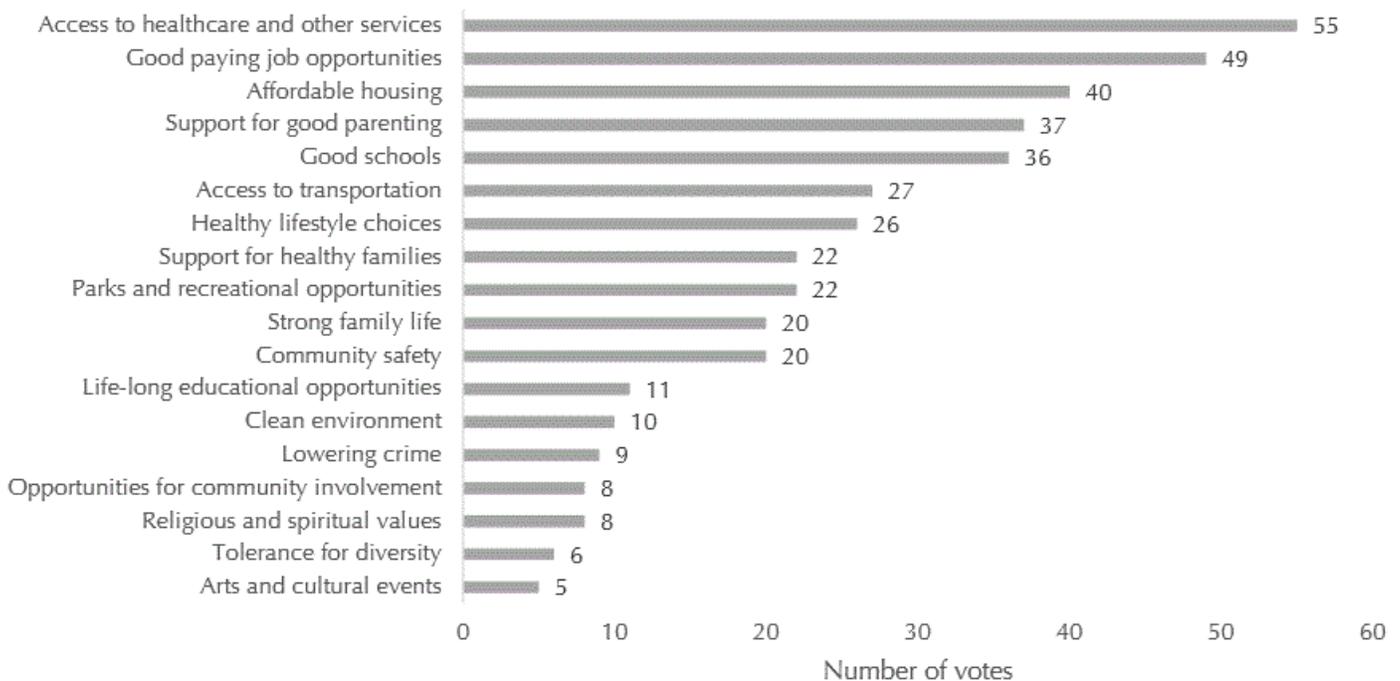
Most significant barriers to accessing adequate health care in Jefferson County, ranked



Stakeholders selected transportation and cost of care as the top barriers to accessing health care. Inadequate or lack of health insurance, provider hours and distance to services were also flagged as barriers.

Suggestions for improving health

Areas of focus for improving the overall health of the Jefferson County population, ranked



When asked to rank areas of focus for improving the overall health of the county's population, **access to health care again rose to the top** among stakeholders. Economic supports, including jobs and affordable housing, parenting support, and good schools were also ranked highly.

Stakeholder comments

Some respondents to the survey provided additional comments related to barriers to achieving health and suggestions for improving the health of the Jefferson County population.

BARRIERS TO CARE AND AWARENESS OF SERVICES

- “Residents are expected to go to Lewis and Clark County for services, and then they are hassled for not being that county’s residents.”
- “Mental health services are available, however this community is very protected so people don’t step out and ask for help as frequently as they need to.”
- “We have a lack of providers and oftentimes, adequate care does not exist in Jefferson County.”
- “Parents don’t understand their children’s coverage.”
- “Long term care facilities are limited in the number of beds and staff.”
- “Unless you subscribe to the newspaper, communication about services is sparse.”

NEEDED SERVICES TO IMPROVE HEALTH

- “Daycare services for working parents”
- “More support groups like Alcoholics Anonymous”

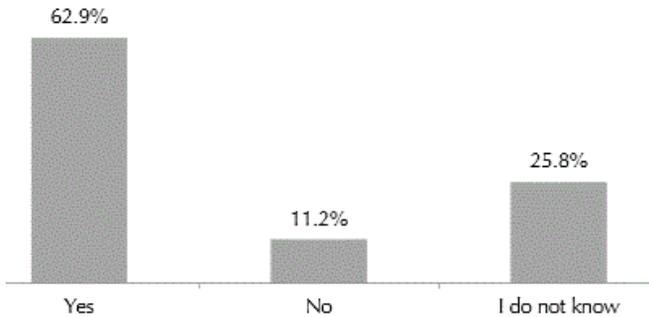


Montana City Sunrise

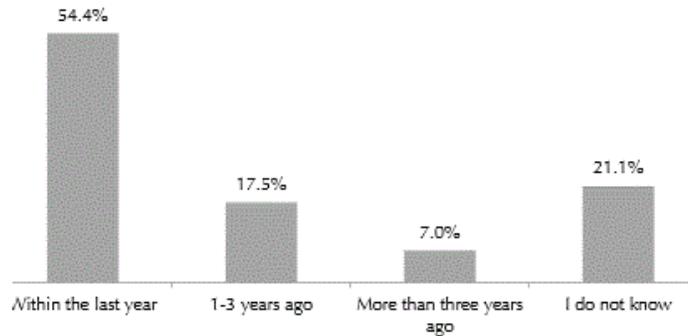
Emergency Preparedness

The following survey questions were requested by the county Disaster and Emergency Services Office.

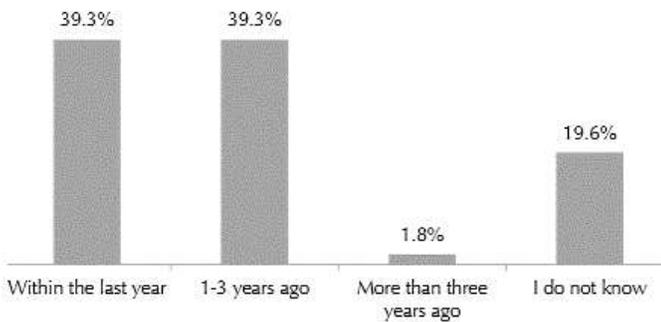
Does your agency/organization have an all-hazard emergency operations plan in place?



When was the last time your emergency operations plan was tested/exercised?

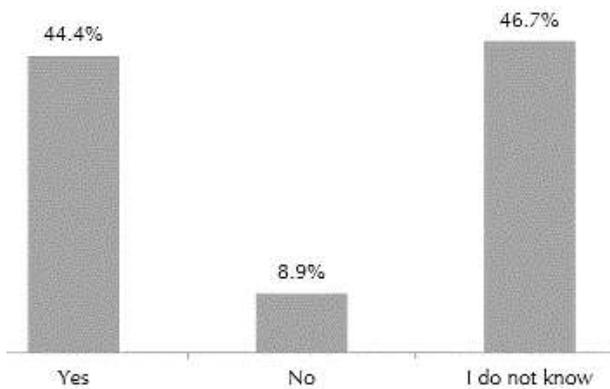


When was the last time your emergency operations plan was updated?

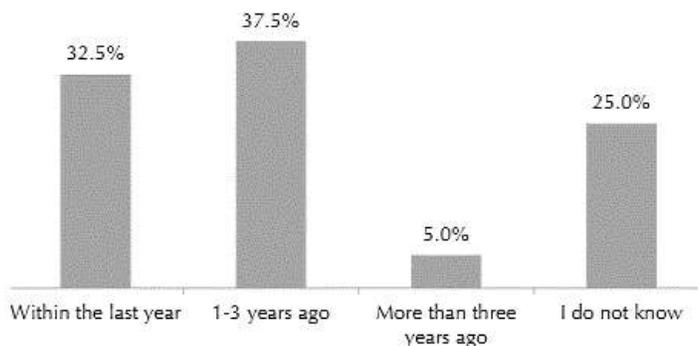


Almost two-thirds of health stakeholders indicate that their organization has an emergency operations plan (EOP) in place. Of those that answered “Yes” to having an EOP, almost 80% indicate that the plan was updated within the last three years and more than 70% indicate that it was tested or exercised within the last three years.

Does your agency have a continuity of operations plan?

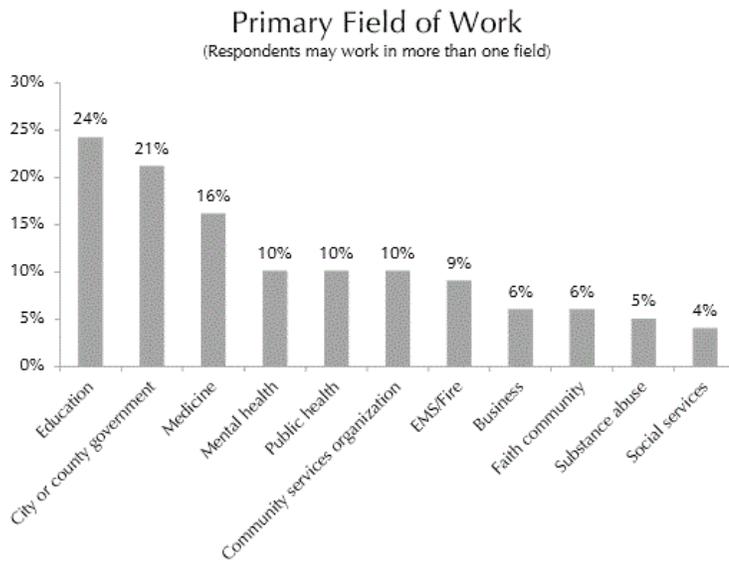


When was your continuity plan last updated?



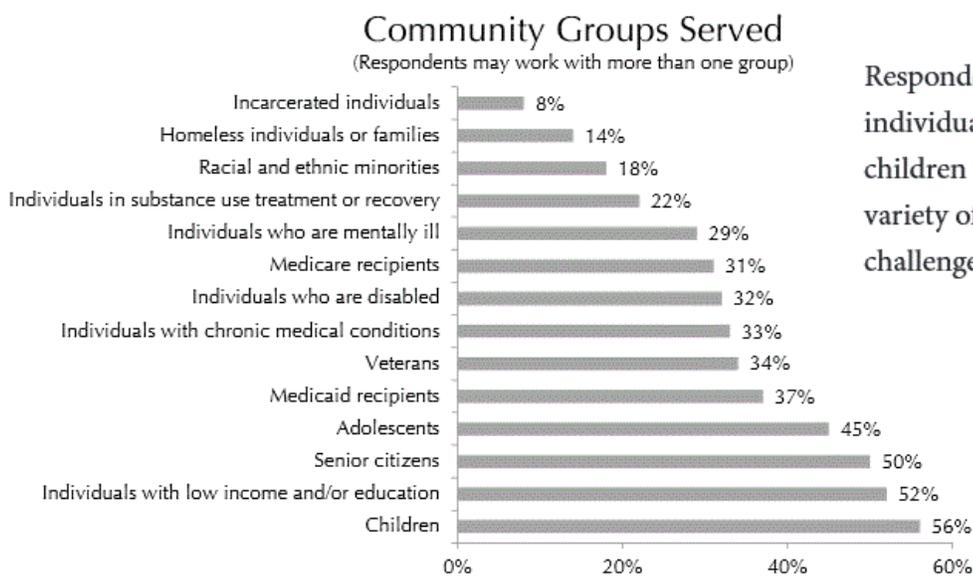
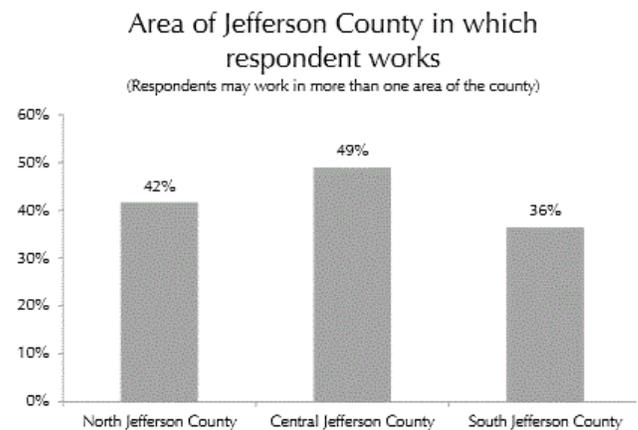
Community stakeholder respondents' demographics

Responses to the community stakeholder survey came from partners across the county working in a variety of fields and serving diverse populations.



One-fourth of the survey respondents work in education and one-fifth work in city or county government. However, the remaining 55% of stakeholders represent medicine, mental health, community and faith groups, first responders, businesses, and substance abuse.

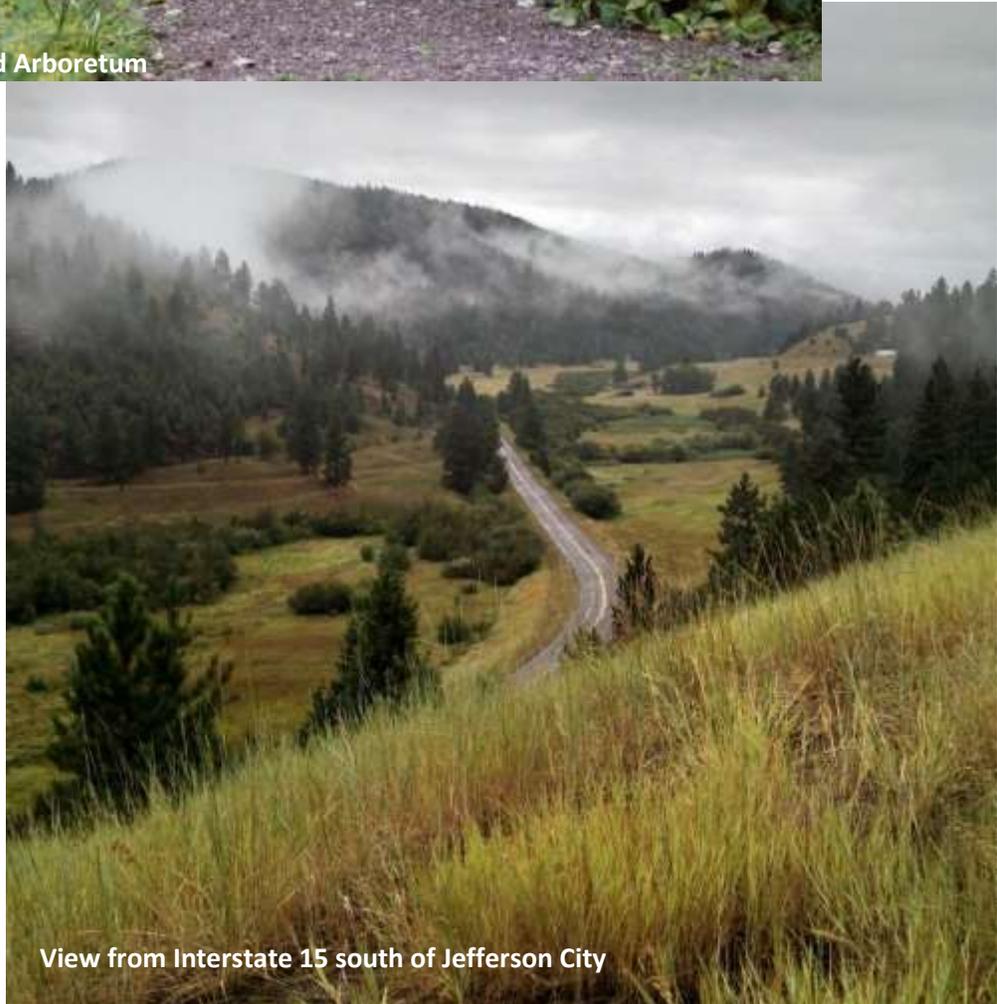
Stakeholders from all areas of the county were represented in the survey, with more than one-third respondents working in each of the three primary population centers.



Respondents indicate that they serve individuals across the lifespan from children to senior citizens and with a variety of health and socioeconomic challenges.



Tizer Botanic Gardens and Arboretum



View from Interstate 15 south of Jefferson City

Jefferson County Demographics

	Jefferson County	Montana	United States
Population	11,625	1,050,493	321,004,407
Median Age	47.9	39.8	37.8
Under 5	4.2%	5.9%	6.2%
Under 18	21.0%	22.0%	22.9%
65 and older	19.1%	17.1%	14.9%
Male	48.8%	49.7%	50.8%
Female	51.2%	50.3%	49.2%
White (alone)	95.5%	86.6%	73.0%

Age, Gender and Race

With a population of 11,625 in 2016, Jefferson County is considered a “medium sized county” by DPHHS. The median age in our county is more than ten years older than the United States median, with almost one in five residents over the age of 65. The majority of Jefferson County residents are white. One in eight residents in Jefferson County are veterans (12.8%) compared to one in thirteen in the United States as a whole.

Education, income and employment

	Jefferson County	Montana	United States
Did not graduate high school	5.2%	7.0%	5.4%
Bachelor’s Degree or higher	32.9%	30.7%	30.9%
3 and 4 year olds enrolled in preschool	43.4%	40.3%	47.5%
15 to 17 year olds enrolled in school	96.4%	95.3%	96.8%
Median household income	\$64,911	\$50,801	\$57,652
Percent in poverty	9.9%	14.4%	14.6%
Households on the Supplemental Nutrition Assistance Program (SNAP)	5.9%	10.2%	12.6%
Households with children under 18 receiving SNAP	12.5%	18.4%	20.9%

Jefferson County values education and it shows. The county has a higher percentage of high schoolers graduating than other Montanans and a higher percentage of residents with a bachelor’s degree or higher than Montana or U.S. as a whole. The unemployment rate in Jefferson County is five percent, with ten percent of residents living in poverty compared to fourteen percent (14%) in Montana and nationwide. It follows then that the percentage of Jefferson

County households receiving monetary nutrition assistance is roughly half that of Montana and the U.S. as a whole. Sixty percent of residents work outside the county and their average commute time is 20 minutes.

Source: American Community Survey, Five Year Estimates, 2013-2017
Tri-County Housing Assessment, 2018

	Jefferson County	Montana	United States
Owner occupied housing	85.1%	67.7%	63.8%
Renter occupied housing	14.9%	32.3%	36.2%
Vacant housing	11.6%	16.2%	12.2%
Housing built in year 2000 or later	21.3%	19.4%	17.7%
No vehicle available	2.7%	5.1%	8.8%
Housing lacks complete plumbing facilities	0.9%	0.5%	0.4%
No telephone service	0.6%	3.0%	2.3%
Gross rent as a percentage of household income in the past 12 months is 30% or more	31.6%	40.9%	50.6%

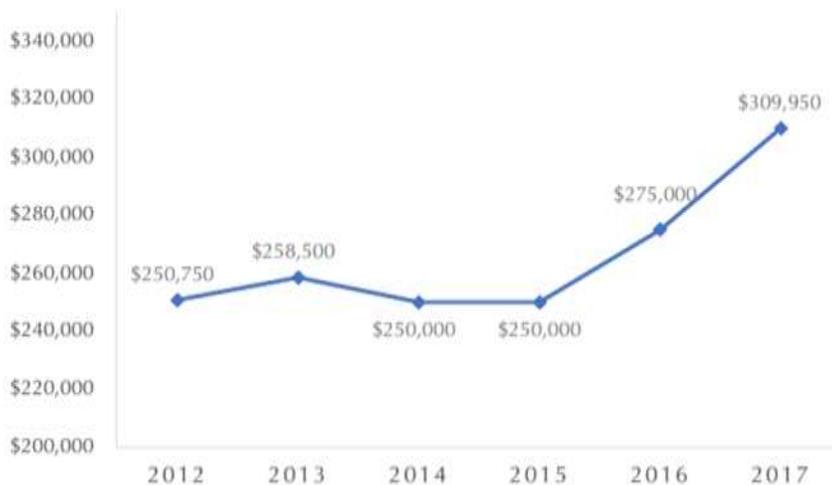
Housing

There are 5,042 housing units in Jefferson County, 84% of which are single family units. In Jefferson County, housing is more likely to be owner occupied than renter occupied compared to Montana as a whole. In 2017, there were 68 new single-family housing construction starts and 110 single family homes sold in the county.

Affordability

Almost one in three renters in Jefferson County experiences a housing cost burden, spending 30% or more of their household income on rent. However, they fair better here than in Montana or the United States as a whole, where 40% and 50% of renters, respectively, spend thirty percent or more of household income on rent.

Median housing price, Jefferson County, 2012-2017



The average cost of a two-bedroom rental unit in Jefferson County is \$889. The hourly wage needed to affordably rent this unit is \$17.37; however, the average hourly wage for renters in Jefferson County is \$13.16. In terms of home ownership, the cost of housing has steadily been rising. The median price for a single-family home sold in Jefferson County was over \$300,000 in 2017, a 23% increase from 2012.

Source: American Community Survey, Five Year Estimates, 2013-2017
Tri-County Housing Assessment, 2018

Disability

There are an estimated 1,627 individuals with disabilities in Jefferson County according to the American Community Survey conducted by the U.S. Census Bureau. The census bureau defines disability as a “long-lasting sensory, physical, mental, or emotional condition that makes it difficult for a person to perform activities such as walking, climbing stairs, dressing, bathing, learning, or remembering. It may impede a person from being able to go outside of the home alone or work at a job or business; the definition includes people with severe vision or hearing impairments.”

Disability status by age

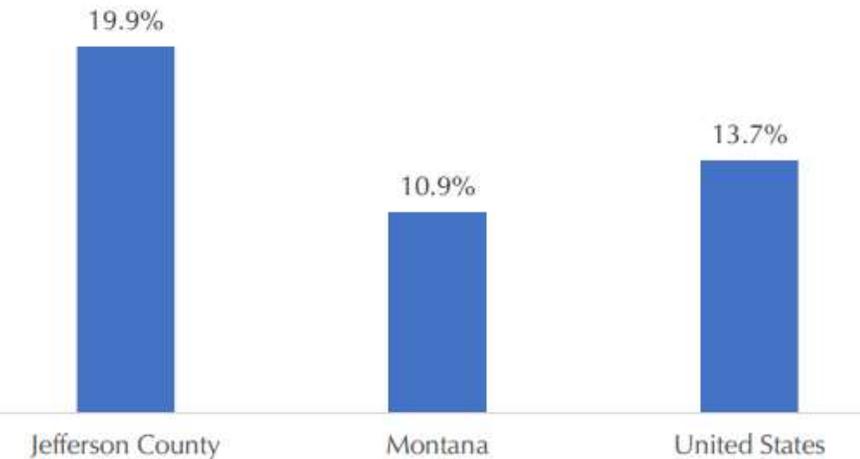
The rate of disability for Jefferson County youth is slightly over that of Montana youth; however, nearly 60% of

	Jefferson County	Montana	United States
Disability status	14.8%	13.6%	12.6%
Disability aged 5-17	5.3%	4.9%	5.4%
Disability 75 and over	59.8%	48.3%	49.7%

individuals 75 and over have a disability, higher than the same age group in Montana and the United States. The mostly reported disabilities were independent living difficulties (7.3%), ambulatory difficulties such as walking (6.9%) and hearing difficulties (5.2%).

Unemployment rates for individuals with disabilities

According to the U.S. Census Bureau, individuals in Jefferson County with disabilities were more likely to be unemployed



compared to Montana and the United States. About 20% of individuals with a disability were unemployed compared to approximately 11% in Montana and 13.7% in the U.S.

Source: https://www2.census.gov/programs-surveys/acs/methodology/design_and_methodology/acs_design_methodology_report_2014.pdf

American Community Survey, Five Year Estimates, 2013-2017

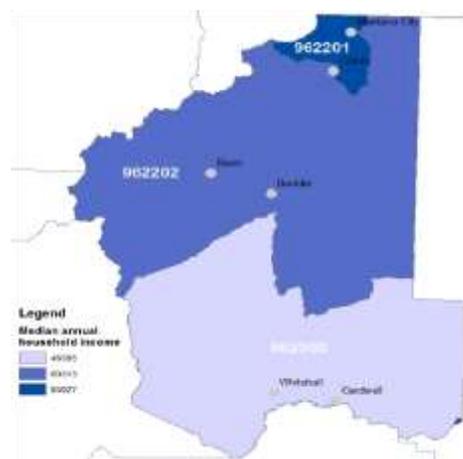
Geography

There are three primary census tracts in Jefferson County, each with approximately equivalent populations. The smallest and most densely populated census tract, number 962201, is the northern tip of the county. This tract represents one of the most affluent areas in Montana with a rate of poverty of only 2% and a median household income of \$95,927. By contrast, residents living in the southern less densely populated portion of the county are on average older, more likely to be uninsured and have a rate of poverty that is eight times that of residents in the northern census tract. These differences in socioeconomic status, geography and insurance status impact health. Though most of the health data in this report cannot be analyzed at the census tract level, some of the overall positive health trends seen in this report may be masking disparities experienced by subpopulation in our county.

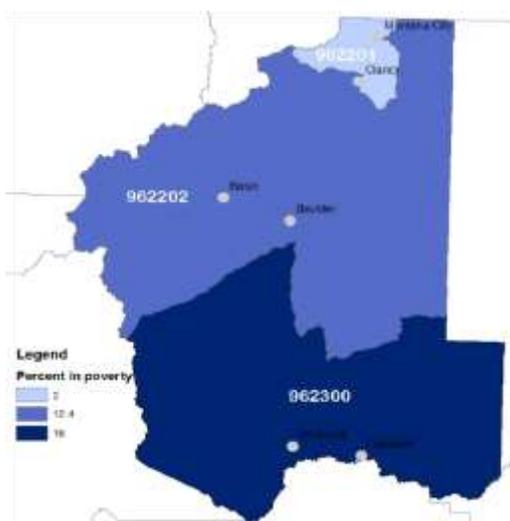
Median age-by census tract



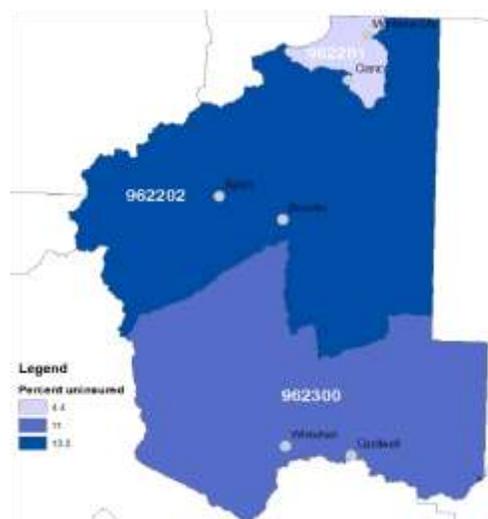
Median Income-by census tract



Poverty-by census tract



Uninsured rate-by census tract



Source: American Community Survey, Five Year Estimates, 2013-2017

Substance use and abuse

Youth alcohol use

More than half of Jefferson County high school students report having tried alcohol and one in four report having used alcohol in the last month. Their alcohol use experience is lower, however, than those surveyed in Montana and the U.S. as a whole.

	Jefferson County	Montana	United States
Lifetime alcohol use	59.4%	68.0%	60.4%
Current alcohol use	27.9%	33.1%	29.8%
Binge drinking in the last month	11.4%	17.6%	13.5%

Youth illicit substance use

In terms of illicit substances, more than one-quarter of high school students report having tried marijuana and almost one in ten have reported misusing prescription drugs. High school students in Jefferson County are less likely to report current marijuana use than their counterparts in Montana and the U.S. as a whole.

	Jefferson County	Montana	United States
Lifetime marijuana use	27.8%	35.2%	35.6%
Current marijuana use	12.1%	19.8%	19.8%
Lifetime misuse of prescription drugs	9.0%	13.7%	14.0%
Lifetime inhalant use	6.8%	6.4%	6.2%
Lifetime cocaine use	5.3%	4.4%	4.8%
Lifetime ecstasy use	5.3%	4.5%	4.0%
Synthetic marijuana use	4.5%	7.3%	6.9%
Lifetime heroin use	2.3%	1.7%	1.7%
Lifetime methamphetamine use	2.3%	2.2%	2.5%

Source: Youth Risk Behavior Survey, Centers for Disease Control and Prevention, 2017

Adult alcohol use

One in five adults in Jefferson County report excessive drinking (either binge drinking or drinking every day in the last month). Almost 30% of all driving deaths in the county involve alcohol compared to 45% in Montana as a

	Jefferson County	Montana
Excessive drinking	20%	21%
Driving deaths that are alcohol impaired	29%	45%
Adult driving under the influence offense rate (per 1000)	3.9	4.5

whole. Jefferson County driving under the influence (DUI) rate is slightly lower than that of the state as a whole.

Adult substance use

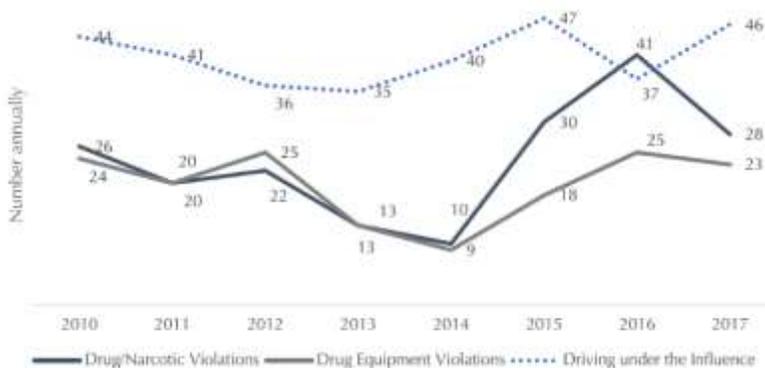
	Jefferson County	Montana
Drug use hospitalization rate (age adjusted rate per 100,000 population)	210.7	372.5
Opioid prescription rate per 100 population	12.8	61.1

The drug use hospitalization rate is just over half the rate of Montana, and the opioid prescription rate is less than a quarter of the Montana rate.

Substance use in the justice system

In 2017, there were 46 DUI violations, 23 drug equipment violation offenses and 28 drug/narcotic violation offenses in Jefferson County. Drug/narcotic and drug equipment violations spiked from 2014-2016, while DUI offenses have remained fairly steady over an 8 year period. The drug offense rate is approximately half the Montana rate at 4.3 per 1,000 people, and the drug arrest rate in the county is 3.3 arrests per 1,000 people compared to 5.4 per 1,000 statewide.

Drug and alcohol violations, Jefferson County, 2010-2017



Sources: Robert Wood Johnson County Health Rankings 2018

CDC Alcohol and Public Health: <https://www.cdc.gov/alcohol/index.htm>
 US Opioid Prescribing Rate Maps, Centers for Disease Control and Prevention, 2017
 Montana Vital Statistics, MT-IBIS
 Montana Incident Based Reporting System, Montana Board of Crime Control

Mental Health and Trauma

Youth mental health and trauma

	Jefferson County	Montana	United States
Symptoms of depression in the last year	41.5%	31.0%	31.5%
Seriously considered suicide in the last year	27.8%	20.8%	22.1%
Suicide attempts in the last year	20.3%	9.5%	9.3%
Carried a weapon in the past 30 days	33.3%	25.2%	15.7%
In a physical fight in the past year	24.2%	20.1%	23.6%
Physically forced to have sexual intercourse	9.2%	9.3%	9.7%
Experienced dating violence	5.3%	7.2%	8.0%
Experienced sexual dating violence	6.8%	6.5%	6.9%
Bullied on school property in the last year	23.7%	21.6%	19.0%
Electronically bullied in the last year	19.6%	17.6%	14.9%

Mental health is a serious concern among high school students in Jefferson County. One in four report bullying on school property in the last year and one in five report being electronically bullied, slightly more than youth surveyed in Montana and the U.S. as a whole. Youth in Jefferson County were also more likely to report symptoms of depression. They are also more than twice as likely to report attempting suicide in the last year.

Adult mental health, hospitalizations and access to care

	Jefferson County	Montana
Poor mental health days in the last month (adults)	3.1	3.5
Ratio of population to mental health providers	1490:1	360:1
Mental disorders hospitalization rate (per 100,000, age 12+)	116.7	241.3
Intentional self-harm ED visit rate (per 100,000, age 5+)	164.2	126.9

The overall emergency department visit rate for intentional self harm is elevated in Jefferson County relative to Montana as a whole. Unfortunately access to mental health care is also a challenge, given the rural nature of Jefferson County. There are fewer mental health providers per capita in Jefferson County than in other areas of the state.

Adults report slightly fewer “poor mental health days” than adults in Montana as a whole. Jefferson County residents also have a lower rate of being hospitalized for mental disorders, *approximately half* the state rate.

Source: Youth Risk Behavior Survey, Centers for Disease Control and Prevention, 2017
 Robert Wood Johnson County Health Rankings 2018
 Montana Hospital Discharge Data System, Montana IBIS, 2014-2016

Chronic Disease

Tobacco Use-Youth

	Jefferson County	Montana	United States
Current cigarette use	6.8%	12.1%	8.8%
Current smokeless tobacco use	9.0%	9.8%	5.5%
Lifetime e-vapor product use	35.6%	46.6%	42.2%

One-third of high schoolers report having used e-vapor products and one in five high school students (19.6%) report vaping in the last month. However, current cigarette use is low among Jefferson County youth.

Tobacco Use-Adults

	Jefferson County	Montana
Current smoking (adults)	15%	19%

Tobacco use by adults in our county is slightly less than in Montana as a whole. Vaping and smokeless tobacco use data was not available.

Lung Disease

	Jefferson County	Montana
Lifetime asthma (high school students)	22.3%	21.6%
Asthma-related emergency department visit rate (per 100,000)	161.0	253.4
COPD emergency department visit rate age 45+ (per 100,000)	243.8	669.9
COPD hospitalization rate age 45+ (per 100,000)	145.6	278.1

Almost one in four high school students has been diagnosed with asthma, slightly higher than the statewide percentage. However, asthma-related visits to the emergency department are lower for Jefferson County compared

to the state as a whole. Rates of emergency visits and hospitalization for chronic obstructive pulmonary disease (COPD) were much lower than the rates statewide as well.

Nutrition and physical activity-youth

On the whole, youth in Jefferson County exhibit better nutrition and physical activity behaviors than their counterparts in the U.S. For instance, they are more likely than high schoolers in Montana and the U.S. as a whole to consume fruit, meet recommended physical activity guidelines and limit screen time to less than three hours a day.

	Jefferson County	Montana	United States
Did not eat fruit in the past 7 days	3.8%	9.8%	5.6%
Drank pop every day in last 7 days	17.4%	15.1%	18.7%
Met recommended levels of physical activity	55.7%	53.4%	46.5%
Not physically active one day in the last week	10.7%	11.1%	15.4%
Watched TV three or more hours per day	12.4%	10.0%	20.7%
3 or more hours of video games or computer time per day	29.8%	34.6%	43.0%

Physical activity-adults

	Jefferson County	Montana
Driving alone to work	76%	76%
Long commute-drive alone	23%	16%
Access to exercise opportunities	57%	76%
Physically inactive	16%	20%

Given the rural nature of the county, it is no surprise that Jefferson County residents are more likely to have a long commute to work and that the majority drive alone to work. Almost half of all adults in our county lack access to exercise opportunities, compared to about one-quarter of Montanans as a whole.



Overweight and obesity

More than one in every four adults in Jefferson County is obese, slightly higher than the obesity rate in Montana as a whole.

	Jefferson County	Montana	United States
Self described overweight (high school students)	29.0%	30.5%	31.5%
Trying to lose weight (high school students)	34.1%	41.1%	47.1%
Obese (adults)	27%	25%	32%

Source: Youth Risk Behavior Survey, Centers for Disease Control and Prevention, 2017
Robert Wood Johnson County Health Rankings 2018

Cancer

The overall rate per 100,000 people for cancer in Jefferson County is similar to that in Montana and the U.S., though the melanoma rate from 2014-2016 was much elevated in our county and the prostate cancer rate was slightly lower.

	Jefferson County	Montana	United States
Overall cancer rate, all sites	454.1	441.6	444.0
Breast cancer rate, women	128.4	125.0	124.1
Melanoma cancer rate	54.4	26.3	21.0
Prostate cancer rate	91.1	109.6	103.0

Heart disease and diabetes

	Jefferson County	Montana
Diabetes hospitalization rate (per 100,000)	749.5	1058.9
Heart failure hospitalization rate, age 65+ (per 100,000)	621.1	857.4
Stroke hospitalization rate (per 100,000)	155.9	152.0
Acute myocardial infarction hospitalization rate (per 100,000)	77.7	118.1

Hospitalization rates for diabetes, heart failure, and heart attacks were lower in Jefferson County than in Montana as a whole, however the stroke hospitalization rate was slightly higher.

Environmental Health

Water Source/System	Nitrates (milligrams/liter)	Uranium (micrograms/liter)
Clancy-28 private or subdivision wells sampled over multiple months	47% wells at or over "elevated" level 18% wells at or over MCL	37% of wells at or over MCL
Boulder	Normal	Normal
Whitehall	Normal	Over MCL

Water quality has been an area of concern in Jefferson County. While many of the residents are on private or subdivision wells, Boulder and Whitehall have municipal systems. The Whitehall system has struggled with elevated uranium levels, while Boulder's has not. Well water supplying some Clancy households has also been affected with uranium and nitrates at either "elevated" levels or levels above maximum contamination level (MCL) as determined by the Environmental Protection Agency (EPA).

Montana Tumor Registry, 2014-2016, MT-IBIS

Montana Hospital Discharge Data System, 2012-2014

Jefferson County Environmental Health Office, 2018-2019 records

Communicable Disease

Sexual risk behavior-Youth

In general, high school students in Jefferson County are *less likely* than other students in Montana to engage in sexual *risk behavior*, including any sexual activity, current sexual activity and not using a condom at last intercourse.

	Jefferson County	Montana	United States
Ever had sexual intercourse	36.7%	43.2%	39.5%
Currently sexually active-last three months	21.8%	31.6%	28.7%
Did not use a condom at last intercourse, among currently sexually active students	26.0%	55.4%	46.2%
Did not use any method to prevent pregnancy during last intercourse, among currently sexually active students	11.0%	8.7%	13.8%

Communicable disease incidence

Disease Reported to DPHHS	Jefferson County			Montana		
	2016	2017	2018	2016	2017	2018
Chlamydia	127	201	149	425	432	465
Chronic Hepatitis C	102	101	83	160	158	144
Influenza hospitalizations	25	92	74	80	93	78

Certain diseases that can be spread from person to person are tracked by Montana DPHHS and are mandatory to report to the county. Not all communicable diseases require reporting to the DPHHS. Of the reportable diseases, Jefferson County's rates for the most common ones are generally lower than the State rates. For example, Jefferson County's rate for chlamydia, a sexually transmitted infection, is less than half Montana's as a whole. Chronic hepatitis C is the next most common reportable disease in the county, at a rate of approximately 80-100 newly diagnosed cases per 100,000 per year. That's about sixty percent of the State's rate. Influenza hospitalizations rate in Jefferson County in 2017 and 2018 were nearly identical to that of the state as a whole.

Source: Youth Risk Behavior Survey, *Centers for Disease Control and Prevention, 2017*
 DPHHS Montana Infectious Disease Information System (MIDIS)

Maternal Child Health

Births

Annually, there are about 100 births in Jefferson County, for a birth rate that is lower than Montana as a whole.

	Jefferson County	Montana
Number of births, 2017	101	11,800
Birth rate per 1000	8.5	11.2

At-Risk births

	Jefferson County	Montana
Teen birth rate, per 1000	15.9	24.3
Preterm birth (born less than 37 weeks)	6.9%	9.0%
Low and very low birth weight	5.8%	7.6%
Births with mother not receiving care during the first trimester	19.8%	26.6%
Births with mother initiating care during the third trimester	4.3%	5.5%
Women whose Kotelchuck Index was < 80%	19.8%	36.7%

One in five mothers in Jefferson County is not receiving care during the first trimester of pregnancy and almost 7% of all births are preterm. In comparison however, Jefferson County fairs better than Montana as a whole in *all* of these maternal-child health indicators.

Source: Montana Vital Statistics-2014-2017, MT-IBIS

Injury

At-risk driving behavior-Youth

	Jefferson County	Montana	United States
Never or rarely wears a seat belt when driving in a car driven by someone else	9.1%	7.8%	5.9%
In a vehicle driven by someone who had been drinking alcohol in last month	15.2%	19.8%	16.5%
Drove while drinking alcohol during the past 30 days	1.5%	7.6%	5.5%
Text or email while driving in last month	33.8%	54.2%	39.2%
Talked on a cell phone while driving during the last 30 days	40.6%	56.6%	NA

Almost one in ten high school students in Jefferson County report never wearing a seatbelt, a higher percentage than both the U.S. and Montana as a whole, leaving room for improvement. However, fewer Jefferson County teens reported other risky driving behaviors including talking or texting while driving, drinking and driving, and riding with a driver who has been drinking.

Intentional and unintentional injury admissions

In terms of emergency department visits and hospitalizations for injury, rates in Jefferson County are lower than those in Montana, though slightly elevated for intentional self harm injuries in 2016 and 2017.

	Jefferson County	Montana
All injury hospital admission rate (per 100,000)	448.9	474.6
Unintentional injury hospital admission rate (per 100,000)	322.3	296.4
Unintentional motor vehicle traffic injury emergency department visit rate (per 100,000)	306.9	418.4
Intentional self harm injury emergency department visit rate (per 100,000)	184.6	150.9
Assault injury emergency department visit rate (per 100,000)	246.1	312.8

Source: Youth Risk Behavior Survey, Centers for Disease Control and Prevention, 2017
 Montana Emergency Department and Hospital Discharge Data System, 2016-2017, MT-IBIS

Emergency Medical Services

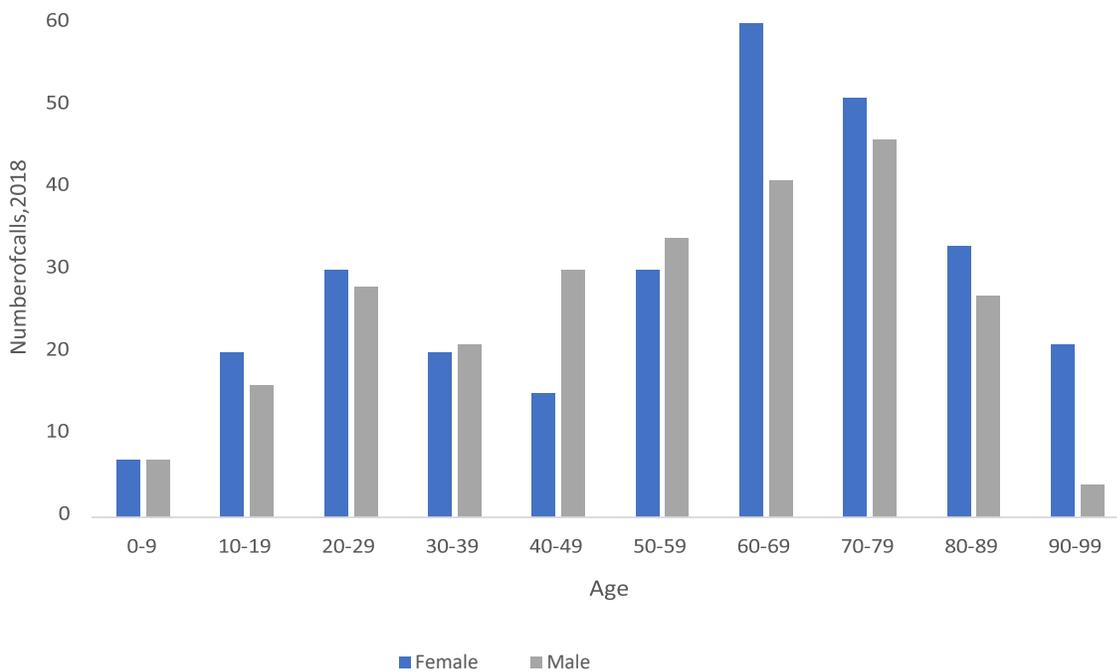
Jefferson County has a mix of emergency medical services. Eagle Ambulance of Montana City responds in the north half of Jefferson County and to the central region as needed. It is the only paid ambulance service in the county. Two volunteer ambulance services respond in the remainder of the county: Boulder Ambulance Services and Jefferson Valley EMS and Rescue in Whitehall.

Response Data are tracked in the DPHHS EMS & Trauma Reporting System online. Jefferson Valley and Eagle Ambulance began using this electronic system in 2018, Boulder Ambulance Service in 2019.

In 2018, there were 559 emergent 911 calls and responses recorded in DPHHS system for Jefferson County, not including the Boulder Ambulance Service which responded to 109 calls that year. Males and females were fairly equal in needing assistance, however the age groupings varied. More than half of all calls were for individuals aged 60 and over. Females between ages 60 and 79 years accounted for the most calls, followed by men in their 70's. The most common reasons for call were "acute pain due to trauma", "neurological-altered mental state" and "weakness".

Because the two volunteer ambulance services have only recently begun to use the online system, it is assumed that through increased usage and familiarity with the reporting system, future data will become more valuable. This data reveal training needs for responders and opportunities for prevention-related public education.

Age and gender of emergent calls, Jefferson County, 2018



Source: DPHHS EMS and Trauma Systems, 2018

Challenges of Volunteer Ambulance Services

Volunteer emergency medical services have obvious financial advantages in providing rural areas with much needed medical service, but come with challenges of adequate funding and volunteer numbers. Currently the Jefferson Valley EMS has 20 active responders and another 40 reserves, with 6 ambulances. Boulder’s volunteer service, however, has 5 active responders and another 5 reserve volunteers and 2 ambulances *for roughly the same population*. Boulder Ambulance Service sometimes must rely on other first responders such as law enforcement or volunteer firefighters to act as drivers in order to respond to calls. From the EMT trainings held in Boulder, few trainees have finished the trainings. This shortage of volunteers is a trend being seen nationwide while numbers dwindle and the average age of responder creeps upwards. The questions are how can communities attract trained volunteers to replace those who will retire in upcoming years, and how will communities cope with the potential of no ambulance service if others don’t step up to serve their fellow community members.

	Number of Active responders	Number of reserve responders*	Number of active responders with advanced training (a EMT or higher)	Number of Ambulance Vehicles
Boulder	5	5	5	2
Whitehall	20	40	13	6

*reserve responders are sometimes available and may be in training

“ Boulder Ambulance Service sometimes must rely on...law enforcement or volunteer firefighters [to drive ambulance] in order to respond to calls.”



Source: Boulder Volunteer Ambulance & Jefferson Valley EMS and Rescue

Access to Health Care

Provider access

Ratio of population to type of provider	Jefferson County	Montana
Population per primary care physician	1320:1	1350:1
Population per dentist	1980:1	1420:1
Population per mental health provider	1490:1	360:1

Access to health care was consistently identified as a key concern in the community stakeholder survey. Population to provider ratios for mental health professionals and dentists indicate that these concerns are valid. Residents of Jefferson County have much less access to dentists and mental health professionals than the population of Montana as a whole and there is only one primary care physician for every 1320 Jefferson County residents.

Insurance Coverage

	Jefferson County	Montana	United States
Uninsured	9.5%	11.7%	10.5%
Uninsured (under 19)	8.7%	7.6%	5.7%
Uninsured (among unemployed)	37.2%	40.2%	33.9%
Medicaid	10.7%	16.7%	19.6%
Medicare	21.2%	16.6%	19.0%
Veteran's Administration	7.1%	3.9%	2.2%
Tricare/Military Health	1.0%	1.2%	1.0%
Direct purchase	14.1%	8.9%	6.2%
Employment based	41.1%	41.2%	46.2%

Ten percent of county residents have no insurance, according to the American Community Survey, and more than one-third of the uninsured are not employed. Of the Jefferson County residents with insurance, a smaller percentage are enrolled in Medicaid and a higher percentage have VA, Medicare, or privately-purchased insurance compared to the Montana or U.S.

Source: Robert Wood Johnson County Health Rankings 2018
 American Community Survey, Five Year Estimates, 2013-2017

Overall Health and Life Statistics

Overall health

	Jefferson County	Montana
Poor physical health days per month	3.0	3.6
Self rated fair or poor health	11%	14%
Years of potential life lost (before age 75 per 100,000)	5700	7500

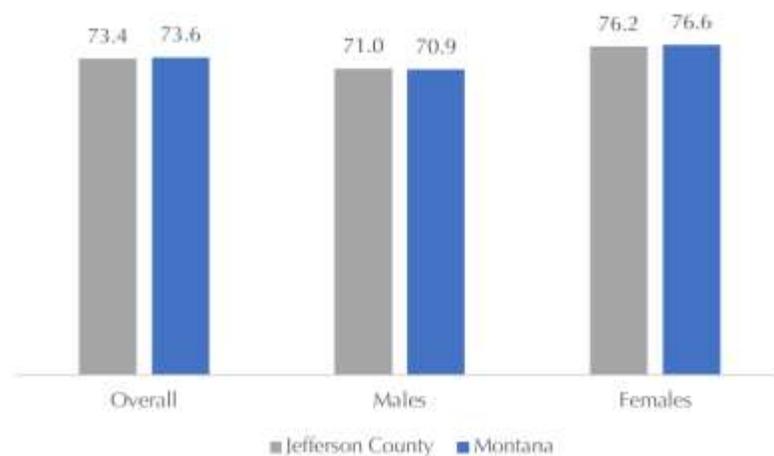
On average, adults in Jefferson County report three days of poor physical health per month. One in ten adults rate their health as fair or poor, slightly lower than Montana as a whole.

Leading causes of death

	Jefferson County	Montana
Overall age-adjusted death rate (per 100,000)	744.0	756.8
Circulatory, heart disease	166.4	154.4
Neoplasm, malignant (cancer)	149.9	153.8
Injury, unintentional injuries	64.1	53.1
Respiratory, chronic lower respiratory disease	39.9	51.9

In 2017, there were 102 deaths in Jefferson County. Heart disease is the leading cause of death, followed by cancer and injury. The age-adjusted death rates in Jefferson County are similar to those in Montana as a whole.

Average lifespan, 2015-2017



Jefferson County women and men live about the same length of time as Montanans as a whole. Women on average live about five years longer than men.

Source: Robert Wood Johnson County Health Rankings 2018
Montana Vital Statistics

MT-IBIS (2017 for Leading Causes of Death, 2015-2017 for average age of death)

Conclusions

There are many strengths in our county, but also several areas of health concern to improve upon. This report is an attempt to quantify, using available public health data, some of the needs that our community currently faces. Based on feedback from community stakeholders and the qualitative data analyzed for this report, the following health issues were identified as concerns in Jefferson County:

- Access to health care services, especially mental health care
- Mental health concerns in youth and adult populations
- Adequate emergency medical care, specifically adequate numbers of trained individuals and adequate equipment
- *Additional concerns to consider:* transportation, youth seatbelt use, and access to exercise opportunities

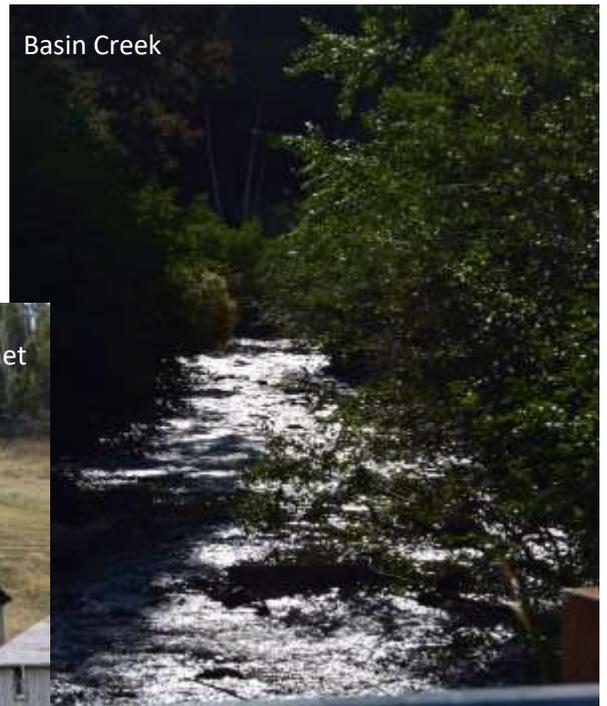
As representatives of multiple agencies and organizations in Jefferson County, we are committed to building and maintaining strong partnerships to promote our county strengths, reduce negative health factors and strive to improve the quality of our residents' lives. The next phase of looking at the health of Jefferson County will be to develop a County Health Improvement Plan (CHIP) which is planned for the upcoming year (Fall 2019 through Spring 2020).

If you would like to join this effort or have input, please contact Karen Wandel, RN at 225-4009 or

kwandel@jeffersoncounty-mt.gov.



Elk south of Montana City



Basin Creek



High Ore/Comet

Thank you for reading the 2019 Jefferson County Community Health Assessment Report. *We would appreciate your feedback!*

Please print and return this page to Clancy, Whitehall or Boulder public health offices.

Do you agree with the findings of this assessment?

Did anything surprise you?

What are your concerns regarding services you or a household member need or want improved?

If you could pick anything to work on to make Jefferson County (or your community) a better place to live, what would it be (express more than one if possible)?

- Of those you mentioned above, *put numbers by them* to rank them (1=most important, 2= next most important, etc.).
- *If there is an urgent need, please put a "U" next to it.*

Which community do you call home? (please circle)

MT City Clancy Jefferson City Boulder Basin Whitehall Cardwell

What is your age group? (please circle)

18-24 25-44 45-64 65+

Thank you for your input and your interest in this topic!

Contact Karen Wandel, RN at 225-4009 or kwandel@jeffersoncounty-mt.gov for more information.