Inland Empire

Regional Community Health Needs Assessment

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Scientific Technologies Corporation

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Executive Summary

In January 2016, the Hospital Association of Southern California contracted with Scientific Technologies Corporation to complete a regional Community Health Needs Assessment (CHNA) for several of its member hospitals representing the greater Inland Empire including San Bernardino and Riverside Counties.

The assessment incorporates three distinct data methodologies that when interpreted together provide a deeply rich picture of the health landscape of these communities. The first assessment consists of a plethora of health indicators (hospitalizations, social determinants of health, maternal and child health, mortality and morbidity) gathered from multiple primary and secondary sources. This quantitative data illustrates the current snapshot of health statistics in the communities that the member hospitals serve and also how they compare across geographical boundaries. The quantitative data was stratified by common public health groupings and service areas allowing a targeted identification of unique challenges and opportunities. It identifies priority issues related to community health and quality of life by analyzing health status, quality of life and risk factors in the community. In addition to statistics, a community health quality of life survey was administered to get community feedback regarding the strengths and areas of opportunity that assist in the community.

In addition to quantitative data, qualitative data was also garnered through the use of community member, health expert and key stakeholder focus groups. These 8 focus groups were conducted in both English and Spanish to reveal thoughts, perceptions and to augment the quantitative data collected in the assessment process. The focus groups allowed a deep understanding of the issues respondents believe are important.

The following report provides a detailed review of health in the Inland Empire and it is clear to see some similarities and variability across counties and hospital service areas. There are quite a few health indicators that stand out as desirable and others indicating an opportunity for additional study and outreach. A brief synopsis of some of those is below:

Hospitalizations

- Women have a significantly higher proportion of hospitalizations due to asthma compared to men at all hospitals.
- Approximately 40% of hospitalizations due to breast cancer are among Hispanic women at San Antonio Regional Hospital and Parkview Community Hospital Medical Center.

Social Determinants of Health

- The proportion of adults 25 years and older whose highest level of education was highschool graduate/GED or lower, was significantly higher in San Bernardino and Riverside Counties compared to the proportion in the United States and in the State of California.
- In 2014, approximately one in five people lived in poverty in San Bernardino County.
- In the 2014-2015 academic school year, the proportion of eligible students for free and reduced meals was 19% higher in San Bernardino County compared to California and 9% higher in Riverside County compared to California.

Maternal and Child Health

- Low birth weight in San Bernardino County was 12% higher compared to Riverside County and 7.4% higher compared to California.
- Riverside County has a significantly higher proportion of pregnant women receiving adequate prenatal care during their pregnancy compared to California.

Mortality

- The rate for all-cause mortality was significantly higher in San Bernardino County (750.8/100,000) compared to Riverside County (669.5/100,000) and California (641.1/100,000). Likewise, the all-cause mortality rate was significantly higher for Riverside County compared to California.
- The all-cause mortality rate for San Bernardino County was 12% higher than Riverside County and 17% higher than California. Riverside's all-cause mortality rate was 4.4% higher than California.

Introduction

The Inland Empire teamed together to compile an extensive Community Health Needs Assessment (CHNA) for the Hospital Association of Southern California. Working as a cohesive group to gather and analyze data for various service areas was vital. A three-tiered data collection method was used and included the collection and analysis of health indicators, focus group sessions and a Quality of Life survey (QOL). Primary and secondary health indicator data was assessed, bringing areas of need to the forefront. Focus groups were held in eight different locations, bringing together several community leaders, hospitals executives, board representatives and members of the community. Allowing community members to come together to discuss points of concern, resources, positive changes that have been made and areas of improvement was extremely effective. Additionally, understanding the concerns of the individuals who live and work in the Inland Empire allowed for discussion and positive brain storming. Mass distribution of a QOL survey was disseminated across the Inland Empire. In addition to identifying respondent's views on various community issues and health behaviors, the survey serves as an instrument to prioritize next steps.

Methodology

The CHNA assessment was completed using a three- tiered data collection approach, primary and secondary source data collection, quality of life survey and focus groups.

Health indicators (hospitalizations, social determinants of health, discharges, maternal and child health, mortality and morbidity) were gathered from multiple primary and secondary public data sources. Data was abstracted and transferred into an excel spreadsheet and cleaned. Algorithms and formulas were created in spreadsheets to check data for accuracy. Once data was cleaned, it was transferred to a Stata database using Stat Transfer 10 and was then analyzed. Data elements were stratified by gender, age groups, race/ethnicity and location. Percentages and rates were calculated and analyzed for statistical significance. Confidence intervals were used to show the differences in the outcomes for specific indicators displayed in bar graphs and in tables. Confidence intervals are ranges of numbers used to assess the accuracy of a point estimate and measure the variability in the data. The point estimate may be a rate, such as a death rate or incidence of a disease, or a frequency, such as the percent of pregnancies with low birth weight. The confidence intervals account for the uncertainty that arises from the natural variation inherent in the world around us. Confidence intervals also account for the difference between a sample from a population and the population itself. For the analysis of this report, confidence intervals were calculated at the 95 percent confidence level. This means that 95 times out of 100 the confidence interval captures the true value for the population. Sample size is inversely proportional to the precision of these estimates. Therefore, larger samples produce more precise estimates with smaller confidence intervals. You can then use confidence intervals to determine statistical significance at a glance. When the confidence intervals of two comparison groups do not overlap, you may conclude that the two sample estimates are truly different and not likely attributable to chance, thus there is a true difference (significant difference). confidence intervals overlap you may conclude that there is no difference between the estimates. When observed differences were observed between estimates using confidence intervals, additional significance testing between or within groups was conducted by using a chi-square or logistic regression test with a probability level (p-value) of 0.05 used as the criterion to determine the strength of the statistically significant differences in the results.

Data that contained an n-value of 10 or less observations under hospitalizations were not analyzed and were identified with an * in the table and graphs were not generated. Moreover, analysis with 10 or fewer data elements is deemed unreliable and is a threshold for confidentiality.

Analysis for mortality data was adjusted for age using 2000 population data, whereas crude rates were calculated for morbidity data.

Quantitative data regarding topics in this report were analyzed using Stata version 13 or Epi-Info version 7.

Nine service areas were identified for this report. They include: LLUMC, LLUMC-Murrieta, Parkview, San Antonio, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest, and Montclair. For the hospitalization segment and the Quality of Life Survey segment, data was analyzed by hospital service areas. Hospital service areas were identified by using primary and secondary service area zip codes from San Bernardino County and Riverside County for all service areas.

The QOL survey was designed to gain anonymous feedback from those who live and work in the Inland Empire. The survey was designed to be administered electronically through Survey Monkey and also to be completed as a paper document. The QOL survey was distributed in various forms including, email lists, paper copies, many of which were passed out at focus groups, links on social media pages and also given at health care facilities. Spanish versions were available for those whose first language was not English.

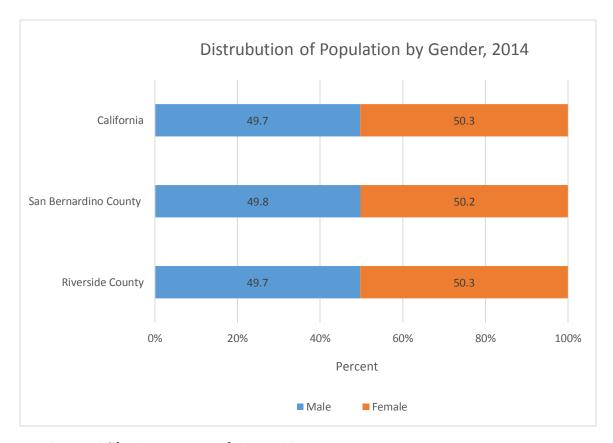
Demographic Information

The population in the State of California is 38,548,204. The population in San Bernardino County is 2,096,123 and is 5.4% of the total population in the State of California. The population in Riverside County is 2,294,333 and is six percent of the total population in the State of California. The populations are equally distributed among men and women in the State of California, San Bernardino County and Riverside County; each gender representing 50% of the population.

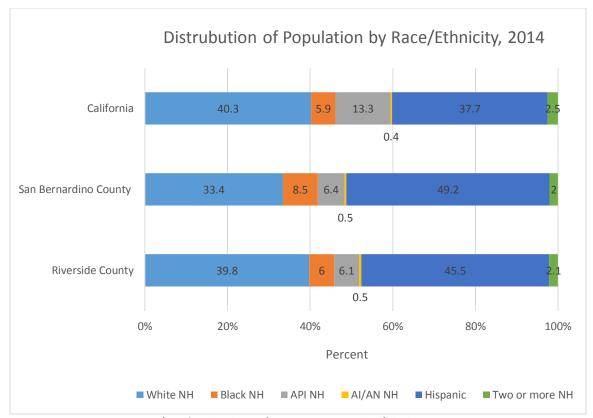
Population Estimates, 2014

Area	Population (n-value)	Percent of Total Population
California	38,548,204	100
San Bernardino County	2,096,123	5.4
Riverside County	2,294,333	6.0

Data Source: California Department of Finance, 2014

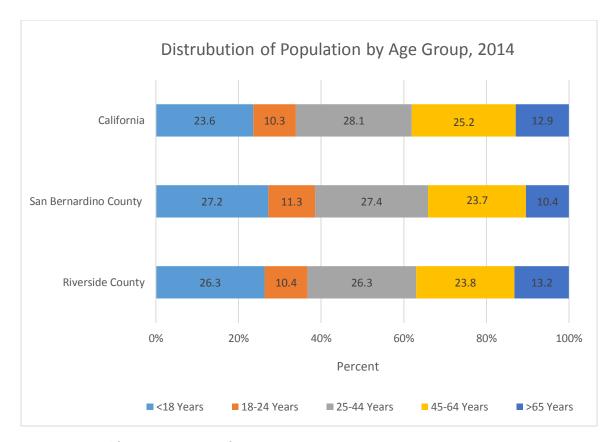


Data Source: California Department of Finance, 2014



NH=Non-Hispanic, API=Asia/Pacific Islander, AI/AN=American Indian/Alaska Native Data Source: California Department of Finance, 2014

Ethnic minorities are 60% of the total population in the State of California; this is similar to Riverside County. Ethnic minorities in San Bernardino County are 66.6% of the total population, which is significantly higher than both the State of California and Riverside County. In the State of California, whites represent 40% of the total population, which is similar for In San Bernardino County, whites represent a significantly smaller Riverside County. proportion of the total population than California and Riverside County; approximately onethird of the total population. Among blacks, the population is significantly higher in San Bernardino County which represents 8.5% of the total population, compared to the State of California and Riverside County which each shows approximately six percent of the total population. In the State of California, Asian/Pacific Islanders (API) represents 13.3% of the total population. This is significantly higher compared to San Bernardino and Riverside Counties, which is approximately, two-times less than the State of California. In the State of California, Hispanics are approximately 40% of the total population which is significantly lower than San Bernardino County and Riverside County. In San Bernardino County, Hispanics comprise approximately 50% of the total population and in Riverside County it is 45.5% of the total population. In California, San Bernardino County, and Riverside County American Indian/Alaska Natives (AI/AN) represent about 0.5% of the total population and among individuals who have been identified with two or more races, they represent about two percent of the total population. There was no difference in the proportion of AI/AN and those individuals identified as two or more races relative to the total population between the State of California, San Bernardino County and Riverside County.



Data Source: California Department of Finance, 2014

The population 24 years and younger represent one-third of the total population in the State of California. This is significantly lower compared to San Bernardino County and Riverside County; 38.5% and 36.7% respectively. Among children 18 years and younger, in the State of California they represent 23.6% of the total population which is significantly lower than San Bernardino County (27.2%) and Riverside County (26.3%). San Bernardino County has a significantly higher proportion of 18-24 year olds (11.3%) compared to the State of California (10.3%) and Riverside County (10.4%). Among 25-44 year olds, Riverside County has a significantly lower proportion (26.3%) compared to California (28.1%) and San Bernardino County (27.4%). Among 45-64 year olds, in the State of California they represent one-quarter of the total population which is significantly higher compared to San Bernardino County (23.7%) and Riverside County (23.8%). The State of California and Riverside County have a significantly higher population of seniors 65 years and older, approximately 13% of the total population. Seniors are approximately one-tenth of the total population in San Bernardino County.

Hospitalizations

Hospitalization discharge data for the year 2013 was analyzed to find trends and key findings at various hospitals in the Inland Empire. Comparing the numbers to the overall California total and also county level gave more insight to areas that have higher disease incidence. In this section there is data on 19 different hospitalization types:

- Overall Hospitalization
- All Cancers
- Asthma
- Brain Cancer
- Breast Cancer
- Cardiovascular Disease
- Cervical Cancer
- Colon Cancer
- Colorectal Cancer
- Chronic Obstructive Pulmonary Disease (COPD)
- Diabetes
- Kidney Disease
- Liver Cancer
- Lung Cancer
- Liver Cancer
- Lung Cancer
- Pancreatic Cancer
- Prostate Cancer
- Prostate Caner

Key Findings

- For total hospitalizations, females have a significantly higher proportion of hospitalizations than males at San Gorgonio and Redlands.
- Approximately one-in-three hospitalizations are Hispanics at Montclair and LLUMC;
 whereas 40% of hospitalizations are Hispanics in Redlands, San Antonio and Parkview.
- Approximately 50% of hospitalizations are among seniors 65 years and older at San Gorgonio.
- Women have a significantly higher proportion of hospitalizations due to cancer at all hospitals with the exception of San Bernardino Mountains Community Hospital and Ridgecrest.
- Approximately 30% of hospitalizations due to cancer are among Hispanics at Montclair, Parkview and LLUMC; whereas they are approximately 40% at Redlands and San Antonio.
- Women have a significantly higher proportion of hospitalizations due to asthma compared to men at all hospitals.

- Hispanics have a significantly higher proportion of hospitalizations due to asthma compared to any other racial/ethnic group at Redlands and San Antonio.
- Approximately 40% of hospitalizations due to breast cancer are among Hispanic women at San Antonio and Parkview.
- Hospitalizations due to cardiovascular disease are significantly higher among men compared to women at all hospitals with the exception of Ridgecrest.
- Approximately 30% of hospitalizations due to cardiovascular disease are among Hispanics at Redlands and San Antonio.
- Men have a significantly higher proportion of hospitalizations due to colon cancer compared to women at LLUMC, Parkview, Redlands, San Gorgonio, and Montclair.
- Women have a significantly higher proportion of hospitalizations due to COPD compared to men with the exception of Ridgecrest.
- Men have a significantly higher proportion of hospitalizations due to diabetes compared to women at all hospitals with the exception of Ridgecrest.
- Hispanics have a higher proportion of hospitalizations due to diabetes compared to any other racial/ethnic group at Redlands, San Antonio, Parkview, and LLUMC.

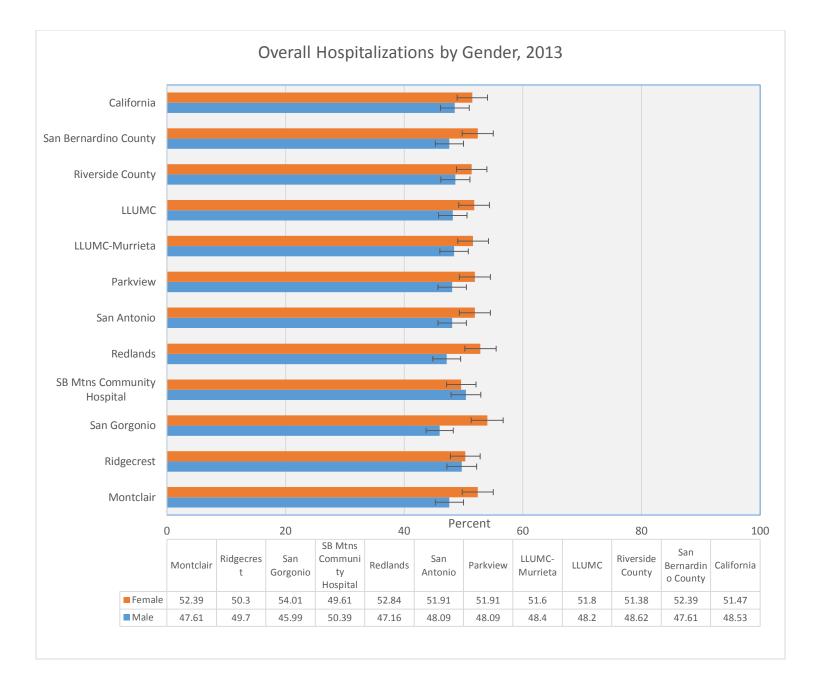
The data source used for Hospitalizations was the 2013 Patient Discharge Model Data Set from the California Office of Statewide Health Planning and Development.

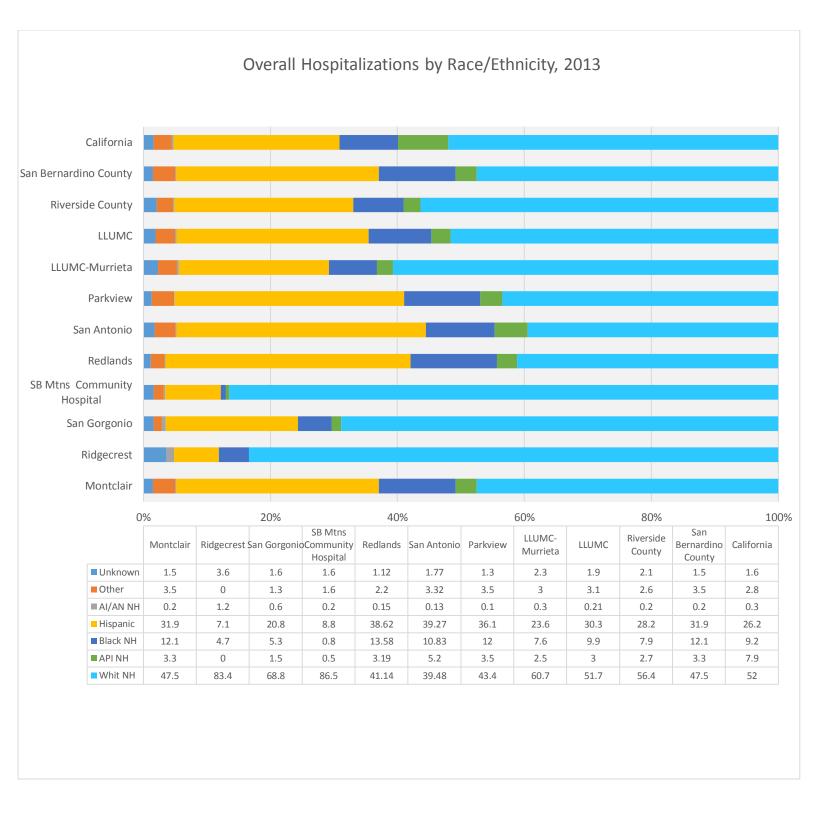
Overall Hospitalizations

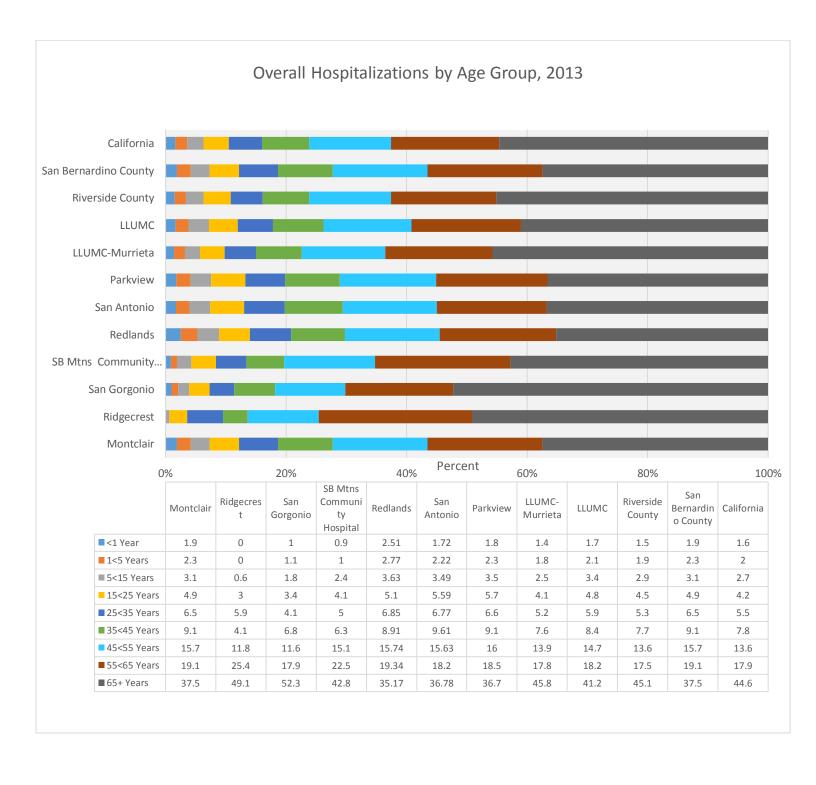
This section includes data for the overall hospitalizations in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	MC MC	LLU MC- Murr ieta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair
2,440,	140,	147,5	275,	152,4	55,42	58,7	39,39	2,048	25,53	169	140,7
708	788	13	887	01	9	66	3		4		88





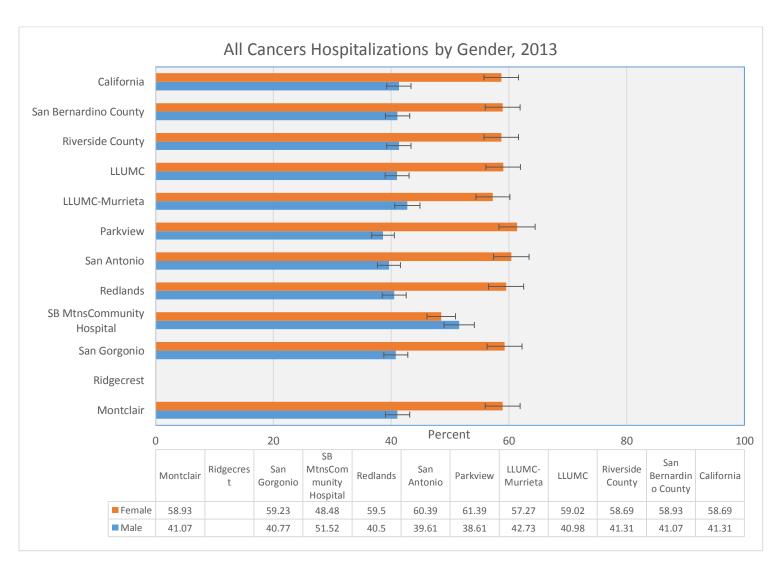


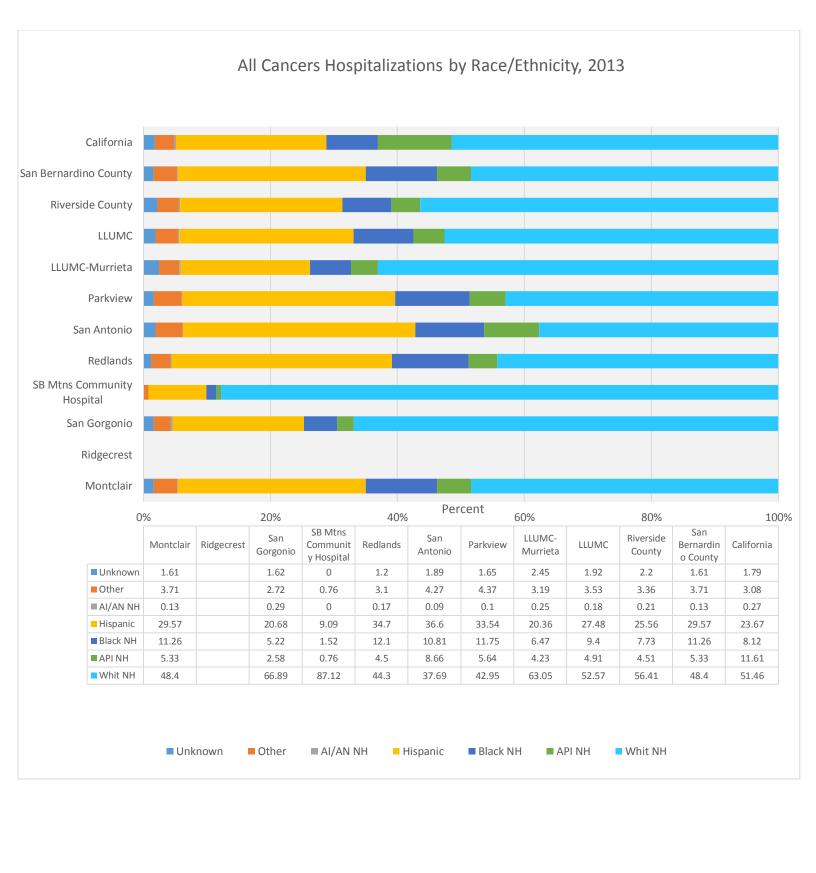
All Cancers

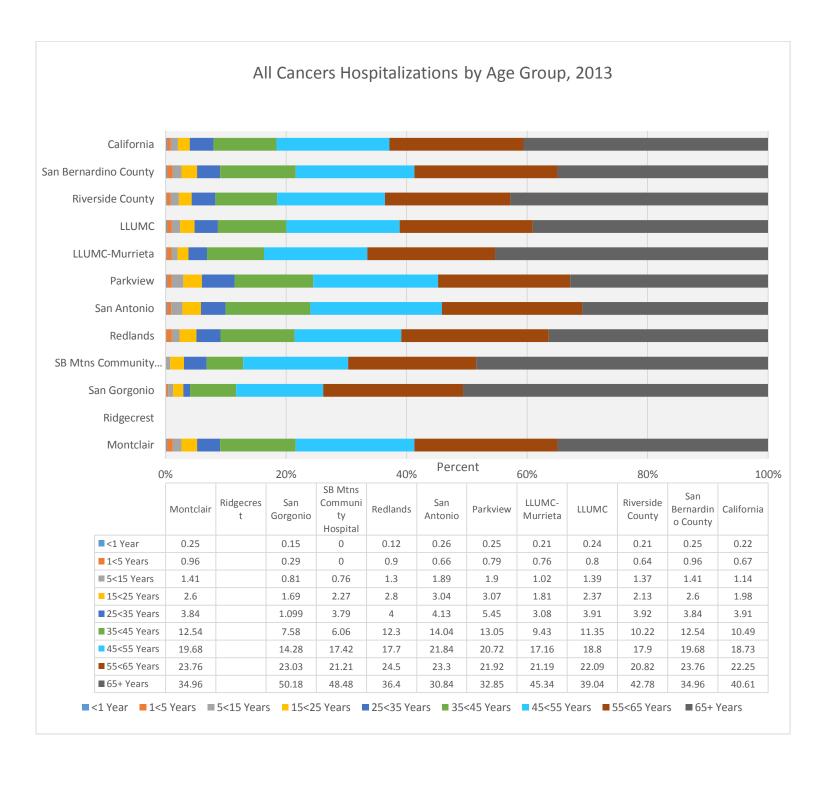
This section includes data for all cancers in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total all cancers hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity hospita	San Gorg onio	Ridgec rest	Mont clair		
142,3	7,52	8,443	15,4	8,518	3,157	3,48	2,415	132	1,359	*	7,529		
76	9		85			9							
Percent	Percent of Total Hospitalizations												
5.8	5.3	5.7	5.6	5.6	5.7	5.9	6.1	6.4	5.3	*	5.3		





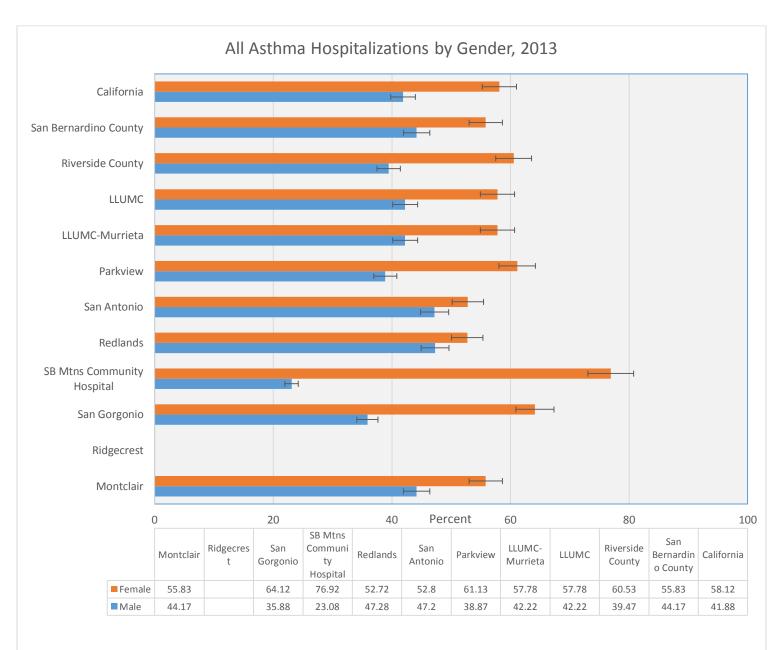


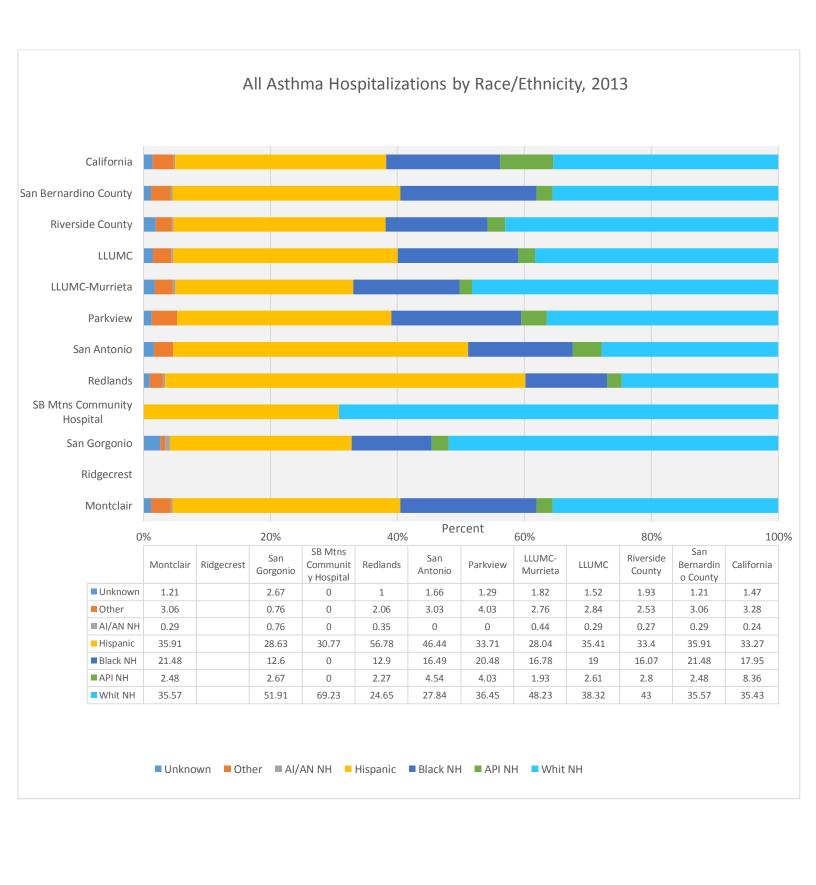
Asthma

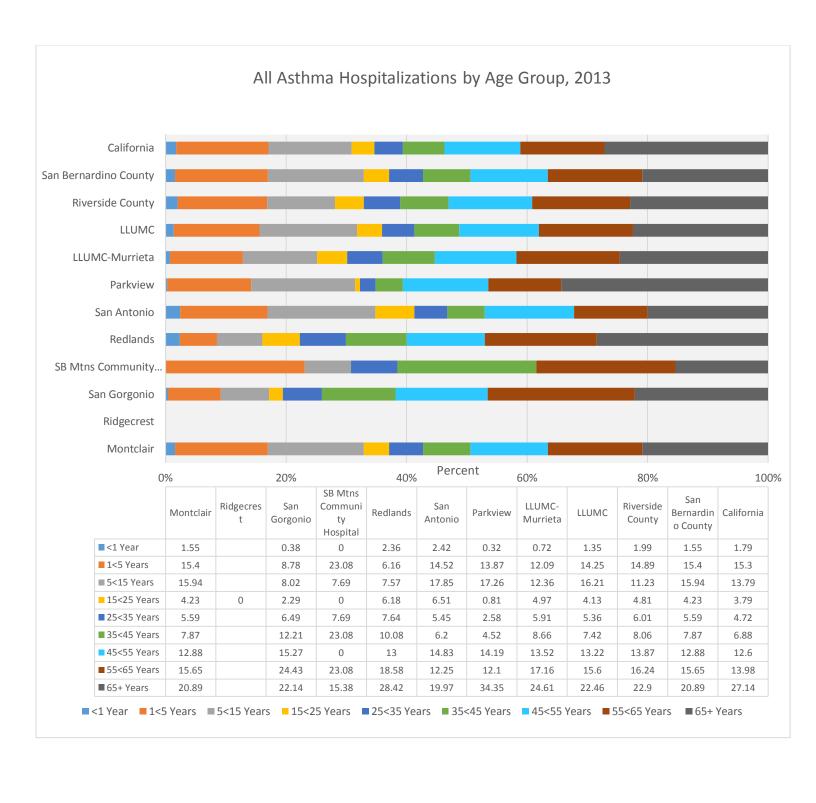
This section includes data for asthma in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total asthma hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair		
30,48 3	2,05 8	1,500	3,41 1	1,812	620	661	4,317	13	262	*	2,058		
Percent	Percent of Total Hospitalizations												
1.2	1.5	1.0	1.2	1.2	1.1	1.1	11.0	.06	1.0	*	1.5		





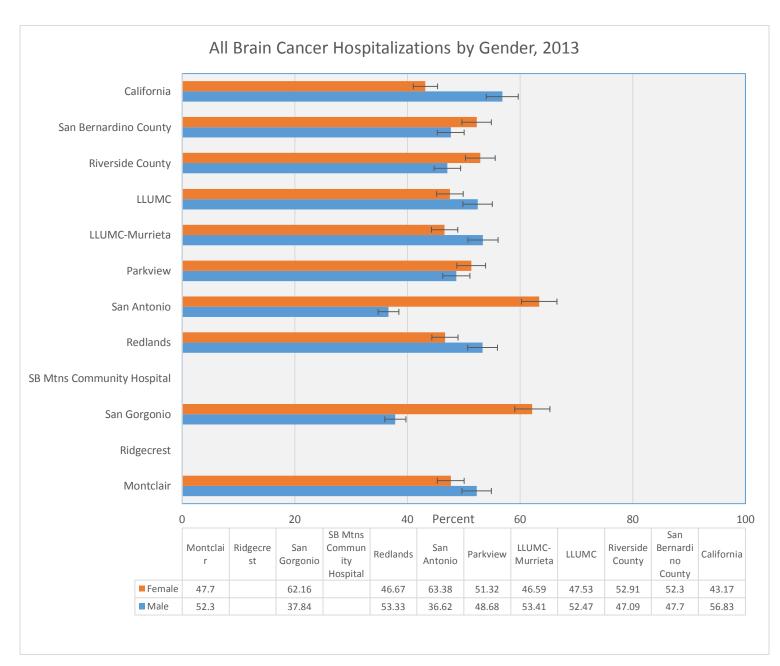


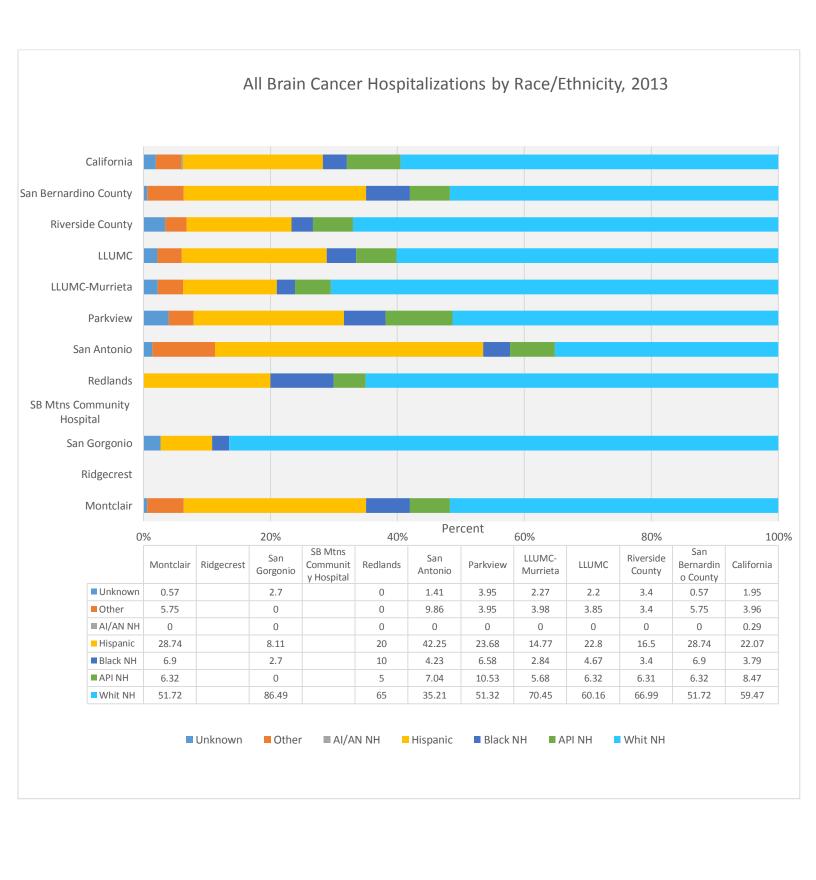
Brain Cancer

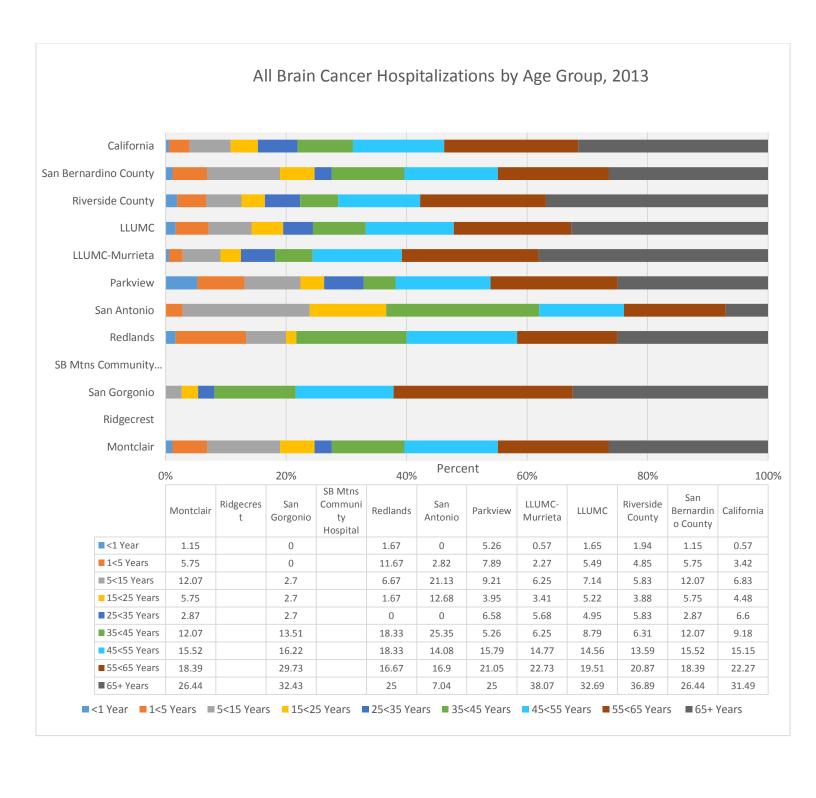
This section includes data for brain cancer in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total brain cancer hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	LLU MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair		
3,484	174	206	364	176	76	71	60	*	37	*	174		
Percent (Percent of Total Hospitalizations												
.14	.12	.14	.13	.12	.14	.12	.15	*	.14	*	.12		





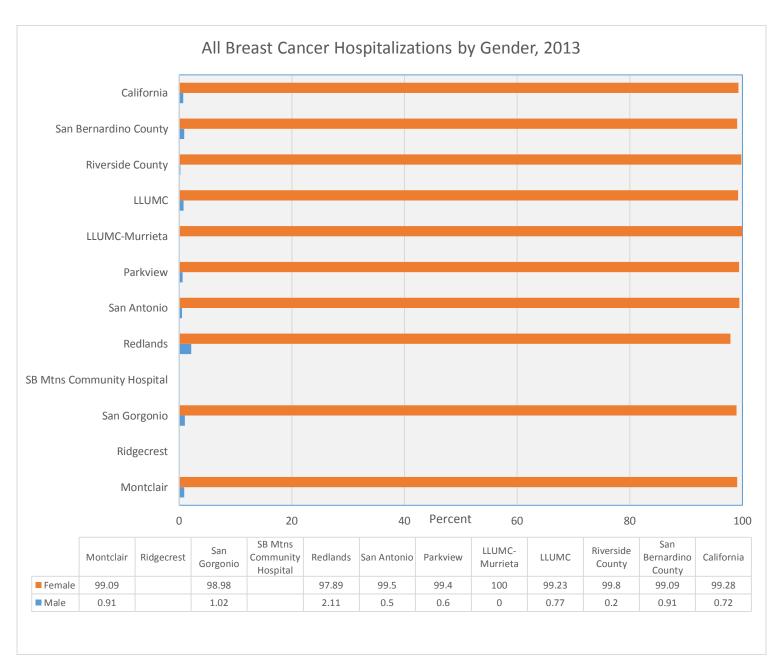


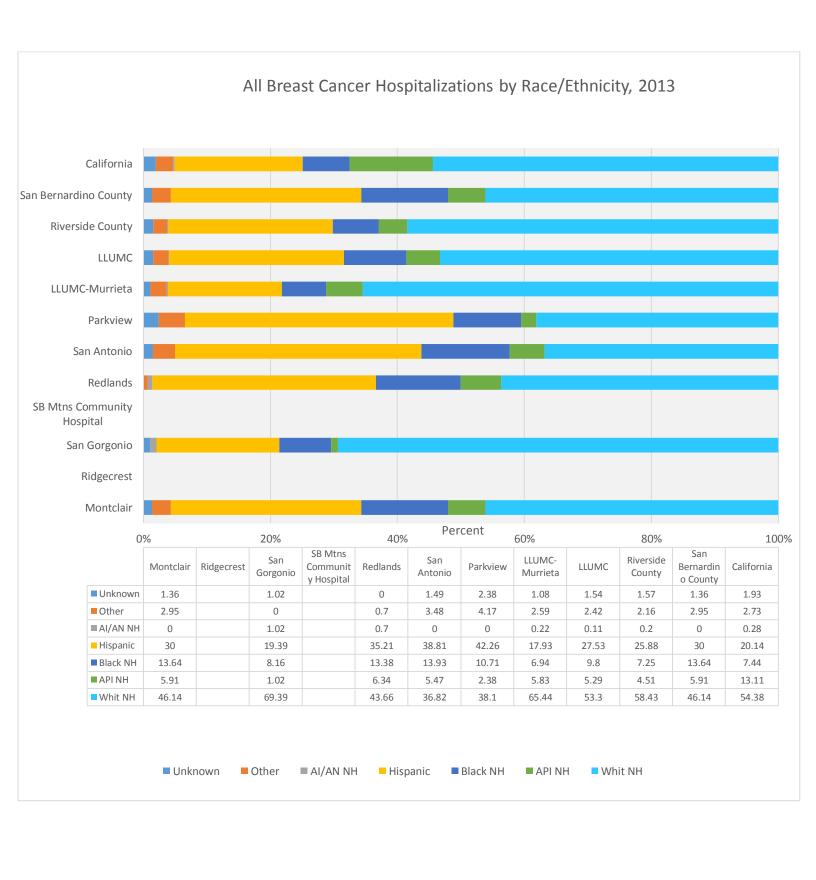
Breast Cancer

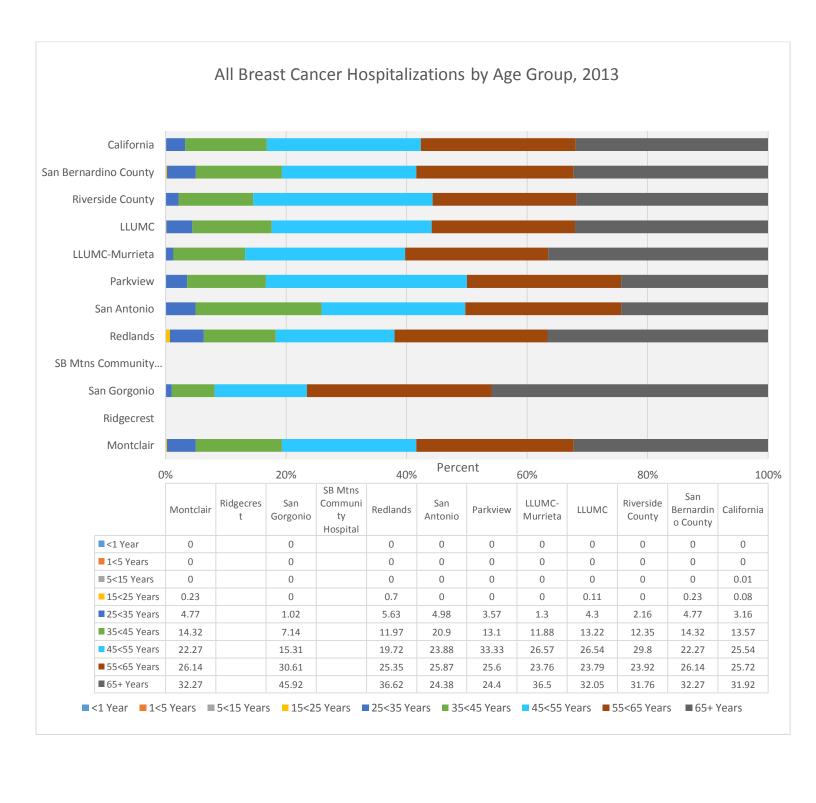
This section includes data for breast cancer in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total breast cancer hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	LLU MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair		
7,920	440	510	908	463	168	201	142	*	98	*	440		
Percent (Percent of Total Hospitalizations												
.32	.31	.35	.33	.30	.30	.34	.36	*	.38	*	.31		





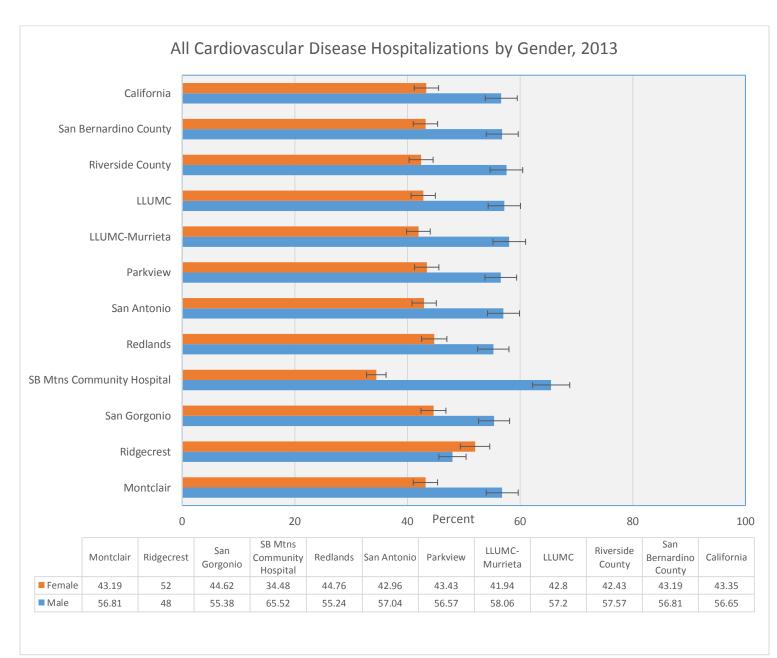


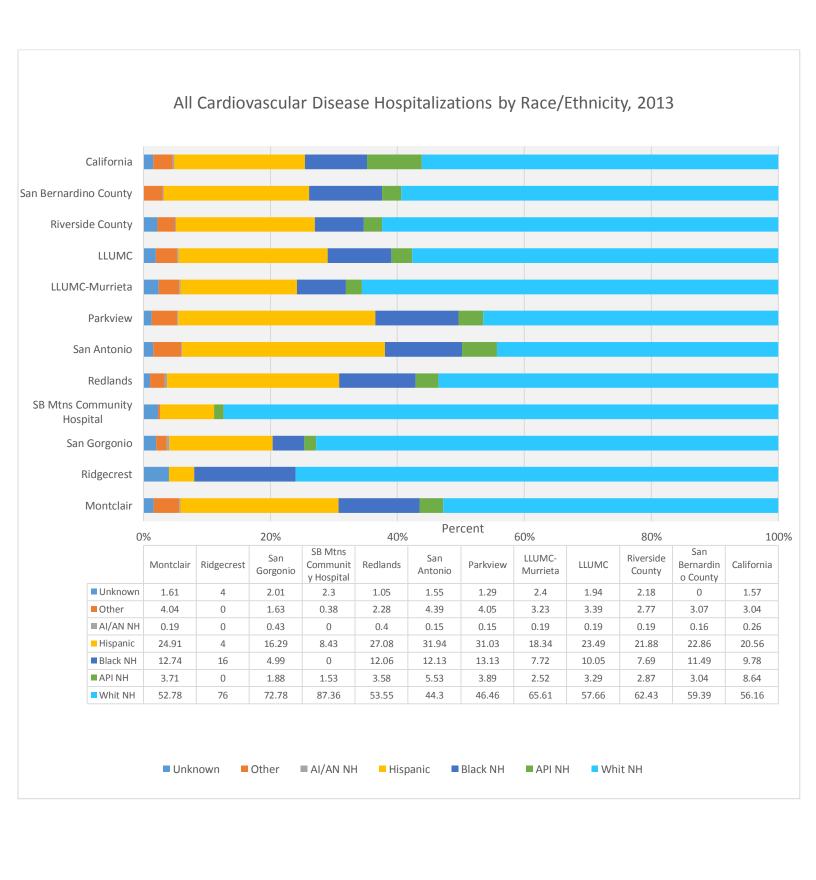
Cardiovascular Disease

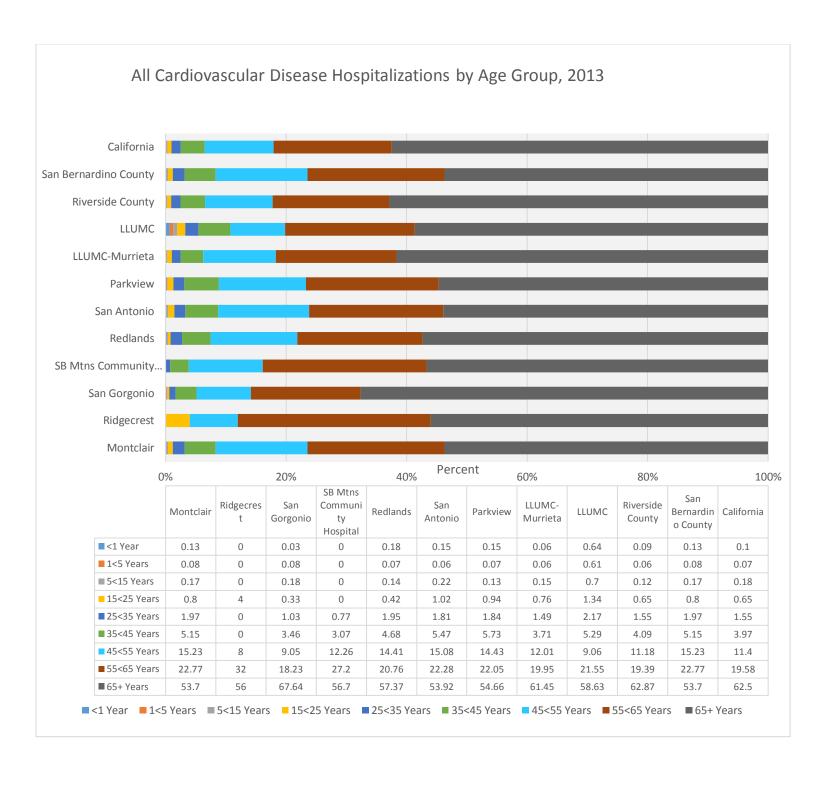
This section includes data for cardiovascular disease in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total cardiovascular disease hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair
274,4	16,7	18,34	33,8	19,14	6,145	6,69	5,529	261	3,989	25	16,72
35	29	4	44	9		3					9
Percent	of Total	Hospitaliz	ations								
11.2	11.9	12.4	12.3	12.6	11.1	11.4	14.0	12.7	15.6	14.8	11.9





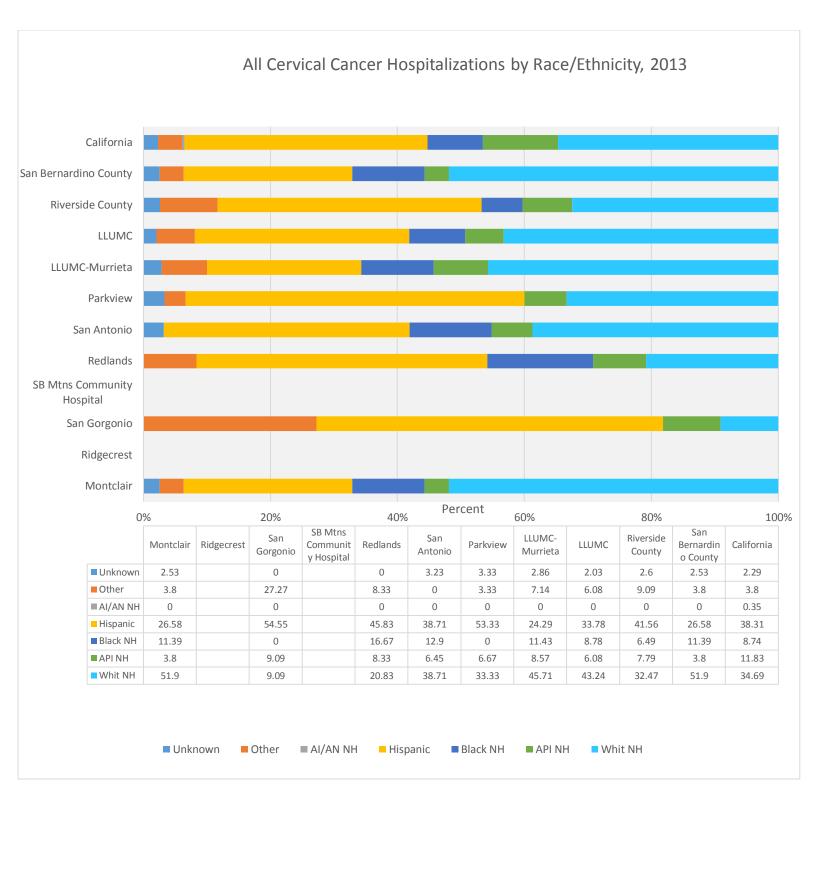


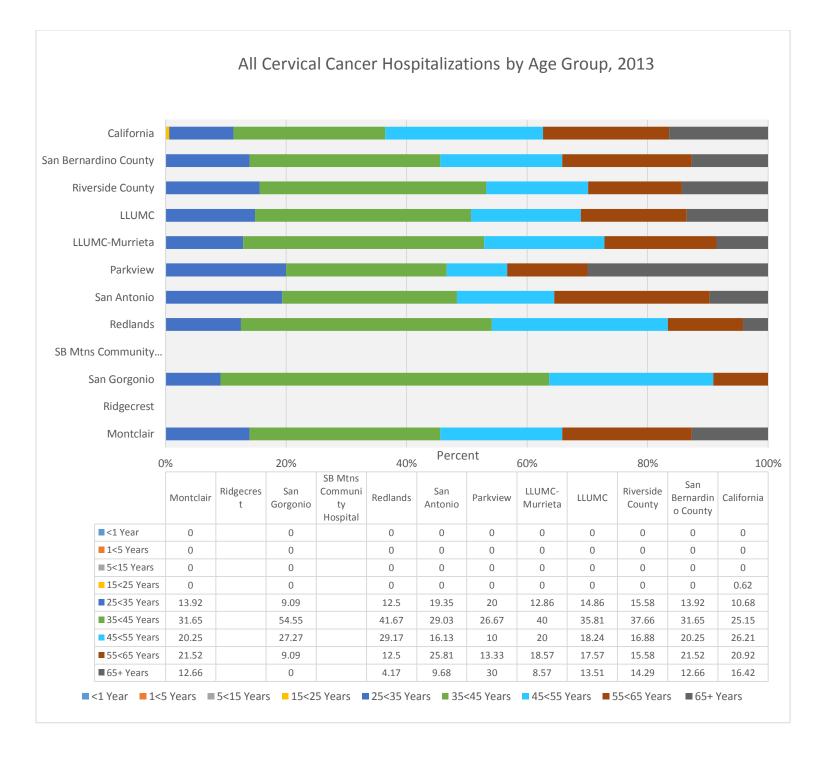
Cervical Cancer

This section includes data for cervical cancer in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total cervical cancer hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	LLU MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair		
1,133	79	77	148	70	30	31	24	*	11	*	79		
Percent	Percent of Total Hospitalizations												
.05	.06	.05	.05	.05	.05	.05	.06	*	.04	*	.06		



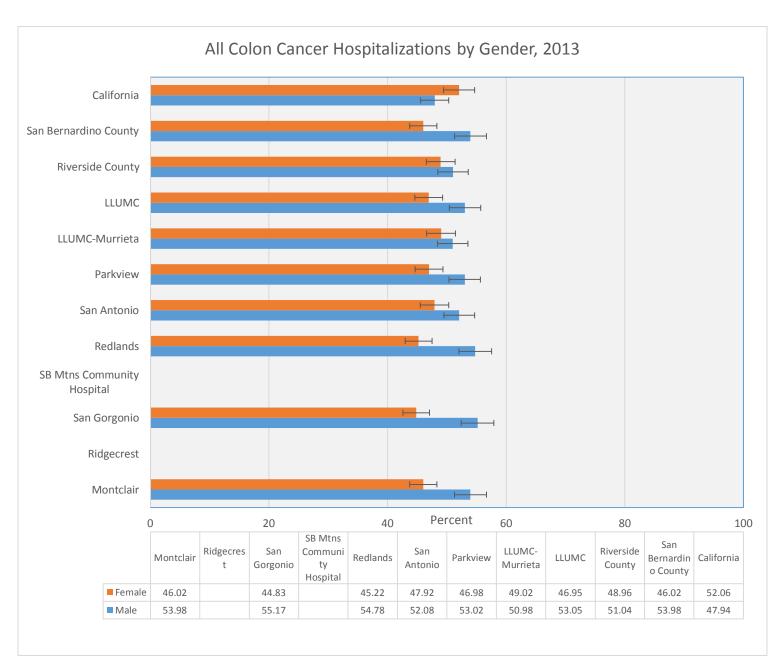


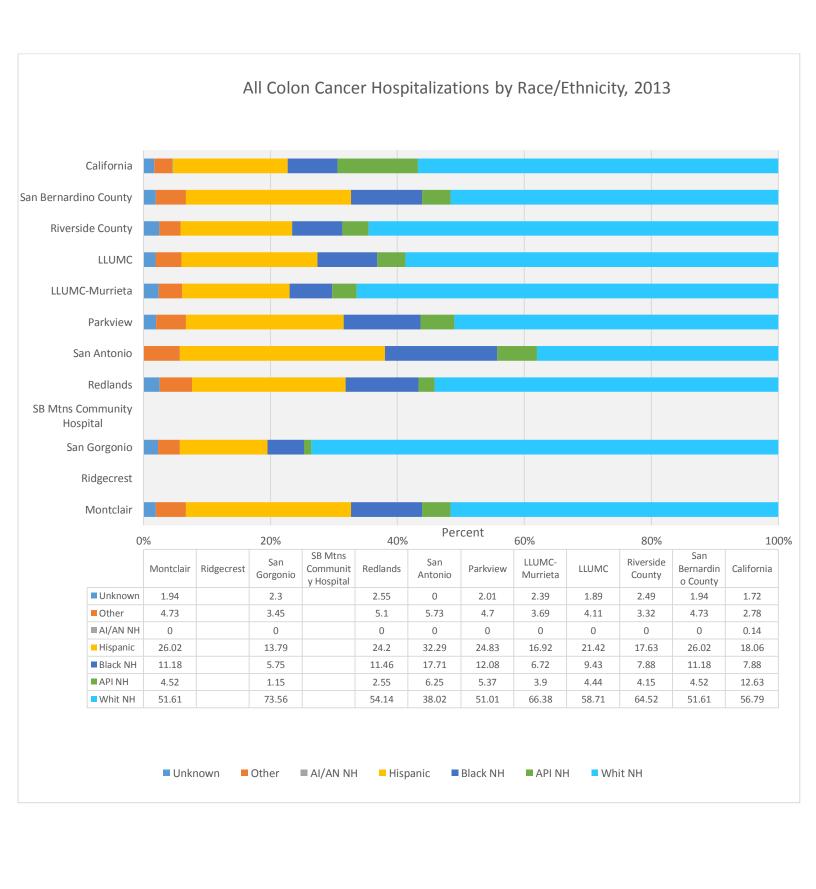
Colon Cancer

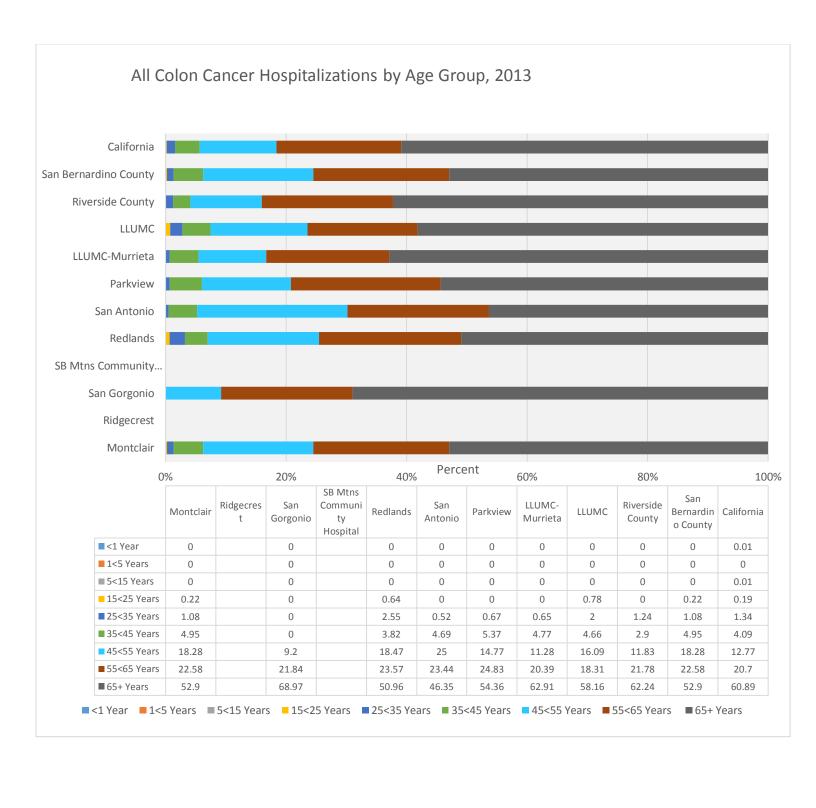
This section includes data for colon cancer in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total colon cancer hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair
8,561	465	482	901	461	149	192	157	*	87	*	465
Percent of Total Hospitalizations											
.35	.33	.33	.33	.30	.27	.33	.40	*	.34	*	.33





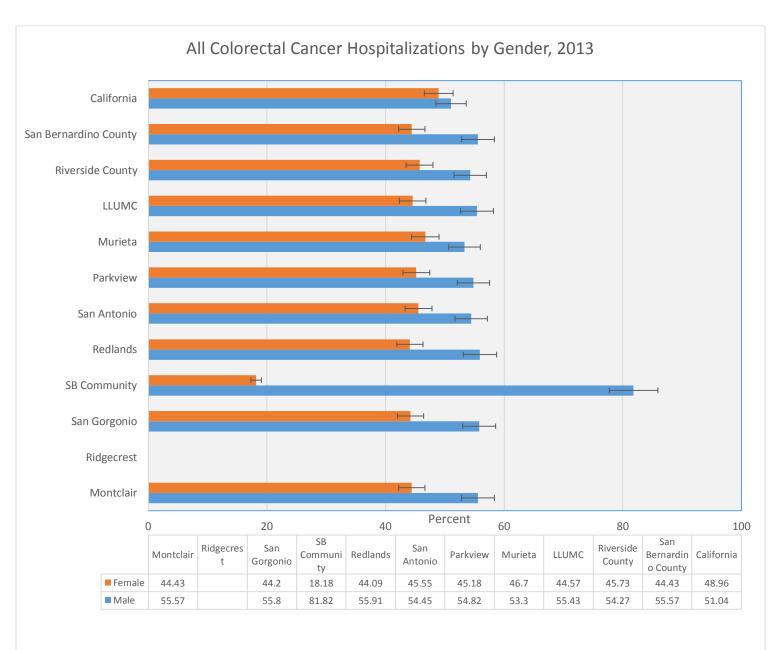


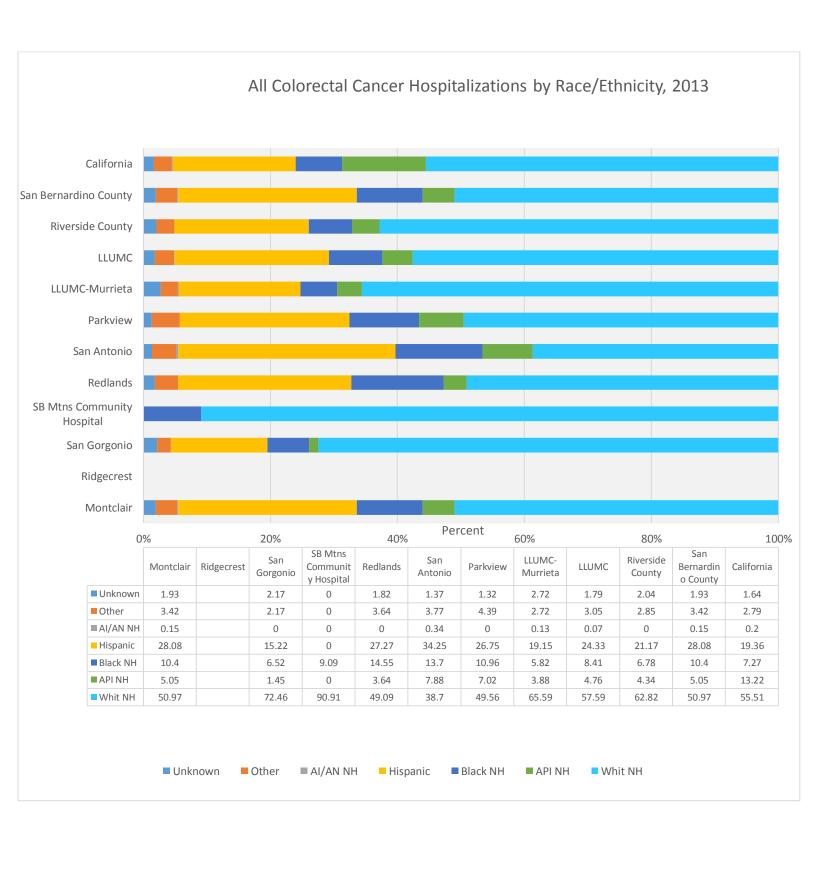
Colorectal Cancer

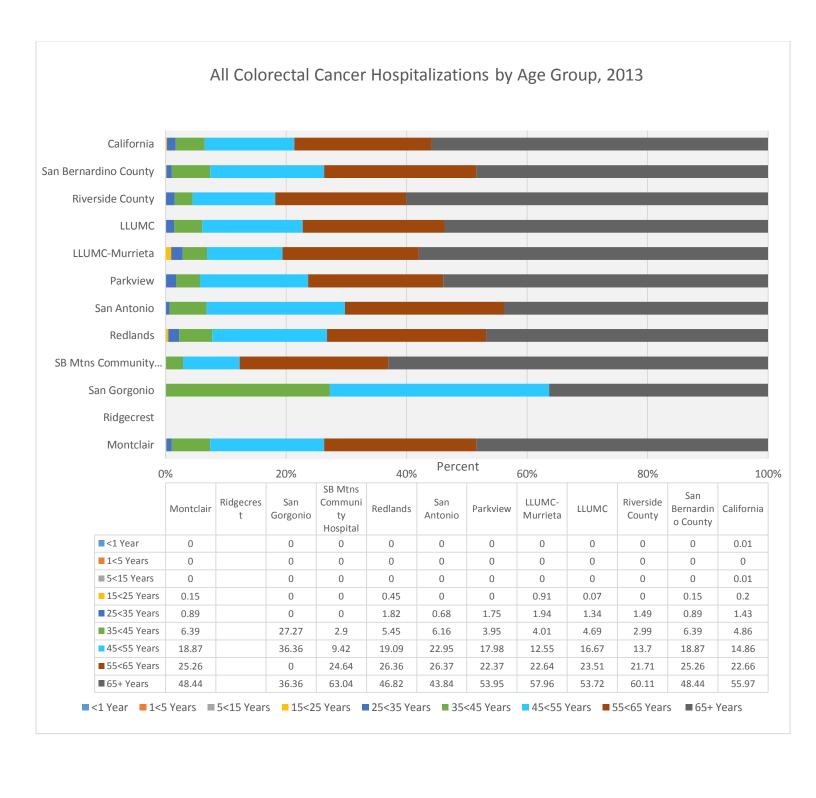
This section includes data for colorectal cancer in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total colorectal cancer hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	LLU MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair
12,22 2	673	737	1,34 4	773	228	292	220	11	138	*	673
Percent of Total Hospitalizations											
.50	.48	.50	.49	.51	.41	.50	.56	.56	.54	*	.48





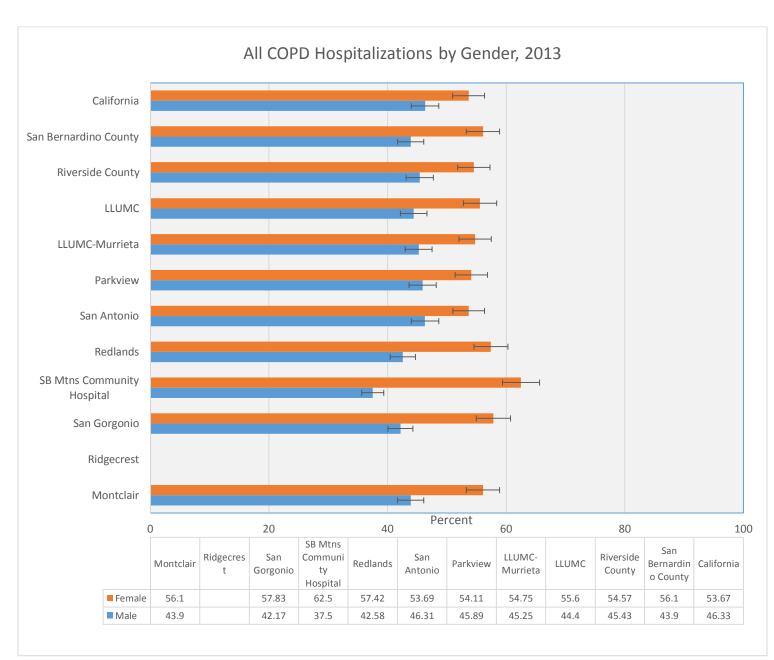


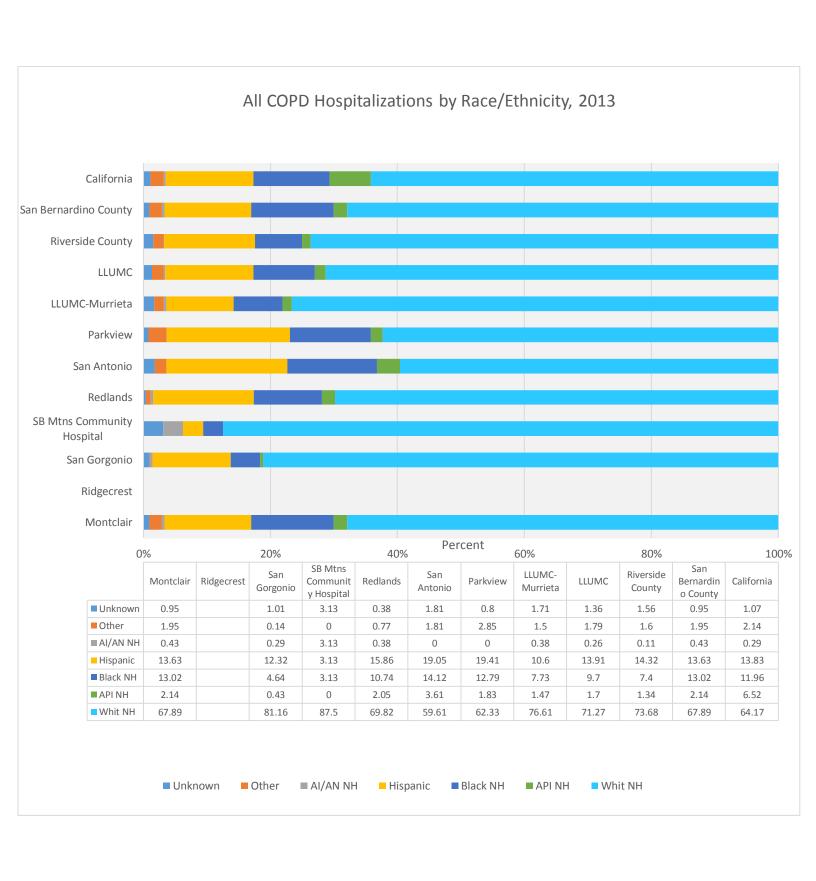
Chronic Obstructive Pulmonary Disease

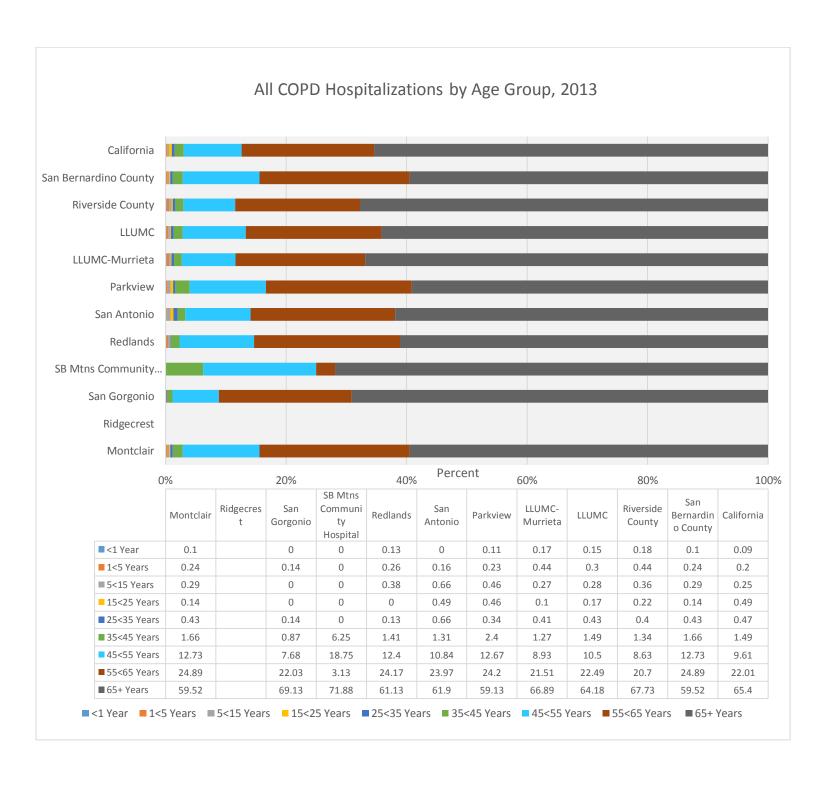
This section includes data for chronic obstructive pulmonary disease in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total COPD hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	MC	Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair
40,35 7	2,10 5	2,758	4,63 7	2,924	876	609	782	32	690	*	2,105
Percent of Total Hospitalizations											
1.7	1.5	1.9	1.7	1.9	1.6	1.0	2.0	1.6	2.7	*	1.5





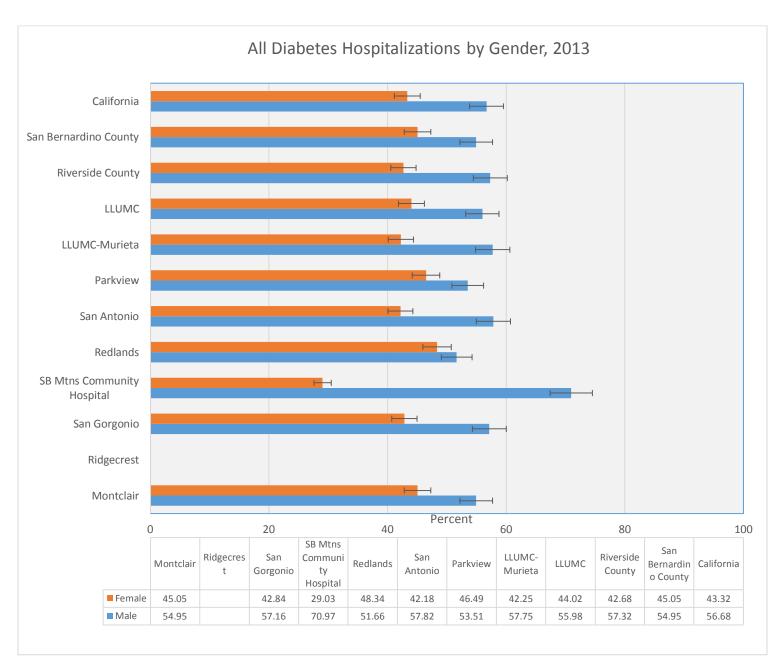


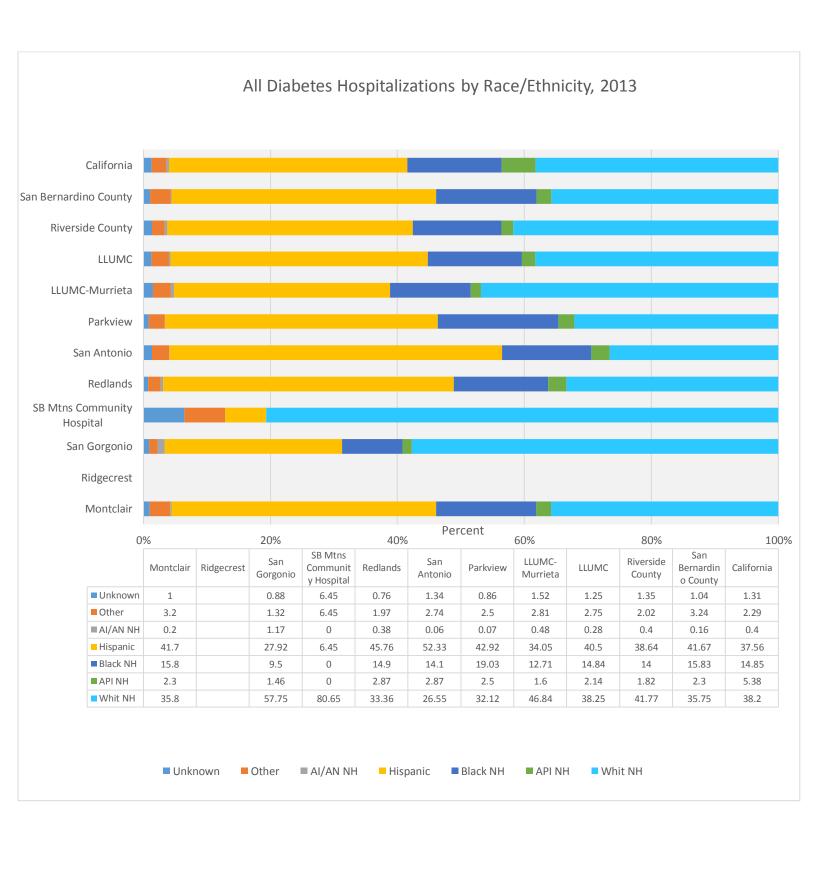
Diabetes

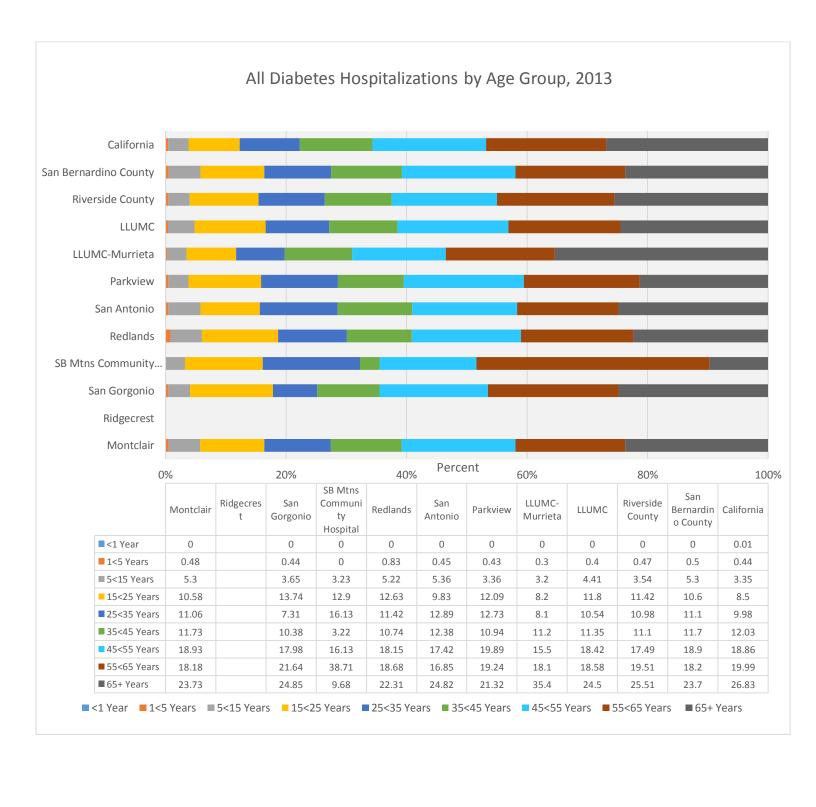
This section includes data for diabetes in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total diabetes hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	LLU MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair
54,24	3,73	3,414	6,73	3557	1,398	1,56	1,322	31	684	*	3,734
9	4		8			7					
Percent of Total Hospitalizations											
2.1	2.7	2.3	2.4	2.3	2.5	2.8	3.4	1.5	2.7	*	2.7





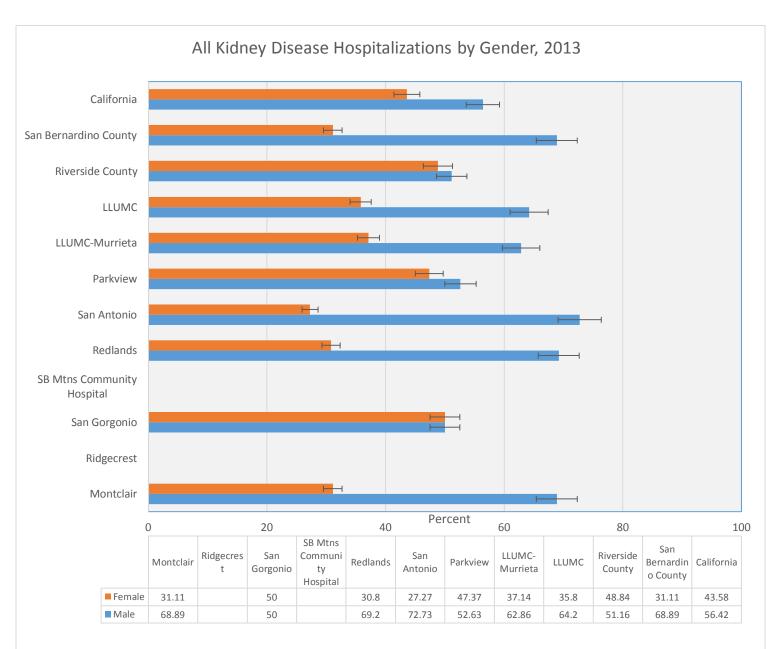


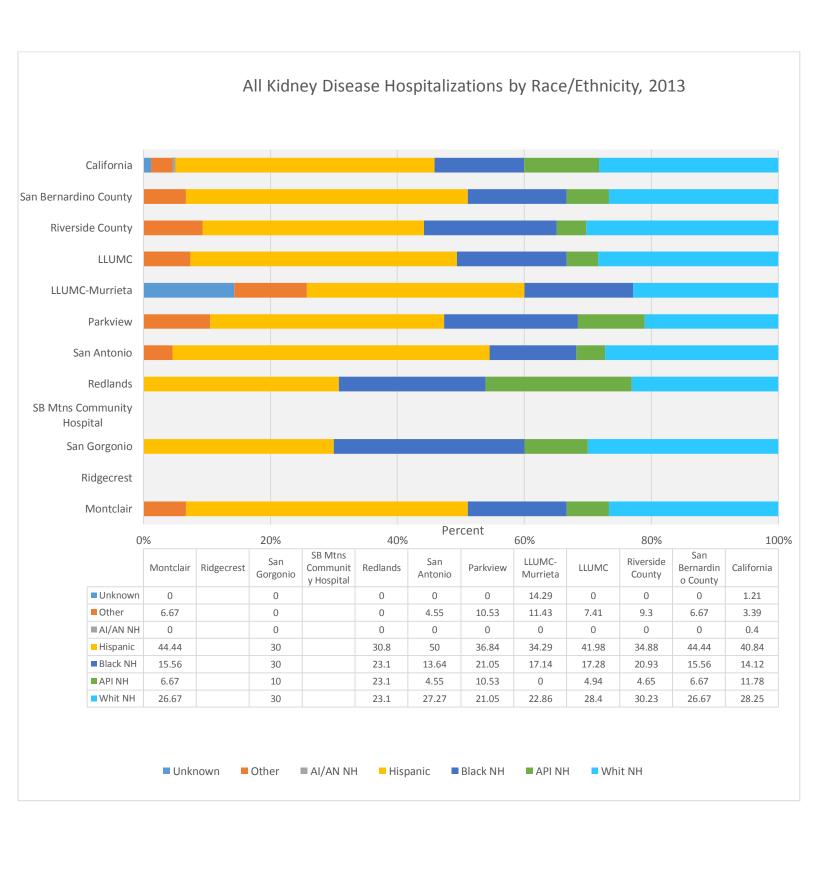
Kidney Disease

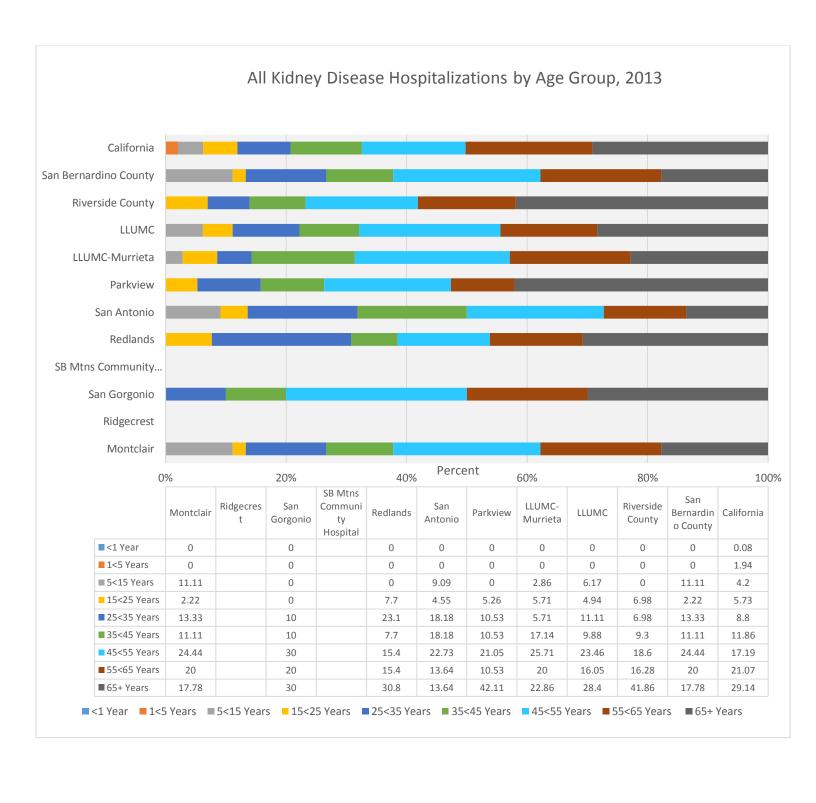
This section includes data for kidney disease in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total kidney disease hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	LLU MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair
1239	45	43	81	35	19	22	13	*	10	*	45
Percent of Total Hospitalizations											
.05	.03	.03	.03	.02	.03	.04	.03	*	.04	*	.03





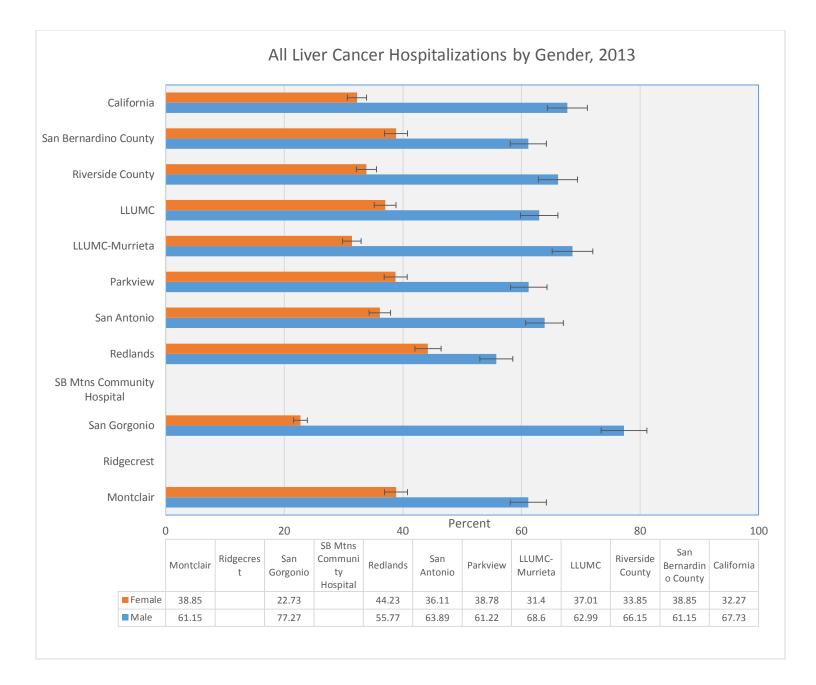


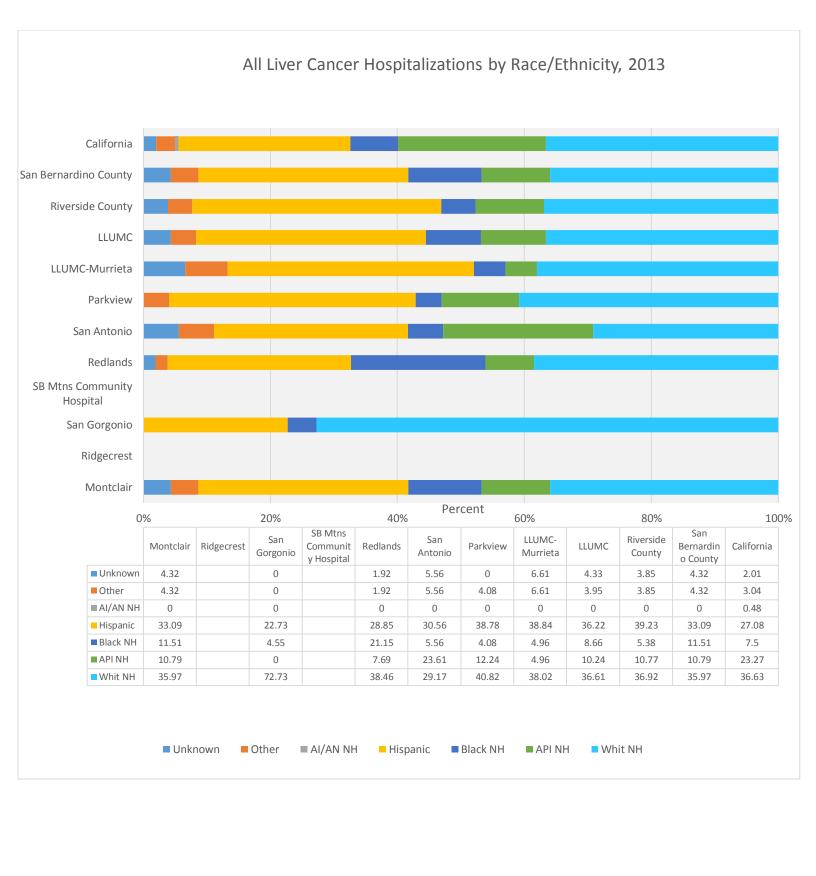
Liver Caner

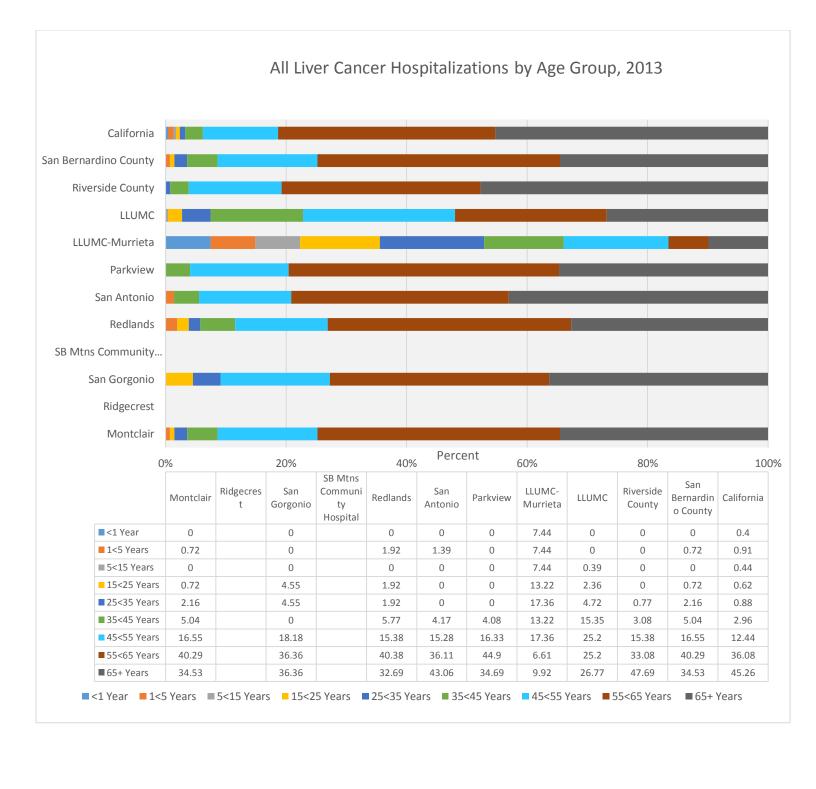
This section includes data for liver cancer in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total liver cancer hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair
2,733	139	130	254	121	49	72	52	*	22	*	139
Percent of Total Hospitalizations											
.11	.10	.09	.09	.08	.09	.12	.13	*	.09	*	.10





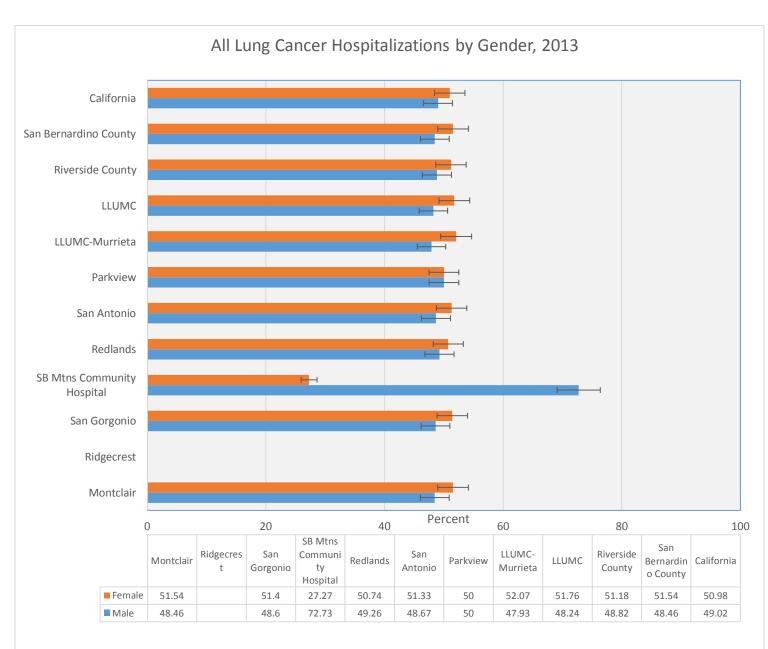


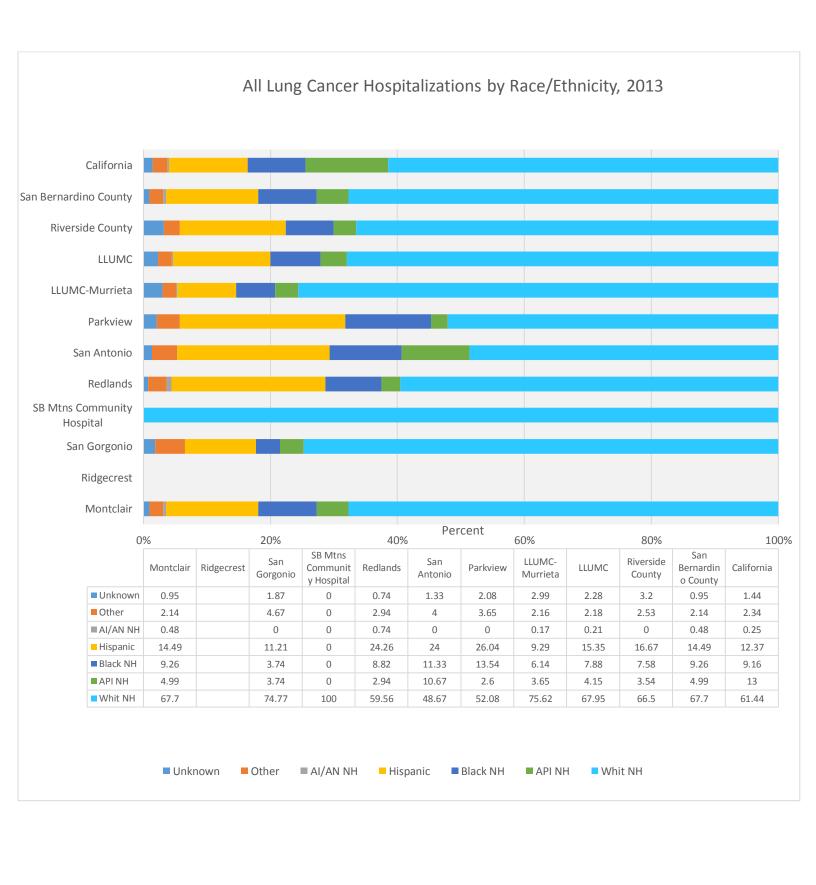
Lung Cancer

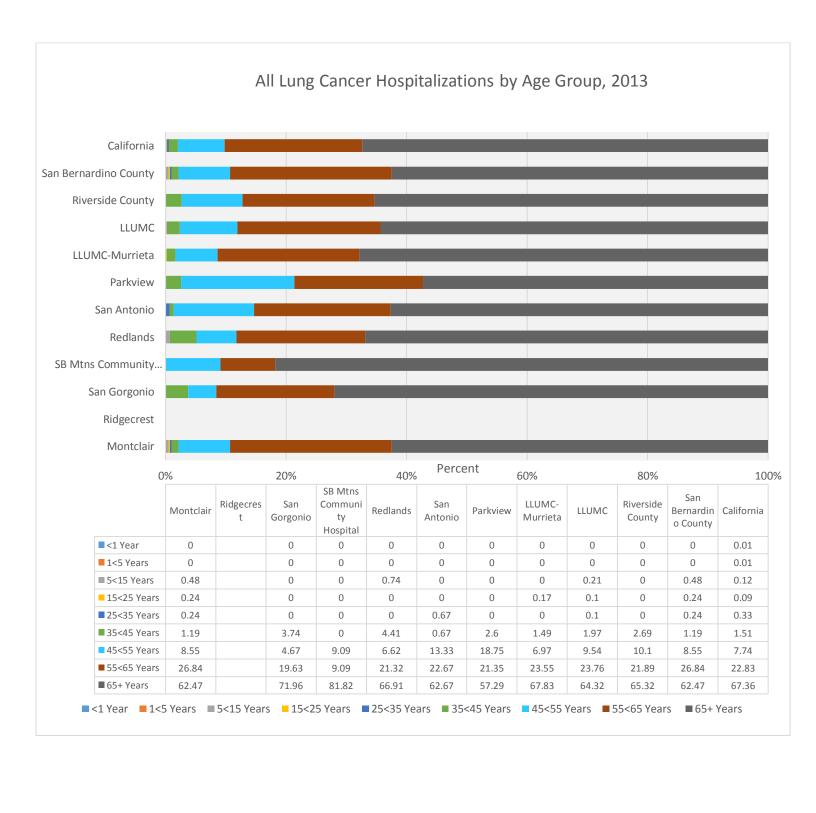
This section includes data for lung cancer in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total lung cancer hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	LLU MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair
9,188	421	594	964	603	192	150	136	11	107	*	421
Percent of Total Hospitalizations											
.38	.30	.40	.35	.40	.35	.26	.35	.54	.42	*	.30





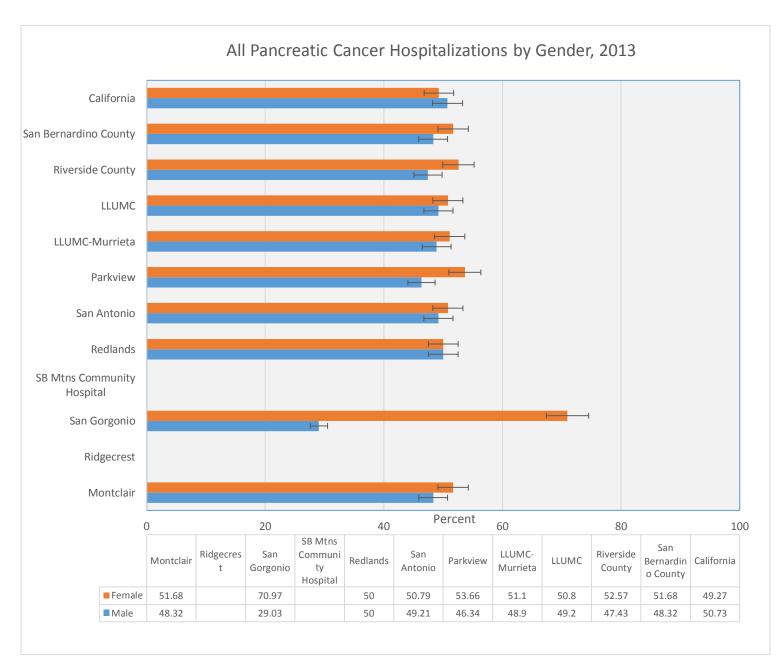


Pancreatic Cancer

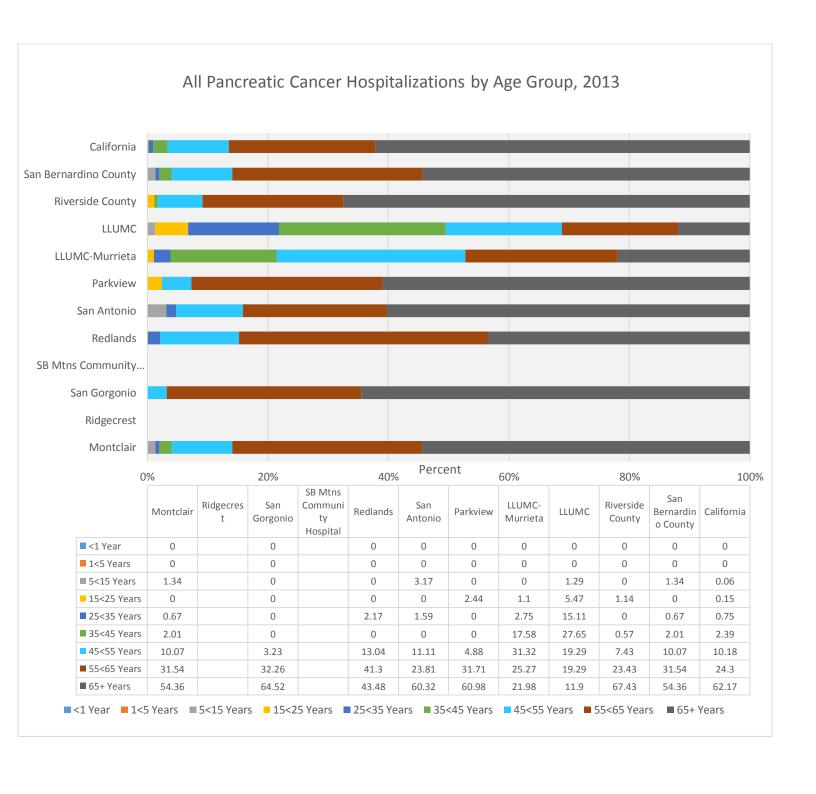
This section includes data for pancreatic cancer in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total pancreatic cancer hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair
3341	149	175	311	182	41	63	46	*	31	*	149
Percent of Total Hospitalizations											
.14	.12	.12	.11	.12	.07	.11	.12	*	.12	*	.11





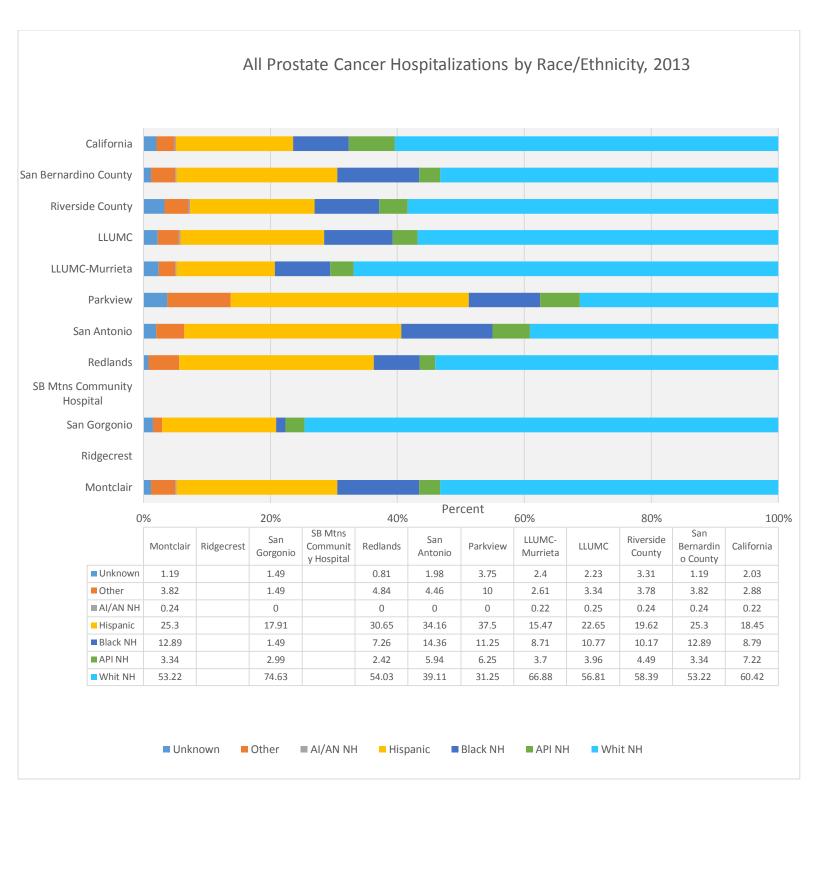


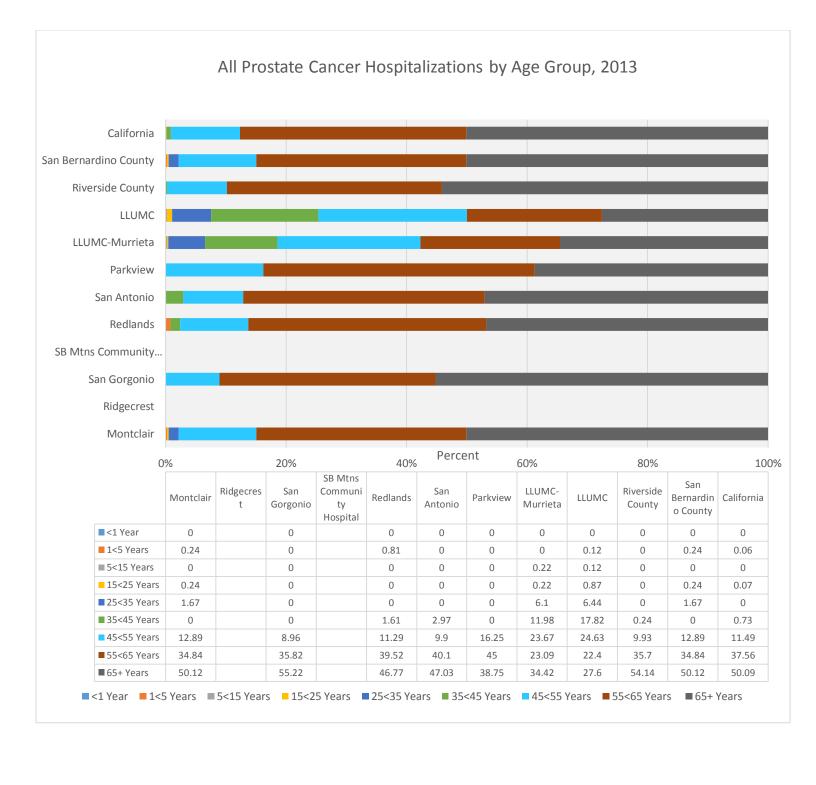
Prostate Cancer

This section includes data for prostate cancer in California, San Bernardino County, Riverside County, Loma Linda University Medical Center (LLUMC), Loma Linda University Medical Center (LLUMC) - Murrieta, Parkview, San Antonia, Redlands, San Bernardino Mountains Community Hospital, San Gorgonio, Ridgecrest and Montclair.

N-value for total prostate cancer hospitalizations per service area, 2013

Califo rnia	SB Cou nty	River side	MC	LLUM C- Murri eta	Parkv iew	San Anto nio	Redla nds	SB Mtns Comm unity Hospit al	San Gorg onio	Ridgec rest	Mont clair
6,885	419	423	808	459	80	202	124	*	67	*	419
Percent of Total Hospitalizations											
.28	.30	.29	.29	.30	.14	.34	.31	*	.26	*	.30





Social Determinants of Health

Social determinates of health is defined as the condition in which people are born, grow, live, work and age. Understanding these conditions can help identify where gaps may lie. Circumstances are most often shaped by resources at varying geographical locations. This section explores five determinants of health including:

- Education
- Income
- Poverty
- Unemployment
- Free and Reduced Lunch

Key Findings

- The proportion of adults 25 years and older whose highest level of education was highschool graduate/GED or lower, was significantly higher in San Bernardino and Riverside Counties compared to the proportion in the United States and in the State of California; thus it is observed that San Bernardino and Riverside Counties have a higher proportion of adults who are less educated.
- The proportion of adults 25 years and older whose highest level of education is bachelors/graduate/professional degree is significantly lower in Sab Bernardino and Riverside Counties compared to the United States and the State of California. In San Bernardino and Riverside Counties, approximately 20% of adults have received a bachelors/graduate/professional degree compared to approximately 30% for the United States and the State of California.
- For approximately 30% of the adult male population in San Bernardino County, the highest level of education is a high-school diploma or GED.
- For approximately 25% of the adult male population in Riverside County, the highest level of education is a high-school diploma or GED.
- For approximately 25% of the adult female population in San Bernardino County, the highest level of education is a high-school diploma or GED.
- For approximately 25% of the adult female population in Riverside County, the highest level of education is a high-school diploma or GED.
- The median household income is significantly higher for San Bernardino and Riverside Counties compared to the United States but is significantly lower compared to California.
- Per capita income is significantly lower in San Bernardino and Riverside Counties compared to the United States and California.
- In 2014, approximately one in five people lived in poverty in San Bernardino County.

- The increase in the rate of poverty was approximately 2.3 higher in San Bernardino County compared to the United States and 1.5 times higher compared to California.
- The increase in the rate of poverty was approximately two times higher in Riverside County compared to the United States and 1.3 times higher compared to California.
- In 2014, approximately 22% of families with children 18 years or younger lived in poverty in San Bernardino County and approximately 19% in Riverside County.
- The increase in the rate of poverty among families with children 18 years and younger was approximately 2.3 higher in San Bernardino County compared to the United States and 1.6 times higher compared to California.
- The increase in the rate of poverty among families with children 18 years and younger was approximately two times higher in Riverside County compared to the United States and 1.4 times higher compared to California.
- In 2014, approximately 40% of single female households with children less than 18 years of age lived in poverty in San Bernardino County and the United States. In Riverside County and California, the proportion was 38%.
- The increase in the rate of poverty was approximately 2.6 higher in San Bernardino County compared to the United States and 1.4 times higher compared to California.
- The increase in the rate of poverty was approximately 2.1 higher in Riverside County compared to the United States and no difference compared to California.
- A significantly higher proportion of children 18 years and younger live in poverty in San Bernardino County (27%) compared to approximately 25% in California. The proportion of children living in poverty in San Bernardino County is approximately 15% higher than in California.
- From December 2014 to January 2016, the unemployment rate has significantly decreased for both San Bernardino County and Riverside County. The unemployment rate has decreased by 16% for San Bernardino County and by 17% for Riverside County from December 1014 to January 2016.
- Approximately 70% of students in primary education at a public institution in San Bernardino County are eligible for free and reduced meals compared to 64% in Riverside County.
- From 2005/2006 academic school year to 20014/2015 academic school year the proportion of students eligible for free and reduced meals has increased by approximately 15% for California, by approximately 33% for San Bernardino County and approximately 27% for Riverside County.

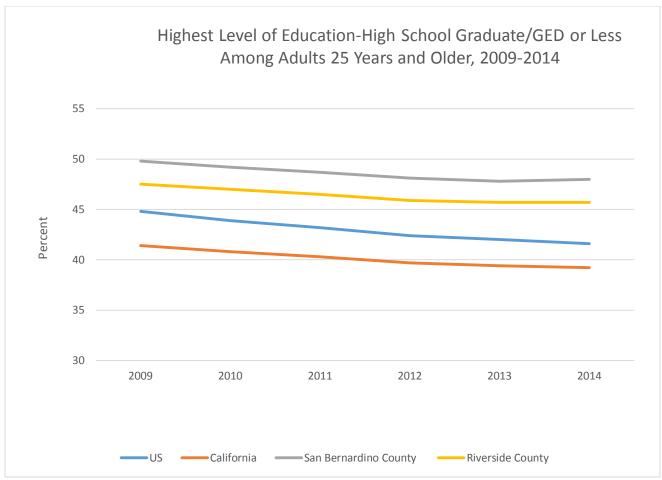
• In the 2014/2015 academic school year, the proportion of eligible students for free and reduced meals was 19% higher in San Bernardino County compared to California and 9% higher in Riverside County compared to California.

Education

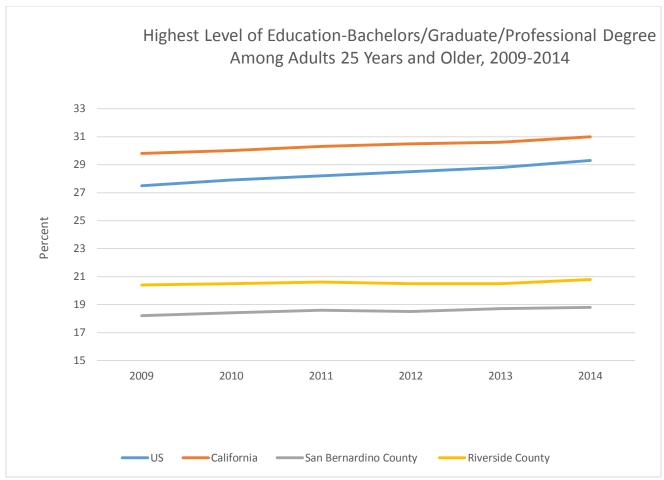
Educational attainment is commonly used to assess the influence of socioeconomic circumstances on health and is a strong determinant of current and future employment and income. An individual's overall physical and mental health and life expectancy are directly correlated to their income, and research has shown that educational attainment is one of the strongest predictors of income. For most people, educational attainment reflects material and other resources of the family and the knowledge and skills attained by young adulthood. Therefore, education captures both the long-term influence of early life circumstances and the influence of adult circumstances on adult health. The gradient of educational attainment illustrates that people with a higher level of education are more likely to have higher paying jobs and are more likely to be employed than people with a lower level of education. Studies have shown that each additional year in school is associated with increased life expectancy and better health. Research also suggests that people who complete higher levels of education have better cognitive and psychological resources, such as problem solving, practice with teamwork, dependability, structure, and routine. What's more, research demonstrates less educated individuals are more likely to be employed in jobs that are low-wage and require less skill, working in conditions that are more dangerous, stressful, and offer the worker less control than that enjoyed by more highly educated individuals. Furthermore, low-wage and low-skill jobs more often do not provide health insurance, making it more difficult to access preventive and immediate health care. Conversely a person's health also affects their education. Health conditions are a common contributor to the decision to leave school. For instance, pregnancy, parental or sibling illness, and chronic conditions such as asthma, can all lead to excessive absenteeism and ultimately to dropout. As a result, individuals are less educated and in the course of their life are more likely to resign to low paying jobs.

Educational Attainment, 2009 - 2014

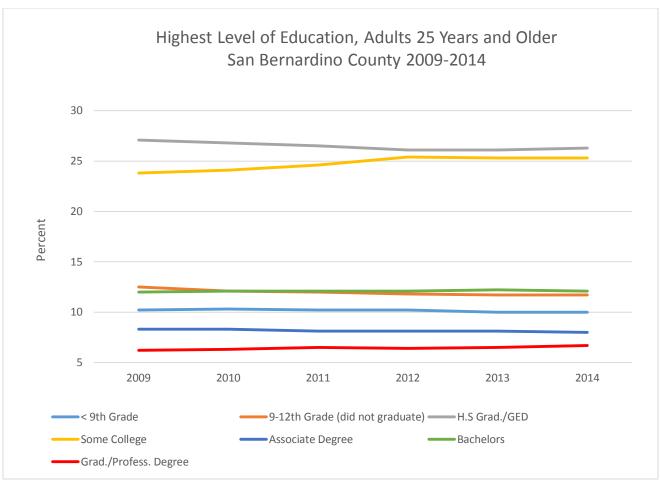
Educational Attainment,			
2009	California	San Bernardino	Riverside
n-value	23,219,217	1,156,887	1,240,048
<9 th Grade	10.4	10.2	10.0
9-12 th Grade	9.1	12.5	11.0
HS Grad./GED	21.9	27.1	26.5
Some College	21.2	23.8	24.5
AA Degree	7.6	8.3	7.5
Bachelors	19.1	12.0	13.3
Grad./Professional	10.7	6.2	7.1
2010	California	San Bernardino	Riverside
n-value	23,497,945	1,181413	1,284,414
<9 th Grade	10.4	10.3	10.0
9-12 th Grade	8.9	12.1	10.8
HS Grad./GED	21.5	26.8	26.2
Some College	21.5	24.1	24.9
AA Degree	7.7	8.3	7.6
Bachelors	19.2	12.1	13.3
Grad./Professional	10.8	6.3	7.2
2011	California	San Bernardino	Riverside
n-value			
<9 th Grade	23,797,844	1,198,562	1,316,392
9-12 th Grade	10.4	10.2	9.9
	8.8	12.0	10.9
HS Grad./GED	21.1	26.5	25.7
Some College	21.8	24.6	25.4
AA Degree	7.7	8.1	7.6
Bachelors	19.3	12.1	13.4
Grad./Professional	11.0	6.5	7.2
2012	California	San Bernardino	Riverside
n-value	24,117,317	1,216,126	1,345,607
<9 th Grade	10.3	10.2	9.9
9-12 th Grade	8.7	11.8	10.8
HS Grad./GED	20.7	26.1	25.2
Some College	22.2	25.4	26.0
AA Degree	7.7	8.1	7.5
Bachelors	19.4	12.1	13.3
Grad./Professional	11.1	6.4	7.2
2013	California	San Bernardino	Riverside
n-value	24,455,010	1,233,965	1,376,023
<9 th Grade	10.2	10.0	9.7
9-12 th Grade	8.5	11.7	10.7
HS Grad./GED	20.7	26.1	25.3
Some College	22.1	25.3	26.0
AA Degree	7.8	8.1	7.7
Bachelors	19.4	12.2	13.2
Grad./Professional	11.2	6.5	7.3
2014	California	San Bernardino	Riverside
n-value	24,865,866	1,256,972	1,410,823
<9 th Grade	10.1	10.0	9.6
9-12 th Grade	8.4	11.7	10.6
HS Grad./GED	20.7	26.3	25.5
Some College	22.0	25.3	25.8
AA Degree	7.8	8.0	7.7
Bachelors	19.6	12.1	13.4
		6.7	7.4
Grad./Professional	11.4	h./	/ 4



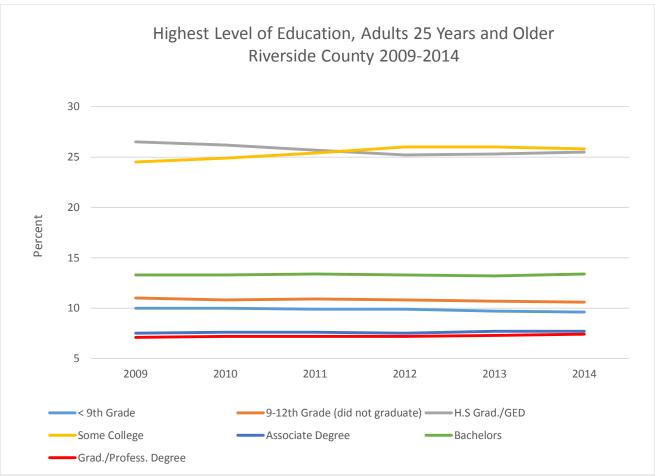
The proportion of adults 25 years and older whose highest level of education was high-school graduate/GED or lower, was significantly higher in San Bernardino and Riverside Counties compared to the proportion in the United States and in the State of California; thus it is observed that San Bernardino and Riverside Counties have a higher proportion of adults who are less educated. Approximately 50% of adults 25 years and older in San Bernardino County highest level of education is high-school graduate/GED or lower compared to approximately 45% for Riverside County; a significant difference between the two counties. In the United States and in California, the proportion of adults 25 years and older whose high level of education is high-school graduate/GED or lower is approximately 40%. From 2009 to 2014, the proportion of adults 25 years and older whose highest level of education is high-school graduate/GED or lower has remained stable for San Bernardino County and Riverside Counties, whereas in the United States and in California the proportion has significantly decreased. This proportion has dropped 3.2% in the United States and 2.2% in the State of California.



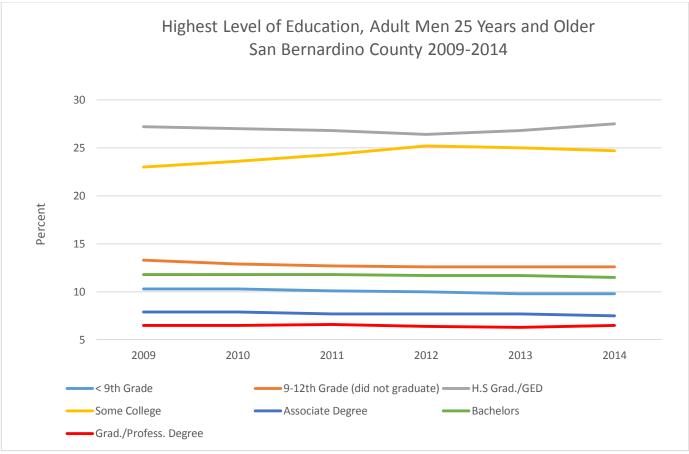
The proportion of adults 25 years and older whose highest level of education is bachelors/graduate/professional degree is significantly lower in Sab Bernardino and Riverside Counties compared to the United States and the State of California. In San Bernardino and Riverside Counties, approximately 20% of adults have received a bachelors/graduate/professional degree compared to approximately 30% for the United States and the State of California. From 2009 to 2014 the proportion of adults 25 years and older whose highest level of education is a bachelors/graduate/professional degree has remained stable for San Bernardino Counties; however has significantly increased for the United States and the State of California.



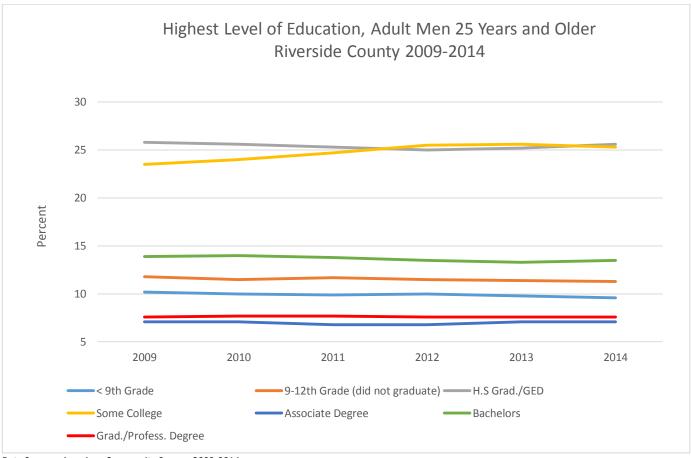
For approximately 26% of the adult population in San Bernardino County, the highest level of education is a high-school diploma or GED. Approximately 25% have had some college but did not acquire a degree and about 12% received a bachelor's. In addition, about one in 10 adults' highest level of education is ninth grade or less. For each of the educational groups identified in the above graph, the proportions each year have remained stable from 2009 to 2014.



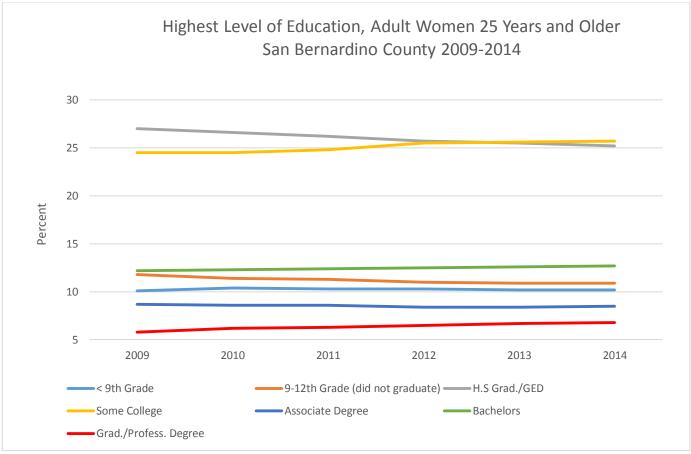
For approximately 26% of the adult population in Riverside County, the highest level of education is a high-school diploma or GED. Approximately 25% have had some college but did not acquire a degree and about 12% received a bachelors. In addition, about one in 10 adult's highest level of education is ninth grade or less. For each of the educational groups identified in the above graph, the proportions each year have remained stable from 2009 to 2014.



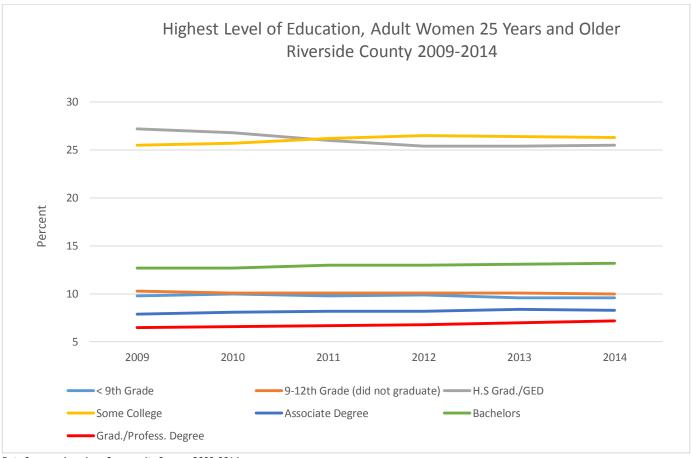
For approximately 30% of the adult male population in San Bernardino County, the highest level of education is a high-school diploma or GED. Approximately 25% have had some college but did not acquire a degree and about 12% received a bachelors. In addition, about one in 10 adult male's highest level of education is ninth grade or less and for approximately 12% the highest level of education is ninth to twelfth grade. For each of the educational groups identified in the above graph, the proportions each year have remained stable from 2009 to 2014 for adult males in San Bernardino County.



For approximately 25% of the adult male population in Riverside County, the highest level of education is a high-school diploma or GED. Approximately 25% have had some college but did not acquire a degree and about 14% received a bachelors. In addition, about one in 10 adult male's highest level of education is ninth grade or less and for approximately 12% the highest level of education is ninth to twelfth grade. Approximately eight percent of the adult male population has received a graduate/professional degree. For each of the educational groups identified in the above graph, the proportions each year have remained stable from 2009 to 2014 for adult males in Riverside County.



For approximately 25% of the adult female population in San Bernardino County, the highest level of education is a high-school diploma or GED. Approximately 25% have had some college but did not acquire a degree and about 13% received a bachelors. In addition, about one in 10 adult female's highest level of education is ninth grade or less and for approximately 11% the highest level of education is ninth to twelfth grade. For each of the educational groups identified in the above graph, the proportions each year have remained stable from 2009 to 2014 for adult females in San Bernardino County.

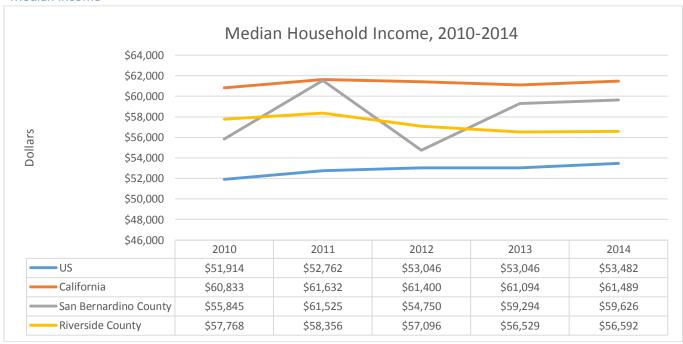


For approximately 25% of the adult female population in Riverside County, the highest level of education is a high-school diploma or GED. Approximately 26% have had some college but did not acquire a degree and about 13% received a bachelors. In addition, about one in 10 adult female's highest level of education is either ninth grade or less or ninth to twelfth grade. Approximately seven percent of adult females have received a graduate or professional degree. For each of the educational groups identified in the above graph, the proportions each year have remained stable from 2009 to 2014 for adult females in Riverside County.

Income

The association and relationship between higher levels of economic wealth and optimal health, and lower levels of economic wealth and poor health, have been well documented. It has been illustrated that different levels of income have significant differences in health outcomes. Income is the indicator that most directly measures material resources and can influence health by its direct effect on living standards; specifically, access to better quality food, housing, and health care services. In addition, income is used to measure an individual's socioeconomic status (SES). As a result, SES is closely tied to health outcomes as it provides access to a wide range of advantages. Such advantages include higher education, access and availability of professional occupations that offer benefits, and a better living environment. This directly influences an individual's power, prestige, and is beneficial to their social connections – all of which may provide greater protection against high risk behaviors that ultimately affect a person's health.

Median Income



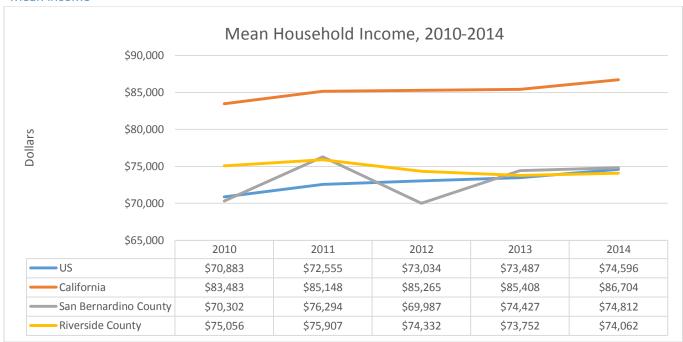
Data Source: American Community Survey, 2009-2014

A median household income refers to the income level earned by a given household where half of the homes in the area earn more and half earn less. In other words, it is the amount that divides the income distribution into two equal groups, half having income above that amount, and half having income below that amount. It's used instead of the average or mean household income because it can give a more accurate picture of an area's actual economic status. Median household incomes are frequently used to determine housing affordability.

From 2010 to 2014, the median income significantly increased for the United States by \$1,568, significantly increased for California by \$656, significantly increased for San Bernardino County by \$3,781 and significantly decreased for Riverside County by \$1,176. The median household income is significantly higher for San Bernardino and Riverside Counties compared to the United States but is significantly lower compared to California. In 2014, the median household

income was significantly higher in San Bernardino County compared to Riverside County by \$3,034.

Mean Income

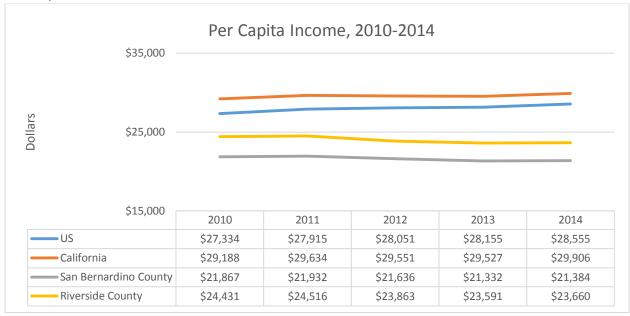


Data Source: American Community Survey, 2009-2014

Mean income (average) is the amount obtained by dividing the total aggregate income of a population by the number in the population.

From 2010 to 2014, the mean income significantly increased for the United States by \$3,713, significantly increased for California by \$3,221, significantly increased for San Bernardino County by \$4,510 and significantly decreased for Riverside County by \$994. There is no difference in the mean household income for San Bernardino and Riverside Counties compared to the United States but it is significantly lower compared to California. In 2014, the mean household income was similar between San Bernardino County and Riverside County.

Per Capita Income



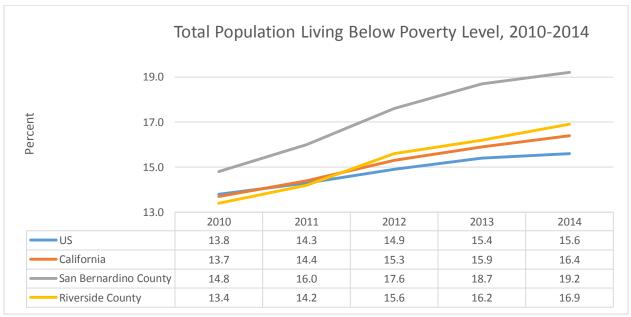
Data Source: American Community Survey, 2009-2014

Per capita income is defined as the total national income (GDP) divided by the total population. Per capita income includes children and the non-working population in its calculations and serves as an indicator to measure a population's standard of living.

Per capita income is significantly lower in San Bernardino and Riverside Counties compared to the United States and California. From 2010 to 2014 the per capita income has increased significantly in the United States by \$1,221, an increase of four percent, and has increased by \$718 in California, an increase of two percent. Between 2010 and 2014 in San Bernardino County, the per capita income has decreased by \$483, a 2.2% decrease, and for Riverside County it has decrease by \$771, a 3.2% decrease. The per capita income for San Bernardino County has significantly remained below the per capita income for Riverside County from 2010 to 2014. On average the per capita income for San Bernardino County has been approximately \$2,382 less or approximately 11%.

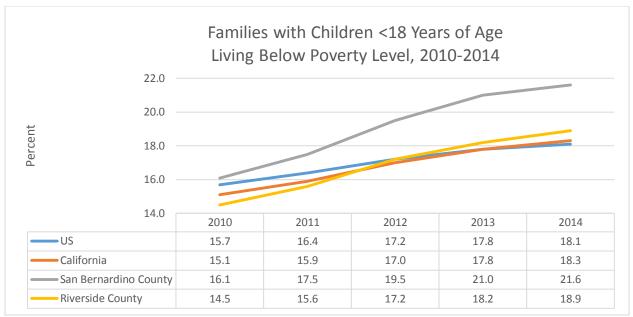
Poverty

Poverty was defined as 100% federal poverty level (FPL). The federal poverty level (FPL) is the set minimum amount of gross income that a family needs for food, clothing, transportation, shelter and other necessities. In the United States, this level is determined by the Department of Health and Human Services. FPL varies according to family size. The number is adjusted for inflation and reported annually in the form of poverty guidelines. According to the U.S. Department of Health and Human Services, in 2014, the guideline for 100% FPL annual household income for a family of four was \$23,850.

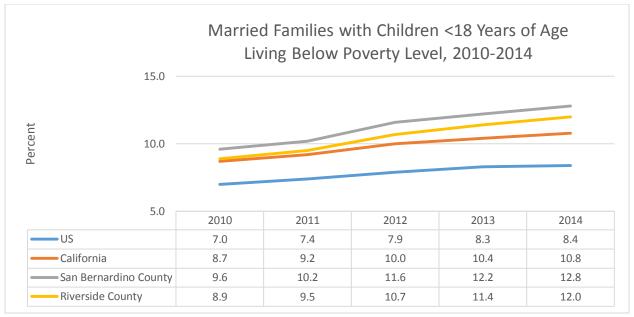


Data Source: American Community Survey, 2009-2014

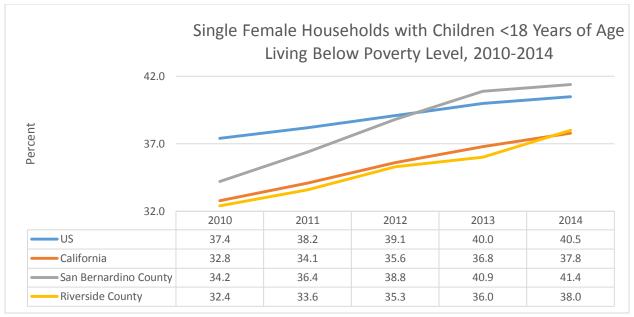
From 2010 to 2014 the proportion of the population that lived in poverty significantly increased in the United States, California, San Bernardino County and Riverside County. The proportion was significantly higher in San Bernardino County compared to the other three populations. In 2014, approximately one in five people lived in poverty in San Bernardino County. From 2010 to 2014, the rate of poverty increased by 13% in the United States, by 20% in California, by 30% in San Bernardino County and by 26% in Riverside County. The increase in the rate of poverty was approximately 2.3 higher in San Bernardino County compared to the United States and 1.5 times higher compared to California. The increase in the rate of poverty was approximately two times higher in Riverside County compared to the United States and 1.3 times higher compared to California.



From 2010 to 2014 the proportion of families with children 18 years or younger that lived in poverty significantly increased in the United States, California, San Bernardino County and Riverside County. The proportion was significantly higher in San Bernardino County compared to the other three populations. In 2014, approximately 22% of families with children 18 years or younger lived in poverty in San Bernardino County and approximately 19% in Riverside County. Approximately 18% of families with children 18 years and younger lived in poverty in the United States and California. From 2010 to 2014, the rate of poverty among families with children 18 years and younger increased by 15% in the United States, by 21% in California, by 34% in San Bernardino County and by 30% in Riverside County. The increase in the rate of poverty among families with children 18 years and younger was approximately 2.3 higher in San Bernardino County compared to the United States and 1.6 times higher compared to California. The increase in the rate of poverty among families with children 18 years and younger was approximately two times higher in Riverside County compared to the United States and 1.4 times higher compared to California.

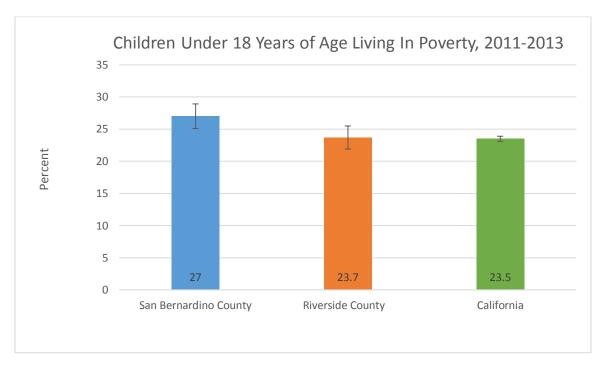


From 2010 to 2014 the proportion of the married families with children 18 years or younger that lived in poverty significantly increased in the United States, California, San Bernardino County and Riverside County. The proportion was significantly higher in San Bernardino County and Riverside County compared to the United States and California. In 2014, approximately 13% of married families with children less than 18 years of age lived in poverty in San Bernardino County and 12% in Riverside County. From 2010 to 2014, the rate of poverty increased among married families with children 18 years or younger by 20% in the United States, by 24% in California, by 33% in San Bernardino County and by 35% in Riverside County. The increase in the rate of poverty was approximately 1.7 higher in San Bernardino County compared to the United States and 1.4 times higher compared to California. The increase in the rate of poverty was approximately 1.8 higher in Riverside County compared to the United States and 1.4 times higher compared to California.



From 2010 to 2014 the proportion of single female households with children 18 years or younger that lived in poverty significantly increased in the United States, California, San Bernardino County and Riverside County. In 2014 the proportion was significantly higher in San Bernardino County and the United States compared to the California and Riverside County. In 2014, approximately 40% of single female households with children less than 18 years of age lived in poverty in San Bernardino County and the United States. In Riverside County and California, the proportion was 38%.

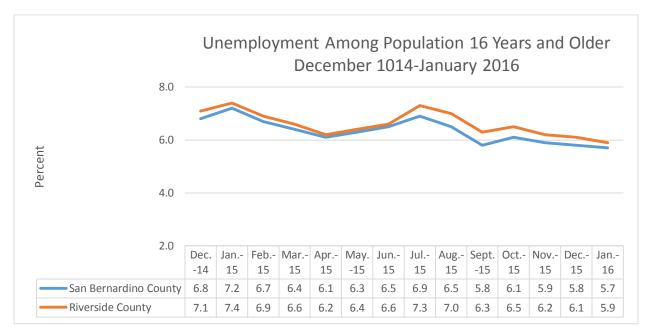
From 2010 to 2014, the rate of poverty increased among single female households with children 18 years or younger by 8% in the United States, by 15% in California, by 21% in San Bernardino County and by 17% in Riverside County. The increase in the rate of poverty was approximately 2.6 higher in San Bernardino County compared to the United States and 1.4 times higher compared to California. The increase in the rate of poverty was approximately 2.1 higher in Riverside County compared to the United States and no difference compared to California.



A significantly higher proportion of children 18 years and younger live in poverty in San Bernardino County (27%) compared to approximately 25% in California. There was no difference in the proportion of children 18 years and younger living in poverty between San Bernardino County and Riverside County. The proportion of children living in poverty in San Bernardino County is approximately 15% higher than in California. There was no difference in the proportion of children 18 years and younger living in poverty between California and Riverside County.

Unemployment

Unemployment is associated with higher mortality rates, especially from cardiovascular disease and suicide. The stress of joblessness can lead to anxiety, depression, substance abuse, and poor mental health. Unemployment can also affect a neighborhood's well-being. As the levels of joblessness increase, sociability and collective participation and commitment in solving neighborhood problems are weakened. Thus, when people cannot find work, they are more likely to turn to crime and street economy (e.g. selling drugs, working in commercial sex) to make money.



Data Source: Bureau of Labor of Statistics, December 2014-January 2016

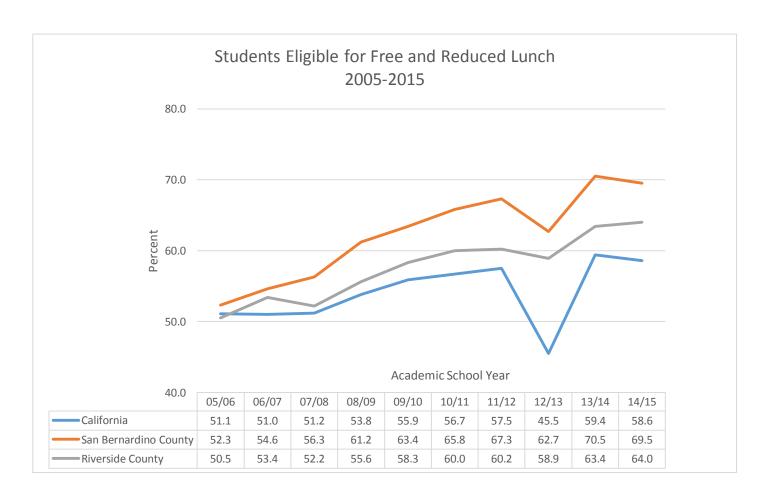
Unemployment occurs when a person who is actively searching for employment is unable to find work. Unemployment is often used as a measure of the health of the economy. The most frequently cited measure of unemployment is the unemployment rate. This is the number of unemployed persons divided by the number of people in the labor force. Note that the unemployment rate above was not adjusted for seasonal employment.

There was no significant difference in the unemployment rate between San Bernardino County and Riverside County. From December 2014 to January 2016, the unemployment rate has significantly decreased for both San Bernardino County and Riverside County. The unemployment rate has decreased by 16% for San Bernardino County and by 17% for Riverside County from December 1014 to January 2016.

Free and Reduced Lunch

A free and reduced meal program is a federal program offering assistance to students whose families meet the definition of being a low-income family. Every public school in the United States offers a free and reduced meal program for their students. Students who are eligible for free or reduced lunches at school, as defined by the National School Lunch Act, may eat school meals for free or at a reduced cost.

This program provides cash subsidies for free and reduced-price breakfasts and lunches to students based on family income and size. Eligibility is determined via an application process that parents must complete and submit each year. Children from families at or below 130 percent of the poverty level are eligible for free meals. Children from families between 130-185 percent of the poverty level are eligible for reduced-priced meals.



Data Source: California Department of Education, 2005/2006 Academic School Year through 2014/2015 Academic School Year

Approximately 70% of students in primary education at a public institution in San Bernardino County are eligible for free and reduced meals compared to 64% in Riverside County and 60% in California. The proportion in San Bernardino and Riverside Counties is significantly higher compared to California. Compared to each other, San Bernardino County has a significantly higher proportion of students eligible for free and reduced meals compared to Riverside County. From 2005/2006 academic school year to 20014/2015 academic school year the proportion of students eligible for free and reduced meals has increased by approximately 15% for California, by approximately 33% for San Bernardino County and approximately 27% for Riverside County. In the 2014/2015 academic school year, the proportion of eligible students

for free and reduced meals was 19% higher in San Bernardino County compared to California and 9% higher in Riverside County compared to California.

Food Access

Access to healthy food has been proven to be important in maintaining good health, psychological well-being and preventing premature death. The following tables and graphs provide snapshots of food security indicators for the Inland Empire area compared to California.

Fast Food Restaurants

Fast food restaurants are defined as limited-service establishments primarily engaged in providing food services (except snack and nonalcoholic beverage bars) where patrons generally order or select items and pay before eating. This indicator is relevant because it provides a measure of healthy food access and environmental influences on dietary behaviors.

Fast Food Restaurant Concentration, 2013			
Report Area	Total Population	Number of Establishments	Establishments, Rate per 100,000 Population
Riverside County, CA	2,189,641	1,420	64.85
San Bernardino County, CA	2,035,210	1,435	70.51
California	37,253,956	27,912	74.9

Data Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2013.

Grocery Stores

Grocery stores are defined as supermarkets and smaller grocery stores primarily engaged in retailing a general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry. Included are delicatessen-type establishments. Convenience stores and large general merchandise stores that also retail food, such as supercenters and warehouse club stores are excluded. This indicator is relevant because it provides a measure of healthy food access and environmental influences on dietary behaviors.

Grocery Store Concentration, 2013			
Report Area	Total Population	Number of Establishments	Establishments, Rate per 100,000 Population
Riverside County, CA	2,189,641	349	15.94
San Bernardino County, CA	2,035,210	315	15.48
California	37,253,956	8,085	21.7

 ${\tt Data\ Source:\ US\ Census\ Bureau,\ County\ Business\ Patterns.\ Additional\ data\ analysis\ by\ CARES.\ 2013.}$

Food Deserts

This indicator reports the percentage of the population living in census tracts designated as food deserts. A food desert is defined as a low-income census tract (where a substantial number or share of residents has low access to a supermarket or large grocery store. This indicator is relevant because it highlights populations and geographies facing food insecurity.

Population Living in Food Deserts, 2010				
Report Area	Total Population	Population with Low Food Access	Percent Population with Low Food Access	
Riverside County, CA	2,189,641	548,810	25.06%	
San Bernardino County, CA	2,035,210	517,111	25.41%	
California	37,253,956	5,332,093	14.31%	

Data Source: US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas. 2010.

Health Care Access

The lack of access to adequate healthcare can pose barriers to one's physical and psychological well-being. The rates of mortality, morbidity, and visits to emergency departments can be reduced when the population has appropriate access to healthcare services. This section includes key indicators that form a picture of access in the Inland Empire area.

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Health Care Access Indicators				
Report Area Percent of Uninsured¹ Ratio of Population to Primary Care Physicians² Ratio of Population to Dentists³			Ratio of Population to Mental Health Providers ⁴	
Riverside County, CA	22%	2,420:1	2,070:1	670:1
San Bernardino County, CA	20%	1,740:1	1,540:1	560:1
California	19%	1,270:1	1,260:1	360:1

- 1. Percentage of population under age 65 without health insurance, US Census Bureau's Small Area Health Insurance Estimates (SAHIE), 2013
- 2. Area Health Resource File/American Medical Association, 2013
- 3. Area Health Resource File/National Provider Identification file, 2014
- 4. CMS, National Provider Identification, 2015

Riverside and San Bernardino County lag behind the state of California with more of their population uninsured and with less access to health care providers. Sufficient availability of essential health care professionals is necessary to improve health outcomes and prevent mortality and morbidity.

Top Discharges by Diagnosis Related Group (DRG)

A Diagnosis-Related Group (DRG) is a statistical system of classifying any inpatient stay into groups. The DRG classification system divides possible diagnoses into more than 20 major body systems and subdivides them into almost 500 groups for the purpose of reimbursement, payment and contracting purposes. The following DRG tables are based on the Medicare-severity DRGs (MSDRG). There are some diagnoses with multiple MSDRG codes which were combined into a single diagnosis category. The rationale was to have one total for all the DRGs for a particular diagnosis without regard to the distinction of complicating or comorbid condition, major complicating or comorbid condition, etc. The data source used for the county level and hospital specific DRG tables was the 2014 Patient Discharge Data from the Office of Statewide Planning and Development (OSHPD) Statewide Model Data Set for Hospitals.

Riverside County Top 25 Discharges by DRG, 2014

MSDRG	DRG Description	Discharges	Percent
885	Psychoses	11,161	4.9%
870/871/872	Septicemia	7,975	3.5%
469/470	Major joint replacement/reattachment lower extremity	6,262	2.7%
291/292/293	Heart failure & shock	4,382	1.9%
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	4,265	1.9%
193/194/195	Simple pneumonia & pleurisy	3,996	1.7%
682/683/684	Renal failure	3,122	1.4%
308/309/310	Cardiac arrhythmia & conduction disorders	2,925	1.3%
064/065/066	Intracranial hemorrhage or cerebral infarction	2,881	1.3%
190/191/192	Chronic obstructive pulmonary disease	2,871	1.3%
313	Chest pain	2,870	1.3%
417/418/419	Laparoscopic cholecystectomy	2,837	1.2%
689/690	Urinary tract infections	2,607	1.1%
246-251	Percutaneous cardiovascular procedures	2,569	1.1%
377/378/379	G.I. hemorrhage	2,565	1.1%
894-897	Alcohol/drug abuse or dependence	2,450	1.1%
736-743	Uterine & adnexa procedures	2,393	1.0%
338-343	Appendectomy	2,368	1.0%
602/603	Cellulitis	2,330	1.0%
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	2,329	1.0%
945/946	Rehabilitation	1,789	0.8%
811/812	Red blood cell disorders	1,659	0.7%
100/101	Seizures	1,618	0.7%
286/287	Circulatory disorders	1,596	0.7%
456-460	Spinal fusion	1,340	0.6%
TOTAL COUNTY DISCHARGES		228,807	

Top DRG Discharges for Riverside County by Race/Ethnicity

Top DRG Discharges Among Non-Hispanic White Riverside County Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	6,178
870/871/872	Septicemia	4,743
469/470	Major joint replacement/reattachment lower extremity	4,723
291/292/293	Heart failure & shock	2,521
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	2,296
193/194/195	Simple pneumonia & Pleurisy	2,263
190/191/192	Chronic obstructive pulmonary disease	2,091
308/309/310	Cardiac arrhythmia	2,071
064/065/066	Intercranial hemorrhage or cerebral infarction	1,753
894-897	Alcohol/drug abuse or dependence	1,731
246-251	Percutaneous cardiovascular procedures	1,683
682/683/684	Renal failure	1,667
689/690	Urinary tract infections	1,566
377/378/379	G.I. hemorrhage	1,495
313	Chest pain	1,475
602/603	Cellulitis	1,416
945/946	Rehabilitation	1,388
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	1,241
736-743	Uterine & adnexa procedures	1,127
417/418/419	Laparoscopic cholecystectomy	1,103
286/287	Circulatory disorders	940
456-460	Spinal Fusion	928
338-343	Appendectomy	859
100/101	Seizures	784
811/812	Red blood cell disorders	658
Total		48,700

Top DRG Discharges Among Hispanic (Any Race) Riverside County Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	3,406
870/871/872	Septicemia	2,482
417/418/419	Laparoscopic cholecystectomy	1,521
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	1,437
193/194/195	Simple pneumonia & Pleurisy	1,384
338-343	Appendectomy	1,349
291/292/293	Heart failure & shock	1,179
469/470	Major joint replacement/reattachment lower extremity	1,084
313	Chest pain	953
682/683/684	Renal failure	935
736-743	Uterine & adnexa procedures	914
689/690	Urinary tract infections	819
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	801
064/065/066	Intercranial hemorrhage or cerebral infarction	778

377/378/379	G.I. hemorrhage	756
602/603	Cellulitis	748
308/309/310	Cardiac arrhythmia	613
100/101	Seizures	578
246-251	Percutaneous cardiovascular procedures	552
894-897	Alcohol/drug abuse or dependence	523
811/812	Red blood cell disorders	489
190/191/192	Chronic obstructive pulmonary disease	441
286/287	Circulatory disorders	392
945/946	Rehabilitation	361
456-460	Spinal Fusion	300
Total		24,795

Top DRG Discharges Among Non-Hispanic Black Riverside County Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	1,600
870/871/872	Septicemia	676
291/292/293	Heart failure & shock	579
811/812	Red blood cell disorders	475
682/683/684	Renal failure	407
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	393
469/470	Major joint replacement/reattachment lower extremity	346
313	Chest pain	338
190/191/192	Chronic obstructive pulmonary disease	283
193/194/195	Simple pneumonia & Pleurisy	264
064/065/066	Intercranial hemorrhage or cerebral infarction	251
736-743	Uterine & adnexa procedures	230
377/378/379	G.I. hemorrhage	214
100/101	Seizures	210
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	201
308/309/310	Cardiac arrhythmia	172
286/287	Circulatory disorders	162
689/690	Urinary tract infections	154
894-897	Alcohol/drug abuse or dependence	146
246-251	Percutaneous cardiovascular procedures	136
602/603	Cellulitis	124
417/418/419	Laparoscopic cholecystectomy	120
945/946	Rehabilitation	92
456-460	Spinal Fusion	72
338-343	Appendectomy	63
Total		7,708

Top DRG Discharges Among Non-Hispanic Asian Riverside County Residents, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	284
885	Psychoses	227
469/470	Major joint replacement/reattachment lower extremity	131

291/292/293	Heart failure & shock	121
682/683/684	Renal failure	115
193/194/195	Simple pneumonia & Pleurisy	114
736-743	Uterine & adnexa procedures	114
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	110
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	101
064/065/066	Intercranial hemorrhage or cerebral infarction	95
377/378/379	G.I. hemorrhage	88
313	Chest pain	84
246-251	Percutaneous cardiovascular procedures	84
417/418/419	Laparoscopic cholecystectomy	79
308/309/310	Cardiac arrhythmia	76
338-343	Appendectomy	68
689/690	Urinary tract infections	56
811/812	Red blood cell disorders	54
286/287	Circulatory disorders	54
602/603	Cellulitis	46
945/946	Rehabilitation	41
190/191/192	Chronic obstructive pulmonary disease	34
456-460	Spinal Fusion	33
100/101	Seizures	28
894-897	Alcohol/drug abuse or dependence	27
Total		2,264

Top DRG Discharges Among Non-Hispanic Native American Riverside County Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	44
894-897	Alcohol/drug abuse or dependence	38
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	20
870/871/872	Septicemia	19
291/292/293	Heart failure & shock	14
469/470	Major joint replacement/reattachment lower extremity	12
682/683/684	Renal failure	10
689/690	Urinary tract infections	9
193/194/195	Simple pneumonia & Pleurisy	8
064/065/066	Intercranial hemorrhage or cerebral infarction	8
190/191/192	Chronic obstructive pulmonary disease	8
377/378/379	G.I. hemorrhage	8
736-743	Uterine & adnexa procedures	7
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	7
286/287	Circulatory disorders	7
338-343	Appendectomy	6
602/603	Cellulitis	6
811/812	Red blood cell disorders	5
100/101	Seizures	5
308/309/310	Cardiac arrhythmia	4
313	Chest pain	4

246-251	Percutaneous cardiovascular procedures	3
945/946	Rehabilitation	3
456-460	Spinal Fusion	3
417/418/419	Laparoscopic cholecystectomy	2
Total		260

Top DRG Discharges Among Non-Hispanic Other Race Riverside County Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	610
870/871/872	Septicemia	264
469/470	Major joint replacement/reattachment lower extremity	195
246-251	Percutaneous cardiovascular procedures	186
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	153
291/292/293	Heart failure & shock	149
193/194/195	Simple pneumonia & Pleurisy	133
064/065/066	Intercranial hemorrhage or cerebral infarction	123
736-743	Uterine & adnexa procedures	112
313	Chest pain	105
286/287	Circulatory disorders	103
308/309/310	Cardiac arrhythmia	96
338-343	Appendectomy	91
417/418/419	Laparoscopic cholecystectomy	89
377/378/379	G.I. hemorrhage	86
682/683/684	Renal failure	82
689/690	Urinary tract infections	79
602/603	Cellulitis	79
894-897	Alcohol/drug abuse or dependence	77
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	72
100/101	Seizures	70
190/191/192	Chronic obstructive pulmonary disease	68
945/946	Rehabilitation	57
456-460	Spinal Fusion	48
811/812	Red blood cell disorders	43
Total		3,170

Top DRG Discharges for Riverside County Residents by Age Group, 2014

Top DRG Discharges Among Riverside County Residents Under 18 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	1,979
338-343	Appendectomy	883
193/194/195	Simple pneumonia & Pleurisy	721
100/101	Seizures	540
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	471
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	344
689/690	Urinary tract infections	219

602/603	Cellulitis	218
870/871/872	Septicemia	120
811/812	Red blood cell disorders	98
456-460	Spinal fusion	86
417/418/419	Laparoscopic cholecystectomy	60
377/378/379	G.I. hemorrhage	51
894-897	Alcohol/drug abuse or dependence	37
736-743	Uterine & adnexa procedures	37
308/309/310	Cardiac arrhythmia	30
246-251	Percutaneous cardiovascular procedures	27
945/946	Rehabilitation	22
682/683/684	Renal failure	16
064/065/066	Intercranial hemorrhage or cerebral infarction	15
286/287	Circulatory disorders	13
190/191/192	Chronic obstructive pulmonary disease	11
313	Chest pain	9
291/292/293	Heart failure & shock	3
469/470	Major joint replacement/reattachment lower extremity	2
Total		6,012

Top DRG Discharges Among Riverside County Residents 18-59 Years, 2014

MSDRG	DRG Description	18-59 Years
885	Psychoses	8,962
870/871/872	Septicemia	2,724
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	2,156
894-897	Alcohol/drug abuse or dependence	2,092
417/418/419	Laparoscopic cholecystectomy	2,082
736-743	Uterine & adnexa procedures	2,056
313	Chest pain	1,444
469/470	Major joint replacement/reattachment lower extremity	1,415
338-343	Appendectomy	1,317
602/603	Cellulitis	1,257
291/292/293	Heart failure & shock	1,177
682/683/684	Renal failure	1,046
193/194/195	Simple pneumonia & Pleurisy	941
246-251	Percutaneous cardiovascular procedures	828
811/812	Red blood cell disorders	817
377/378/379	G.I. hemorrhage	779
308/309/310	Cardiac arrhythmia	768
064/065/066	Intercranial hemorrhage or cerebral infarction	735
100/101	Seizures	722
689/690	Urinary tract infections	718
286/287	Circulatory disorders	704
190/191/192	Chronic obstructive pulmonary disease	688
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	676
456-460	Spinal fusion	614

945/946	Rehabilitation	500	
Total		37,218	

Top DRG Discharges Among Riverside County Residents 60 Plus Years, 2014

MSDRG	DRG Description	60 Plus Years
870/871/872	Septicemia	5,624
469/470	Major joint replacement/reattachment lower extremity	5,074
291/292/293	Heart failure & shock	3,383
193/194/195	Simple pneumonia & Pleurisy	2,504
064/065/066	Intercranial hemorrhage or cerebral infarction	2,258
308/309/310	Cardiac arrhythmia	2,234
190/191/192	Chronic obstructive pulmonary disease	2,226
682/683/684	Renal failure	2,154
377/378/379	G.I. hemorrhage	1,817
246-251	Percutaneous cardiovascular procedures	1,789
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	1,773
689/690	Urinary tract infections	1,746
313	Chest pain	1,506
945/946	Rehabilitation	1,420
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	1,412
885	Psychoses	1,124
602/603	Cellulitis	944
286/287	Circulatory disorders	941
811/812	Red blood cell disorders	809
417/418/419	Laparoscopic cholecystectomy	772
456-460	Spinal fusion	684
894-897	Alcohol/drug abuse or dependence	413
100/101	Seizures	413
736-743	Uterine & adnexa procedures	411
338-343	Appendectomy	236
Total		43,667

San Bernardino County Top 25 DRG Discharges

MSDRG	DRG Description	Discharges	Percent
885	Psychoses	14,106	6.4%
870/871/872	Septicemia	8,887	4.0%
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	4,720	2.1%
469/470	Major joint replacement/reattachment lower extremity	4,159	1.9%
193/194/195	Simple pneumonia & Pleurisy	3,568	1.6%
313	Chest pain	3,299	1.5%
291/292/293	Heart failure & shock	2,925	1.3%
682/683/684	Renal failure	2,808	1.3%
736-743	Uterine & adnexa procedures	2,594	1.2%
064/065/066	Intercranial hemorrhage or cerebral infarction	2,571	1.2%
190/191/192	Chronic obstructive pulmonary disease	2,501	1.1%
689/690	Urinary tract infections	2,493	1.1%
417/418/419	Laparoscopic cholecystectomy	2,472	1.1%

602/603	Cellulitis	2,375	1.1%
637/638/639	Diabetes	2,240	1.0%
945/946	Rehabilitation	2,224	1.0%
202/203	Bronchitis & asthma	2,149	1.0%
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	2,117	1.0%
246-251	Percutaneous cardiovascular procedures	2,112	1.0%
377/378/379	G.I. hemorrhage	2,086	0.9%
894-897	Alcohol/drug abuse or dependence	1,940	0.9%
811/812	Red blood cell disorders	1,601	0.7%
100/101	Seizures	1,511	0.7%
286/287	Circulatory disorders	1,480	0.7%
189	Pulmonary edema & respiratory failure	1,429	0.6%
TOTAL		220,657	
COUNTY			
DISCHARGES			

Top DRG Discharges for San Bernardino County by Race/Ethnicity

Top DRG Discharges Among Non-Hispanic White San Bernardino County Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	6,317
870/871/872	Septicemia	4,413
469/470	Major joint replacement/reattachment lower extremity	2,763
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	2,104
291/292/293	Heart failure & shock	2,003
193/194/195	Simple pneumonia & Pleurisy	1,803
190/191/192	Chronic obstructive pulmonary disease	1,648
945/946	Rehabilitation	1,563
308/309/310	Cardiac Arrhythmia	1,414
313	Chest pain	1,402
602/603	Cellulitis	1,293
682/683/684	Renal failure	1,240
689/690	Urinary tract infections	1,214
064/065/066	Intercranial hemorrhage or cerebral infarction	1,213
894-897	Alcohol/drug abuse or dependence	1,160
246-251	Percutaneous cardiovascular procedures	1,154
736-743	Uterine & adnexa procedures	1,024
377/378/379	G.I. hemorrhage	1,019
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	951
417/418/419	Laparoscopic cholecystectomy	824
286/287	Circulatory disorders	651
456-460	Spinal Fusion	649
100/101	Seizures	619
338-343	Appendectomy	519
811/812	Red blood cell disorders	412
Total		39,372

MSDRG	DRG Description	Discharges
885	Psychoses	4,740
870/871/872	Septicemia	3,020
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	1,779
417/418/419	Laparoscopic cholecystectomy	1,340
291/292/293	Heart failure & shock	1,271
193/194/195	Simple pneumonia & Pleurisy	1,182
338-343	Appendectomy	1,070
313	Chest pain	1,061
736-743	Uterine & adnexa procedures	1,030
682/683/684	Renal failure	964
689/690	Urinary tract infections	901
469/470	Major joint replacement/reattachment lower extremity	891
602/603	Cellulitis	832
064/065/066	Intercranial hemorrhage or cerebral infarction	794
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	740
377/378/379	G.I. hemorrhage	674
894-897	Alcohol/drug abuse or dependence	590
308/309/310	Cardiac Arrhythmia	570
100/101	Seizures	558
246-251	Percutaneous cardiovascular procedures	548
811/812	Red blood cell disorders	498
286/287	Circulatory disorders	498
945/946	Rehabilitation	479
190/191/192	Chronic obstructive pulmonary disease	434
456-460	Spinal Fusion	254
Total		26,718

Top DRG Discharges Among Non-Hispanic Black San Bernardino County Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	2,655
870/871/872	Septicemia	910
291/292/293	Heart failure & shock	763
313	Chest pain	616
811/812	Red blood cell disorders	594
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	533
682/683/684	Renal failure	476
193/194/195	Simple pneumonia & Pleurisy	384
469/470	Major joint replacement/reattachment lower extremity	346
190/191/192	Chronic obstructive pulmonary disease	343
064/065/066	Intercranial hemorrhage or cerebral infarction	334
736-743	Uterine & adnexa procedures	323
100/101	Seizures	255
689/690	Urinary tract infections	253
377/378/379	G.I. hemorrhage	251
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	245

308/309/310	Cardiac Arrhythmia	236
286/287	Circulatory disorders	214
602/603	Cellulitis	182
246-251	Percutaneous cardiovascular procedures	171
417/418/419	Laparoscopic cholecystectomy	161
945/946	Rehabilitation	148
894-897	Alcohol/drug abuse or dependence	137
456-460	Spinal Fusion	93
338-343	Appendectomy	75
Total		10,698

Top DRG Discharges Among Non-Hispanic Asian San Bernardino County Residents, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	356
885	Psychoses	273
064/065/066	Intercranial hemorrhage or cerebral infarction	148
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	141
291/292/293	Heart failure & shock	140
736-743	Uterine & adnexa procedures	136
193/194/195	Simple pneumonia & Pleurisy	129
377/378/379	G.I. hemorrhage	126
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	113
682/683/684	Renal failure	104
313	Chest pain	101
246-251	Percutaneous cardiovascular procedures	91
469/470	Major joint replacement/reattachment lower extremity	83
308/309/310	Cardiac Arrhythmia	81
811/812	Red blood cell disorders	75
689/690	Urinary tract infections	66
417/418/419	Laparoscopic cholecystectomy	65
286/287	Circulatory disorders	58
338-343	Appendectomy	52
190/191/192	Chronic obstructive pulmonary disease	51
945/946	Rehabilitation	49
100/101	Seizures	44
602/603	Cellulitis	32
894-897	Alcohol/drug abuse or dependence	27
456-460	Spinal Fusion	19
Total		2,560

Top DRG Discharges Among Non-Hispanic Native-American San Bernardino County Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	32
870/871/872	Septicemia	25
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	17
193/194/195	Simple pneumonia & Pleurisy	13

894-897	Alcohol/drug abuse or dependence	13
291/292/293	Heart failure & shock	12
469/470	Major joint replacement/reattachment lower extremity	11
736-743	Uterine & adnexa procedures	11
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	11
313	Chest pain	10
689/690	Urinary tract infections	9
377/378/379	G.I. hemorrhage	9
190/191/192	Chronic obstructive pulmonary disease	8
682/683/684	Renal failure	7
308/309/310	Cardiac Arrhythmia	7
286/287	Circulatory disorders	7
417/418/419	Laparoscopic cholecystectomy	5
602/603	Cellulitis	5
246-251	Percutaneous cardiovascular procedures	5
338-343	Appendectomy	4
945/946	Rehabilitation	3
456-460	Spinal Fusion	3
064/065/066	Intercranial hemorrhage or cerebral infarction	2
100/101	Seizures	2
811/812	Red blood cell disorders	-
Total		231

Top DRG Discharges Among Non-Hispanic Other Race San Bernardino County Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	573
870/871/872	Septicemia	407
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	265
246-251	Percutaneous cardiovascular procedures	182
313	Chest pain	176
291/292/293	Heart failure & shock	160
417/418/419	Laparoscopic cholecystectomy	159
064/065/066	Intercranial hemorrhage or cerebral infarction	148
193/194/195	Simple pneumonia & Pleurisy	145
469/470	Major joint replacement/reattachment lower extremity	136
736-743	Uterine & adnexa procedures	118
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	113
689/690	Urinary tract infections	111
682/683/684	Renal failure	106
308/309/310	Cardiac Arrhythmia	104
338-343	Appendectomy	96
286/287	Circulatory disorders	92
602/603	Cellulitis	90
190/191/192	Chronic obstructive pulmonary disease	89
894-897	Alcohol/drug abuse or dependence	83
100/101	Seizures	83

377/378/379	G.I. hemorrhage	74
811/812	Red blood cell disorders	64
945/946	Rehabilitation	39
456-460	Spinal Fusion	34
Total		3,647

Top DRG Discharges for San Bernardino County by Age Group

Top DRG Discharges Among San Bernardino County Residents Under 18 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	2,114
202/203	Bronchitis & asthma	1,455
193/194/195	Simple pneumonia & Pleurisy	662
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	527
100/101	Seizures	465
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	332
637/638/639	Diabetes	284
689/690	Urinary tract infections	275
602/603	Cellulitis	221
870/871/872	Septicemia	165
811/812	Red blood cell disorders	158
417/418/419	Laparoscopic cholecystectomy	63
189	Pulmonary edema & respiratory failure	42
377/378/379	G.I. hemorrhage	38
736-743	Uterine & adnexa procedures	35
682/683/684	Renal failure	32
246-251	Percutaneous cardiovascular procedures	23
894-897	Alcohol/drug abuse or dependence	22
945/946	Rehabilitation	21
313	Chest pain	17
291/292/293	Heart failure & shock	14
190/191/192	Chronic obstructive pulmonary disease	13
286/287	Circulatory disorders	13
064/065/066	Intercranial hemorrhage or cerebral infarction	8
469/470	Major joint replacement/reattachment lower extremity	7
Total		7,006

Top DRG Discharges Among San Bernardino County Residents 18-59 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	11,456
870/871/872	Septicemia	3,245
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	2,595
736-743	Uterine & adnexa procedures	2,299

313	Chest pain	2,121
417/418/419	Laparoscopic cholecystectomy	1,866
894-897	Alcohol/drug abuse or dependence	1,706
637/638/639	Diabetes	1,413
291/292/293	Heart failure & shock	1,370
377/378/379	G.I. hemorrhage	1,351
602/603	Cellulitis	1,330
469/470	Major joint replacement/reattachment lower extremity	1,104
682/683/684	Renal failure	1,085
193/194/195	Simple pneumonia & Pleurisy	1,065
689/690	Urinary tract infections	930
811/812	Red blood cell disorders	868
190/191/192	Chronic obstructive pulmonary disease	843
246-251	Percutaneous cardiovascular procedures	796
064/065/066	Intercranial hemorrhage or cerebral infarction	794
100/101	Seizures	754
286/287	Circulatory disorders	700
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	684
202/203	Bronchitis & asthma	544
945/946	Rehabilitation	541
189	Pulmonary edema & respiratory failure	477
Total		41,937

Top DRG Discharges Among San Bernardino County Residents 60 Plus Years, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	5,721
469/470	Major joint replacement/reattachment lower extremity	3,119
291/292/293	Heart failure & shock	2,965
193/194/195	Simple pneumonia & Pleurisy	1,929
064/065/066	Intercranial hemorrhage or cerebral infarction	1,837
682/683/684	Renal failure	1,780
945/946	Rehabilitation	1,719
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	1,717
190/191/192	Chronic obstructive pulmonary disease	1,717
689/690	Urinary tract infections	1,349
246-251	Percutaneous cardiovascular procedures	1,332
313	Chest pain	1,228
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	1,157
885	Psychoses	1,020
189	Pulmonary edema & respiratory failure	962
602/603	Cellulitis	883
286/287	Circulatory disorders	807
377/378/379	G.I. hemorrhage	764
417/418/419	Laparoscopic cholecystectomy	625
637/638/639	Diabetes	623
811/812	Red blood cell disorders	617
100/101	Seizures	342

736-743	Uterine & adnexa procedures	308
894-897	Alcohol/drug abuse or dependence	282
202/203	Bronchitis & asthma	220
Total		35,023

Riverside and San Bernardino County Top 28 Discharges by DRG

MSDRG	DRG Description	Discharge	Percen
		S	t
885	Psychoses	25,267	5.6%
870/871/87 2	Septicemia	16,862	3.8%
469/470	Major joint replacement/reattachment lower extremity	10,421	2.3%
193/194/19 5	Simple pneumonia & Pleurisy	7,564	1.7%
291/292/29 3	Heart failure & shock	7,307	1.6%
313	Chest pain	6,169	1.4%
682/683/68 4	Renal failure	5,930	1.3%
064/065/06 6	Intercranial hemorrhage or cerebral infarction	5,452	1.2%
190/191/19 2	Chronic obstructive pulmonary disease	5,372	1.2%
417/418/41 9	Laparoscopic cholecystectomy	5,309	1.2%
689/690	Urinary tract infections	5,100	1.1%
736-743	Uterine & adnexa procedures	4,987	1.1%
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	4,720	1.1%
602/603	Cellulitis	4,705	1.0%
246-251	Percutaneous cardiovascular procedures	4,681	1.0%
377/378/37 9	G.I. hemorrhage	4,651	1.0%
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	4,446	1.0%
308/309/31 0	Cardiac arrhythmia & conduction disorders	4,428	1.0%
894-897	Alcohol/drug abuse or dependence	4,390	1.0%
338-343	Appendectomy	4,099	0.9%
945/946	Rehabilitation	4,013	0.9%
202/203	Bronchitis & asthma	3,805	0.8%
637/638/63 9	Diabetes	3,563	0.8%
811/812	Red blood cell disorders	3,260	0.7%
100/101	Seizures	3,129	0.7%
286/287	Circulatory disorders	3,076	0.7%
189	Pulmonary edema & respiratory failure	2,493	0.6%
456-460	Spinal fusion	2,374	0.5%
TOTAL		449,464	

COUNTY
ISCHARGES

Hospital specific top DRGs are provided in the hospital specific analysis section.

Maternal and Child Health

Maternal and child health outcomes such as birth weight, adequacy of prenatal care and infant mortality rates provide critical information on the health of a population. Improving such outcomes has a reciprocal effect on health outcomes later in life.

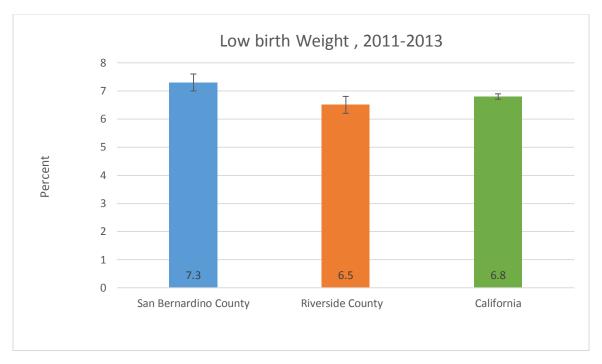
Key Findings

- Among all births from 2011 to 2013, it was observed that 7.3% of births were low birth weight for San Bernardino County compared to 6.5% in Riverside County; a significant difference.
- Low birth weight in San Bernardino County was 12% higher compared to Riverside County and 7.4 higher compared to California.
- Approximately 75% of pregnant women receive adequate prenatal care during their pregnancy in San Bernardino, which is significantly lower than Riverside County (81.8%) and California State (79.2%).
- Riverside County has a significantly higher proportion of pregnant women receiving adequate prenatal care during their pregnancy compared to California.
- The proportion of women receiving adequate prenatal care in San Bernardino County is eight percent lower compared to Riverside County and 4.5% lower compared to California.
- Approximately one in three pregnancies in San Bernardino County are in women 15-19
 years of age, whereas in Riverside County and in the State of California it is
 approximately one in four pregnancies.
- The proportion of births to women 15-19 years of age in San Bernardino County is 25% higher compared to Riverside County and California.
- The proportion of breastfeeding initiation for San Bernardino County was 4.5% lower compared to Riverside County and five percent lower compared to California.
- Overall the infant mortality rate from 2010 to 2012 for all races was significantly higher in San Bernardino County (6.0%) compared to California (4.8%). The rate was 25% higher in San Bernardino County compared to California.

NATALITY								
	San Bernardino		Riverside			California		
	Percent 95% Confid		lence Limits	Percent	95% Confidence Limits		Percent	
Natality Indicator 2011-2013	Percent	Lower CI	Upper Cl	reiteilt	Lower CI	Upper CI	reitent	
LOW BIRTHWEIGHT INFANTS	7.3	7.0	7.6	6.5	6.2	6.8	6.8	
FIRST TRIMESTER PRENATAL CARE	83.4	82.3	84.4	84.5	83.5	85.5	83.6	
ADEQUATE/ADEQUATE PLUS PRENATAL CARE	75.8	74.8	76.8	81.0	80.0	82.0	79.2	
BIRTHS TO MOTHERS AGED 15-19	31.8	30.6	33.0	25.5	24.5	26.5	25.5	
BREASTFEEDING INITIATION	87.5	86.3	88.6	91.6	90.4	92.8	92.3	

Low Birth Weight

Low birth weight is defined as<2,500 grams (5.5 pounds). About 1 in every 13 infants born in the United States is born with low birth weight (approximately 48 8%) and 67% of low birth weight infants are born prematurely. Infants who are low birth weight have a 25% chance of dying before the age of one. More than three quarters of infant deaths are caused by babies being born too small or too early. Low birth weight infants have higher rates of subnormal growth and of adverse health conditions. They are also at an increased risk of serious health problems as newborns, of developmental problems in which they can experience delayed motor and social development, having a learning disability of, and dying within their first year of life.



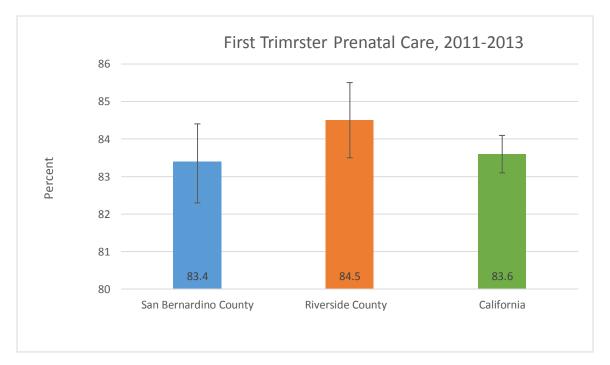
Data Source: California Department of Health, Birth Certificates, 2011-2013

Among all births from 2011 to 2013, it was observed that 7.3% of births were low birth weight for San Bernardino County compared to 6.5% in Riverside County; a significant difference. The proportion was also significantly higher compared to the State of California. Low birth weight in San Bernardino County was 12% higher compared to Riverside County and 7.4 higher compared to California. There was no difference in the proportion of low birth weight between Riverside County and California.

First Trimester Prenatal Care

Prenatal care refers to the medical attention received by women before and during their pregnancy, specifically addressing the mother's well-being during her pregnancy and caring for the development of her baby. The goal of prenatal care is to detect potential problems early on in the pregnancy and to prevent potential complications. Early prenatal care is a significant component in ensuring a good pregnancy outcome. Although it is recommended for women to begin prenatal care during the first trimester, some women seek prenatal care at a later stage

in their pregnancy or not at all. Women who receive late or no prenatal care are at risk for having undetected complications of pregnancy that can result in severe maternal morbidity and mortality and in serious consequences to the unborn infant including low birth weight, premature birth, morbidity, and mortality.

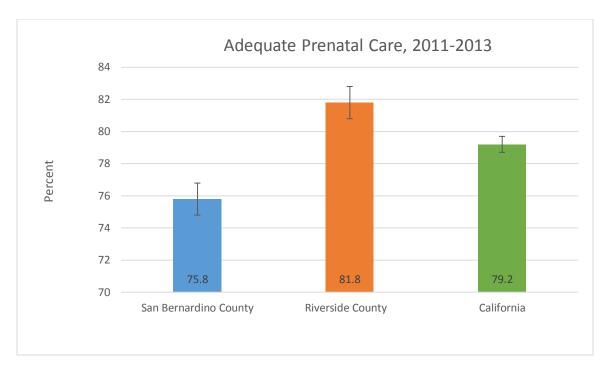


Data Source: California Department of Health, Birth Certificates, 2011-2013

The proportion of women receiving prenatal care in their first trimester was approximately 85% for both San Bernardino and Riverside Counties. This was consistent with the State of California. There was no significant difference when the proportion of low birth weight for California was compared to San Bernardino and Riverside Counties.

Adequate Prenatal Care

Adequate prenatal care calculations are based on the Adequacy of Prenatal Care Utilization Index (APNCU), which measures the utilization of prenatal care on two dimensions. The first dimension, adequacy of initiation of prenatal care, measures the timing of initiation using the month prenatal care began reported on the birth certificate. The second dimension, adequacy of received services, is measured by taking the ratio of the actual number of visits reported on the birth certificate to the expected number of visits. The expected number of visits is based on the American College of Obstetrics and Gynecology prenatal care visitations standards for uncomplicated pregnancies, and is adjusted for the gestational age at initiation of care and for the gestational age at delivery. The two dimensions are combined into a single summary index, and grouped into four categories: Adequate Plus, Adequate, Intermediate, and Inadequate. For this report, the percent of infants whose mothers received Adequate and Adequate Plus prenatal care are combined into one category, Adequate/Adequate plus prenatal care. Adequate plus prenatal care is defined as prenatal care beginning by the 4th month of pregnancy and the expecting mother received 110% or more of the recommended visits. Adequate prenatal care is defined as prenatal care beginning by the 4th month of pregnancy and the expecting mother receives 80-109% of the recommended visits.

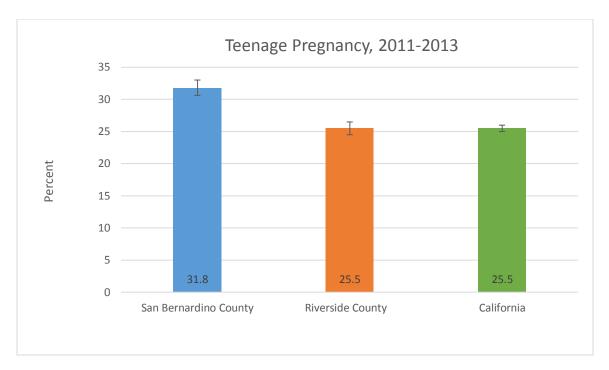


Data Source: California Department of Health, Birth Certificates, 2011-2013

Approximately 75% of pregnant women receive adequate prenatal care during their pregnancy in San Bernardino, which is significantly lower than Riverside County (81.8%) and California State (79.2%). Riverside County has a significantly higher proportion of pregnant women receiving adequate prenatal care during their pregnancy compared to California. The proportion of women receiving adequate prenatal care in San Bernardino County is eight percent lower compared to Riverside County and 4.5% lower compared to California. Riverside's proportion is 3.3% higher compared to California.

Teenage Pregnancy

Teen pregnancy is an important issue for several reasons. First, nearly all teen pregnancies are unplanned. In addition, teen pregnancy is closely linked to a host of other critical social issues — poverty and income, overall child well-being, out-of-wedlock births, responsible fatherhood, health issues, education, child welfare, and other risky behavior. There are also substantial public costs associated with adolescent childbearing. Moreover, women who become pregnant during their teens are at increased risk for medical complications, such as premature labor, and social consequences.

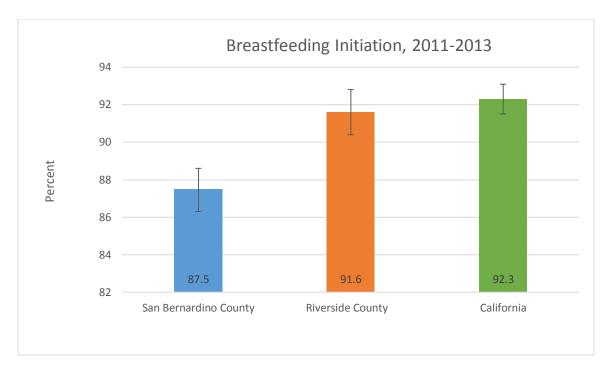


Data Source: California Department of Health, Birth Certificates, 2011-2013

Approximately one in three pregnancies in San Bernardino County are in women 15-19 years of age, whereas in Riverside County and in the State of California it is approximately one in four pregnancies. The percent in San Bernardino County is significantly higher compared to Riverside County and California. There is no difference in the proportion of births to women 15-19 years of age between Riverside County and California. The proportion of births to women 15-19 years of age in San Bernardino County is 25% higher compared to Riverside County and California.

Breastfeeding Initiation

Breastfeeding an infant provides benefits to both the mother and the infant. Breastfed infants have fewer ear infections, less diarrhea and constipation, and fewer illnesses. Breastfeeding also helps protect against allergies, asthma, some childhood cancers, and diabetes. For the mother, breastfeeding returns the uterus to its normal size more quickly than if a mother does not breastfeed, it reduces the risk of some types of ovarian and breast cancer, and provides an opportunity for rest and bonding with their infant.

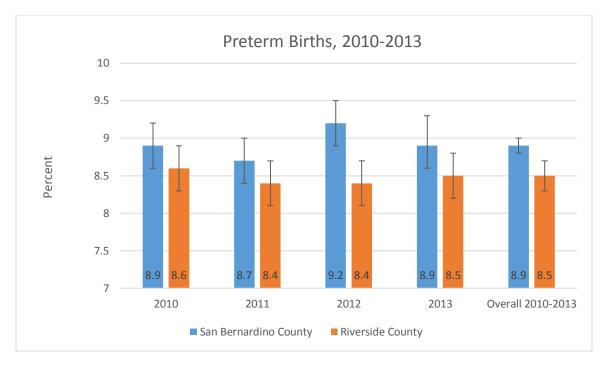


Data Source: California Department of Health, Birth Certificates, 2011-2013

The proportion of women who initiated breastfeeding after having a baby was 87.5% for San Bernardino County. This was significantly lower compared to Riverside County (91.6%) and the State of California (92.3%). When Riverside County was compared to California, the proportion was similar and no difference was observed. The proportion for San Bernardino County was 4.5% lower compared to Riverside County and five percent lower compared to California.

Preterm Births

Preterm birth is defined as childbirth occurring earlier than 37 completed weeks of pregnancy. Infants born prematurely have an increased risk of health complications, including infant mortality, and are at a greater risk for developing long-term disabilities and conditions; such as cerebral palsy, chronic lung disease, gastrointestinal problems, and vision and hearing loss. The risk of adverse outcomes is directly related to the length of a woman's pregnancy: the shorter the term of the pregnancy, the greater the risk the newborn has for complications and disabilities, ranging from mild to severe.



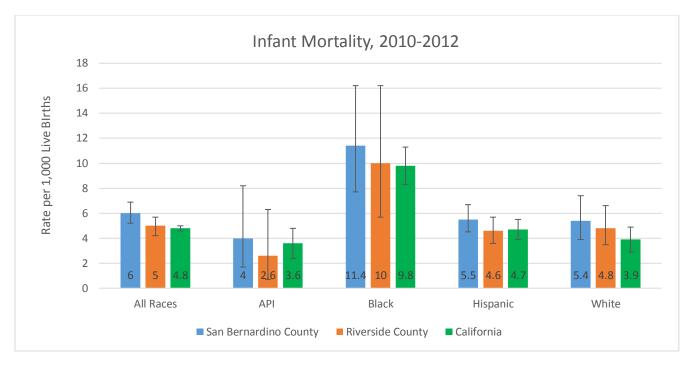
Data Source: California Department of Health, Birth Certificates, 2010-2013

The proportion of preterm births remained stable from 2010 to 2013 for both San Bernardino County and Riverside County. The difference in the proportion of preterm births between the counties was similar with the exception of 2012, where the proportion for San Bernardino County was significantly higher. Overall from 2010 to 2013 (aggregate), the proportion of preterm births was significantly higher in San Bernardino County (8.9%) compared to Riverside County (8.5%). The proportion was approximately five percent higher in San Bernardino County compared to Riverside County.

Infant Mortality

Infant mortality is a useful indicator for the level of health in a community. It is defined as the number of deaths of infants younger than one year of age per 1,000 live births for a given period of time. Infant mortality is related to the underlying health of the mother, public health practices, socioeconomic conditions, and the availability and use of appropriate health care for infants and pregnant women. Two-thirds of infant deaths occur in the first month after birth and are primarily due to health problems of the infant or the pregnancy, such as preterm delivery or birth defects. Infant deaths occurring after the first month are influenced greatly by social or environmental factors, such as exposure to cigarette smoke or problems with access to health care.

INFANT MORTALITY							
Infant Mortality Indicator 2010-2012 per 1,00 Live Births	San Bernardino			Riverside			California
	Infant Death Rate	95% Confidence Limits		Infant Darth Data	95% Confidence Limits		Infant Darth Data
		Lower CI	Upper CI	Infant Death Rate	Lower CI	Upper CI	Infant Death Rate
INFANT MORTALITY: ALL RACES	6.0	5.2	6.9	5.0	4.2	5.7	4.8
INFANT MORTALITY: ASIAN/PI	4.0	1.7	8.2	2.6	0.7	6.3	3.6
INFANT MORTALITY: BLACK	11.4	7.7	16.2	10.0	5.7	16.2	9.8
INFANT MORTALITY: HISPANIC	5.5	4.5	6.7	4.6	3.6	5.7	4.7
INFANT MORTALITY: WHITE	5.4	3.9	7.4	4.8	3.5	6.6	3.9



Data Source: Birth Certificates, California Department of Health, 2010-2012

Overall the infant mortality rate from 2010 to 2012 for all races was significantly higher in San Bernardino County (6.0%) compared to California (4.8%). The rate was 25% higher in San Bernardino County compared to California. There was no difference in the overall infant mortality rate between San Bernardino County and Riverside County, and between Riverside County and California. Infant mortality rate was similar within each race/ethnic group for San Bernardino County, Riverside County and California. Likewise, there was no difference in the infant mortality rate when white females were compared to each racial/ethnic group within San Bernardino County, Riverside County and California, and when the counties were compared to one another and to California.

Mortality

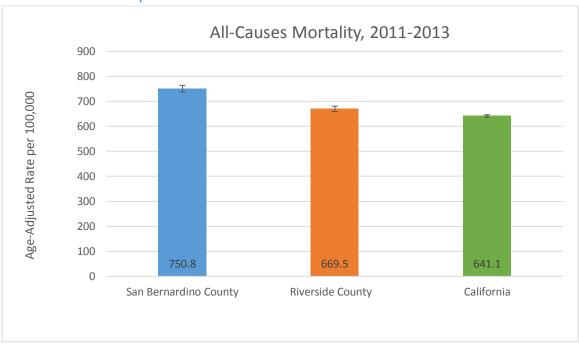
Tracking death rates may identify groups that are at an increased risk for premature death. The leading cause of death for infants is perinatal conditions that make survival difficult, such as preterm birth or congenital defects. Children and young adults are more likely to die from intentional or unintentional injury. Leading causes of death among older adults are more likely to be related to physical health conditions.

Key Findings

- The all-cause mortality rate for San Bernardino County was 12% higher than Riverside County and 17% higher than California. Riverside's all-cause mortality rate was 4.4% higher than California.
- The rate for all cancer mortality was significantly higher in San Bernardino County (165/100,000) compared to Riverside County (153.5/100,000) and California (151/100,000). The all-cancer mortality rate for San Bernardino County was 7.5% higher than Riverside County and 9.3% higher than California.
- The mortality rate due to colorectal cancer was significantly higher in San Bernardino County compared to California with the rate being 20% higher for San Bernardino County compared to California.
- The mortality rate due to lung cancer was significantly higher in San Bernardino County compared to California with the rate being approximately 11% higher for San Bernardino County compared to California.
- The mortality rate due to diabetes was significantly higher for San Bernardino County (33/100,000) compared to Riverside County (19.4/100,000) and California (20.8/100,000). The diabetes mortality rate for San Bernardino County was 70% higher than Riverside County and approximately 60% higher than California.
- The mortality rate due to coronary heart disease was significantly higher for San Bernardino County (120.9/100,000) and Riverside County (122.9/100,000) compared to California (103.8/100,000). Mortality due to coronary heart disease was 16.5% higher in San Bernardino County compared to California and 18.4% higher in Riverside County compared to California.
- Mortality due to influenza/pneumonia was significantly lower in San Bernardino and Riverside Counties compared to the State of California. The mortality rate was 13.5% lower in San Bernardino County compared to California and 22.7% lower in Riverside County compared to California.
- Mortality due to chronic lower respiratory disease was significantly higher in San Bernardino County and Riverside County compared to the State of California. The mortality rate was 53.2% higher in San Bernardino County compared to California and was approximately 30% higher in Riverside County compared to California. The mortality rate was 18.5% higher in San Bernardino County compared to Riverside County.

- The mortality rate due to chronic liver disease/cirrhosis was significantly higher for San Bernardino County (13.9/100,000) compared to California (11.7 /100,000). Mortality due to chronic liver disease/cirrhosis was 32.6% higher in San Bernardino County compared to California.
- Mortality due to accidents (unintentional injuries) was significantly higher in Riverside County (31.6/100,000) compared to California (27.9/100,000) and San Bernardino County ((25/100,000). The mortality rate due to accidents was 13.3% higher in Riverside County compared to California and 26.4% higher compared to San Bernardino County.
- San Bernardino had a significantly lower mortality rate due to accidents compared to California. The rate was 10.4% lower in San Bernardino County compared to California.
- Mortality due to motor vehicle traffic accidents was significantly higher in San Bernardino County (10/100,000) and Riverside County (9.6/100,000) compared to the State of California (7.6/100,000). The mortality rate was 36.8% higher in San Bernardino County compared to California and was 26.3% higher in Riverside County compared to California.
- The mortality rate due to homicide is significantly higher in San Bernardino County (6.4/100,000) compared to Riverside County (4.4/100,000) and California (5.1/100,000). The rate in San Bernardino County is 36.8% higher compared to California and 45.5% higher compared to Riverside County.
- The mortality rate identified as drug-induced was significantly higher in Riverside County (13.3/100,000) compared to San Bernardino County (9.5/100,000) and California (11.1/100,000). The mortality rate in Riverside County was 40% higher compared to San Bernardino County and approximately 20% higher compared to California.

All-Causes Mortality

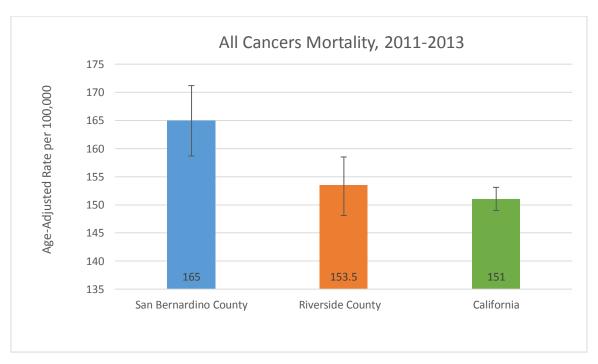


Data Source: Death Certificates, California Department of Health, 2010-2013

The rate for all-cause mortality was significantly higher in San Bernardino County (750.8/100,000) compared to Riverside County (669.5/100,000) and California (641.1/100,000). Likewise, the all-cause mortality rate was significantly higher for Riverside County compared to California. The all-cause mortality rate for San Bernardino County was 12% higher than Riverside County and 17% higher than California. Riverside's all-cause mortality rate was 4.4% higher than California.

All Cancers Mortality

A cancer mortality rate is the number of deaths, with cancer as the underlying cause of death, occurring in a specified population during a year. Cancer mortality is usually expressed as the number of deaths due to cancer per 100,000 population. The impact that cancer has on the lives of patients, their families, and the health care system cannot be overstated. The long-term emotional, physical, and psychological strain on individuals diagnosed with cancer—and their families—is profound. In addition, the cost of cancer also places a heavy burden on the health care system.

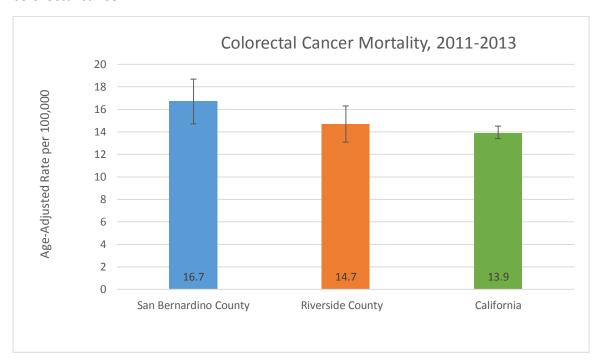


Data Source: Death Certificates, California Department of Health, 2010-2013

The rate for all cancer mortality was significantly higher in San Bernardino County (165/100,000) compared to Riverside County (153.5/100,000) and California (151/100,000). There was no difference between Riverside County and the State of California. The all-cancer mortality rate for San Bernardino County was 7.5% higher than Riverside County and 9.3% higher than California.

Colorectal Cancer Mortality

Of cancers that affect both men and women, colorectal cancer is the second leading cause of cancer-related deaths in the United States and the third most common cancer in men and in women. Living a healthy lifestyle can help reduce the risk of colorectal cancer. Regular screening is also important and can lead to early detection which is critical in treatment of colorectal cancer.

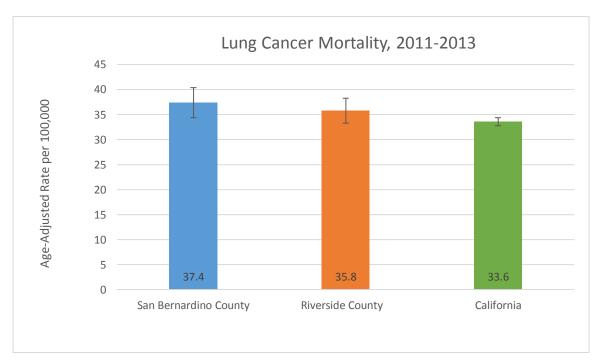


Data Source: Death Certificates, California Department of Health, 2010-2013

There was no difference in the mortality rate due to colorectal cancer between San Bernardino County and Riverside County, however the rate was significantly higher in San Bernardino County compared to California with the rate being 20% higher for San Bernardino County compared to California. There was no difference in the mortality rate due to colorectal cancer between Riverside County and California.

Lung Cancer Mortality

Lung cancer is the leading cause of cancer deaths in the United States, among both men and women. People who smoke have the greatest risk of lung cancer. The risk of lung cancer increases with the length of time and number of cigarettes you've smoked. If you quit smoking, even after smoking for many years, you can significantly reduce your chances of developing lung cancer.

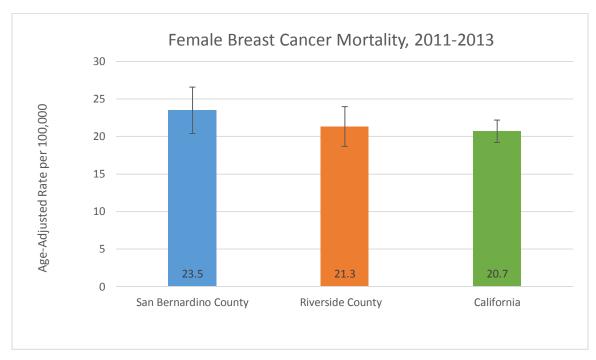


Data Source: Death Certificates, California Department of Health, 2010-2013

There was no difference in the mortality rate due to lung cancer between San Bernardino County and Riverside County, however the rate was significantly higher in San Bernardino County compared to California with the rate being approximately 11% higher for San Bernardino County compared to California. There was no difference in the mortality rate due to lung cancer between Riverside County and California.

Female Breast Cancer Mortality

In the U.S., breast cancer is the second most common cancer in women after skin cancer regardless of race or ethnicity. It is the most common cause of death from cancer among Hispanic women and the second most common cause of death from cancer among white, black, Asian/Pacific Islander, and American Indian/Alaska Native women. It can occur in both men and women, but it is very rare in men. Each year there are about 2,300 new cases of breast cancer in men and about 230,000 new cases in women.

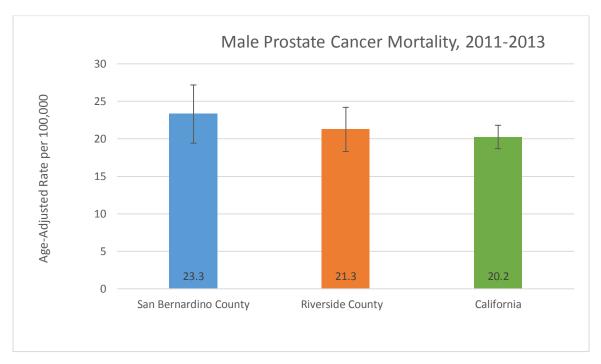


Data Source: Death Certificates, California Department of Health, 2010-2013

The rate of mortality for women due to breast cancer was similar between San Bernardino County, Riverside County, and California. There was no significant difference between the three populations.

Prostate Cancer Mortality

Aside from skin cancer, prostate cancer is the most common cancer among men in the United States. It is also one of the leading causes of cancer death among men of all races and Hispanic origin populations. About 1 in 7 men will be diagnosed with prostate cancer during his lifetime. Prostate cancer develops mainly in older men. About 6 cases in 10 are diagnosed in men aged 65 or older, and it is rare before age 40. The average age at the time of diagnosis is about 66. Also, prostate cancer is the second leading cause of cancer death in American men, behind only lung cancer. About 1 in 39 men will die of prostate cancer.

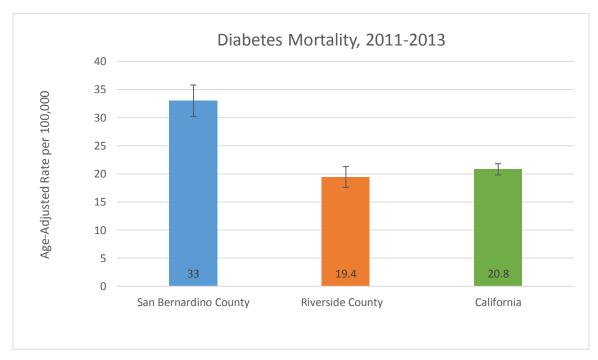


Data Source: Death Certificates, California Department of Health, 2010-2013

The rate of mortality for men due to prostate cancer was similar among San Bernardino County, Riverside County, and California. There was no significant difference between the three populations.

Diabetes Mortality

Diabetes and conditions related to diabetes are among the leading causes of death, illness and disability in the United States and diabetes is the seventh leading cause of death in the Unites States. Common complications of diabetes, such as heart disease, stroke and kidney disease, are also leading causes of death. Diabetes is also the leading cause of new blindness and amputation.

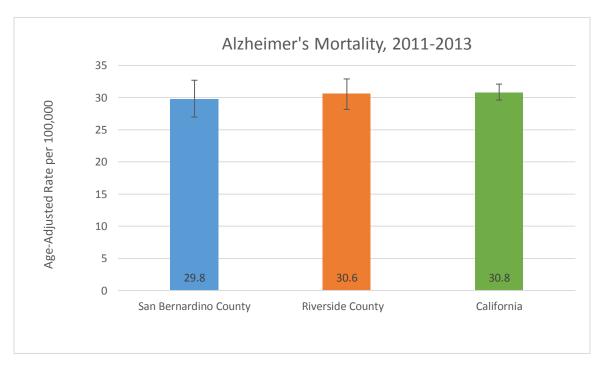


Data Source: Death Certificates, California Department of Health, 2010-2013

The mortality rate due to diabetes was significantly higher for San Bernardino County (33/100,000) compared to Riverside County (19.4/100,000) and California (20.8/100,000). There was no difference in the diabetes mortality rate between Riverside County and California. The diabetes mortality rate for San Bernardino County was 70% higher than Riverside County and approximately 60% higher than California.

Alzheimer's Mortality

As the population of the United States ages, Alzheimer's is becoming a more common cause of death. Although deaths from other major causes have decreased significantly, official records indicate that deaths from Alzheimer's disease have increased significantly. Between 2000 and 2013, deaths attributed to Alzheimer's disease increased 71 percent, while those attributed to the number one cause of death—heart disease—decreased 14 percent. Alzheimer's is the only disease among the top 10 causes of death in America that cannot be prevented, cured or even slowed.

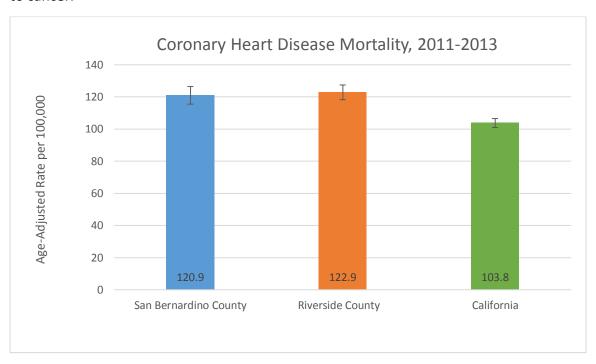


Data Source: Death Certificates, California Department of Health, 2010-2013

The rate of mortality due to Alzheimer's was similar among San Bernardino County, Riverside County, and California. There was no significant difference between the three populations.

Coronary Heart Disease Mortality

Heart disease is the leading cause of death for both men and women, and for people of most ethnicities in the United States, including African Americans, Hispanics, and whites. For American Indians or Alaska Natives and Asians or Pacific Islanders, heart disease is second only to cancer.

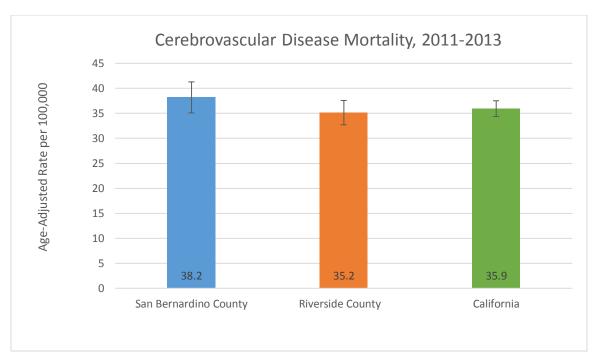


Data Source: Death Certificates, California Department of Health, 2010-2013

The mortality rate due to coronary heart disease was significantly higher for San Bernardino County (120.9/100,000) and Riverside County (122.9/100,000) compared to California (103.8/100,000). Mortality due to coronary heart disease was 16.5% higher in San Bernardino County compared to California and 18.4% higher in Riverside County compared to California. There was no difference in the mortality rate due to coronary heart disease between San Bernardino County and Riverside County.

Cerebrovascular Disease Mortality

Stroke is a disease that affects the arteries leading to and within the brain. It is the fifth leading cause of death and a leading cause of disability in the United States. About 40 percent of stroke deaths occur in males, and 60 percent in females. African-Americans have nearly twice the risk for a first-ever stroke than Caucasians and a much higher death rate from stroke.

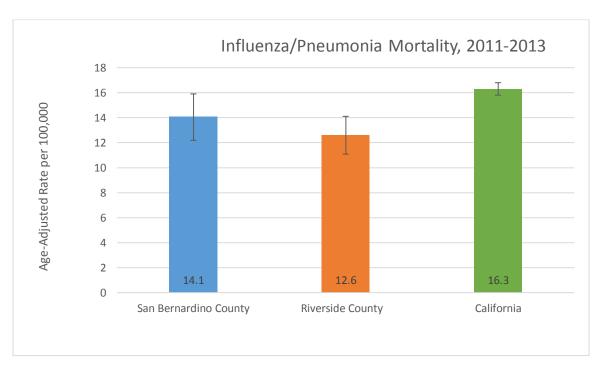


Data Source: Death Certificates, California Department of Health, 2010-2013

The mortality rate due to cerebrovascular disease was similar between San Bernardino County, Riverside County, and California. There was no significant difference between the three populations.

Influenza/Pneumonia Mortality

The flu is a contagious respiratory illness caused by influenza viruses that infect the nose, throat, and lungs. It can cause mild to severe illness, and at times can lead to death. Most people who get the flu will have mild illness, will not need medical care or antiviral drugs, and will recover in less than two weeks. Some people, however, are more likely to get flu complications that result in being hospitalized and occasionally result in death. Pneumonia, bronchitis, sinus infections and ear infections are examples of flu-related complications. The flu also can make chronic health problems worse. For example, people with asthma may experience asthma attacks while they have the flu, and people with chronic congestive heart failure may experience a worsening of this condition that is triggered by the flu. Moreover, the flu is more dangerous than the common cold for children. Each year flu places a large burden on the health and well-being of children and their families. Also, it has been recognized for many years that people 65 years and older are at greater risk of serious complications from the flu compared with young, healthy adults because human immune defenses become weaker with age. While flu seasons can vary in severity, during most seasons, people 65 years and older bear the greatest burden of severe flu disease.

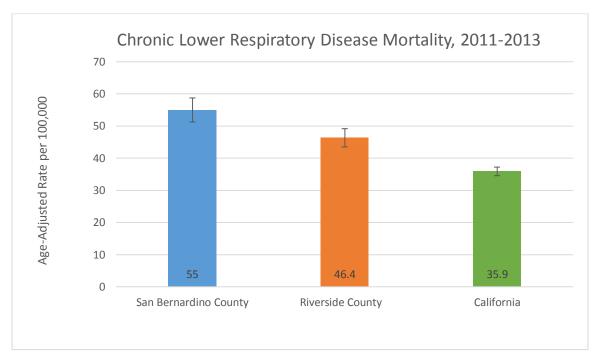


Data Source: Death Certificates, California Department of Health, 2010-2013

Mortality due to influenza/pneumonia was significantly lower in San Bernardino and Riverside Counties compared to the State of California. The mortality rate was 13.5% lower in San Bernardino County compared to California and 22.7% lower in Riverside County compared to California. There was no difference in the mortality rate between San Bernardino County and Riverside County.

Chronic Lower Respiratory Disease Mortality

Chronic lower respiratory diseases are diseases that affect the lungs. The most deadly of these is chronic obstructive pulmonary disease (COPD), which makes it hard to breathe. COPD includes two main illnesses; emphysema and chronic bronchitis. Cigarette smoking is the main cause of COPD. If you smoke, you are 12 times as likely to die of COPD as men who have never smoked. Emphysema and chronic bronchitis also are strongly associated with lung cancer.

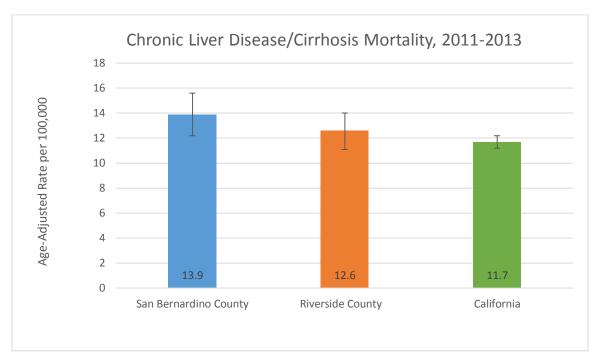


Data Source: Death Certificates, California Department of Health, 2010-2013

Mortality due to chronic lower respiratory disease was significantly higher in San Bernardino County and Riverside County compared to the State of California. The mortality rate was 53.2% higher in San Bernardino County compared to California and was approximately 30% higher in Riverside County compared to California. The mortality rate was 18.5% higher in San Bernardino County compared to Riverside County.

Chronic Liver Disease/Cirrhosis Mortality

The liver is an organ about the size of a football that sits just under your rib cage on the right side of your abdomen. The liver is essential for digesting food and ridding your body of toxic substances. Liver disease can be inherited (genetic) or caused by a variety of factors that damage the liver, such as viruses and alcohol use. Obesity is also associated with liver damage. Over time, damage to the liver results in scarring (cirrhosis), this can lead to liver failure, a lifethreatening condition.

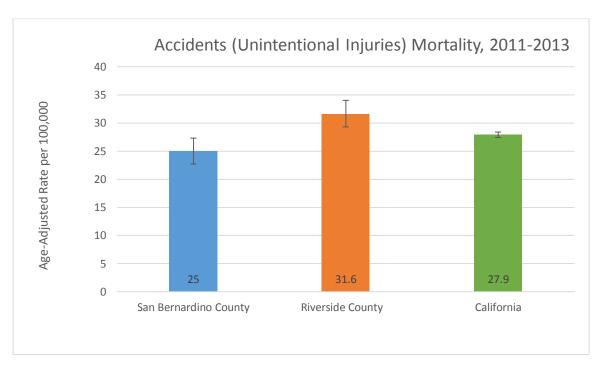


Data Source: Death Certificates, California Department of Health, 2010-2013

The mortality rate due to chronic liver disease/cirrhosis was significantly higher for San Bernardino County (13.9/100,000) compared to California (11.7 /100,000), however there was no difference between Riverside County (12.6/100,000) and California. Mortality due to chronic liver disease/cirrhosis was 32.6% higher in San Bernardino County compared to California. There was no difference in the mortality rate due to chronic liver disease/cirrhosis between San Bernardino County and Riverside County.

Accidents (Unintentional Injuries) Mortality

Accidents, also called unintentional injuries, are the number three cause of death in the United States. They account for 1 of every 4 people treated in an emergency department. Death can result from many types of accidents, such as car accidents, drug overdose, falls, drownings, poisonings, fires and burns. Men account for more unintentional injury deaths than females. In many cases, accidental injury can be prevented.

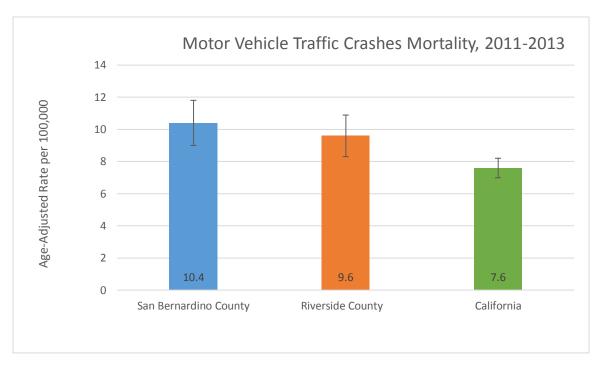


Data Source: Death Certificates, California Department of Health, 2010-2013

Mortality due to accidents (unintentional injuries) was significantly higher in Riverside County (31.6/100,000) compared to California (27.9/100,000) and San Bernardino County ((25/100,000). The mortality rate due to accidents was 13.3% higher in Riverside County compared to California and 26.4% higher compared to San Bernardino County. San Bernardino had a significantly lower mortality rate due to accidents compared to California. The rate was 10.4% lower in San Bernardino County compared to California.

Motor Vehicle Traffic Crashes Mortality

Over 30,000 people are killed in motor vehicle crashes each year in the United States and motor vehicle crashes are a top 10 cause of death among people aged 1-54. More than 2.5 million Americans went to the emergency department (ED) and nearly 200,000 were then hospitalized for crash injuries in 2012. On average, each crash-related ED visit costs about \$3,300 and each hospitalization costs about \$57,000 over a person's lifetime.



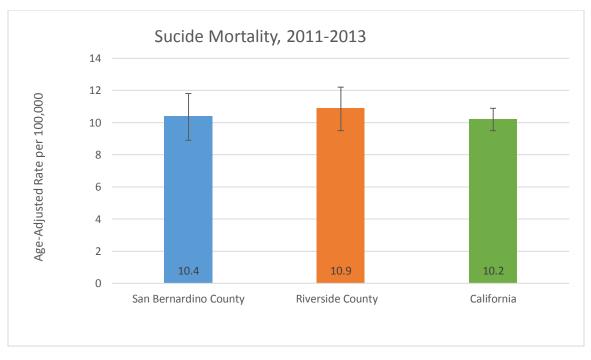
Data Source: Death Certificates, California Department of Health, 2010-2013

Mortality due to motor vehicle traffic accidents was significantly higher in San Bernardino County (10/100,000) and Riverside County (9.6/100,000) compared to the State of California (7.6/100,000). The mortality rate was 36.8% higher in San Bernardino County compared to California and was 26.3% higher in Riverside County compared to California. There was no difference in the mortality rate due to motor vehicle traffic accidents between San Bernardino County and Riverside County.

Suicide Mortality

Suicide is the 10th leading cause of death in the United Sates. Although more women than men attempt suicide, men are almost four times more likely than women to die by suicide. One reason is that men are more likely to use deadlier means, such as firearms, when they set out to take their own lives. Moreover, the highest suicide rates in the United States are among whites and American Indian/Alaska Natives. The reasons some people want to take their own lives are complex. We do know that many people who die by suicide have a mental illness, usually depression, a substance use problem, or both. Treating mental illness and substance abuse can lower the risk of suicide. Men get treatment less often than women do. Many factors can work together to lead a person to suicide. Some factors that may increase a person's risk of suicide include:

- **Age.** Suicide rates for men are highest among those 75 and older. Also, older men are much more likely to commit suicide than older women.
- A major loss. These can range from losing a loved one, like your wife, to losing your freedom, like being sent to prison.
- **Social isolation.** Those who kill themselves often live alone and have little contact with others.
- Family history of suicide. A personal history of attempted suicide is a risk factor too.
- Family violence. This includes being a victim of physical or sexual abuse.
- **Unemployment.** Research shows that suicide rates increase during times of wide unemployment, especially among working-age men.
- Being around someone else who attempts suicide. Having a friend or family member who dies by suicide can increase a person's risk.

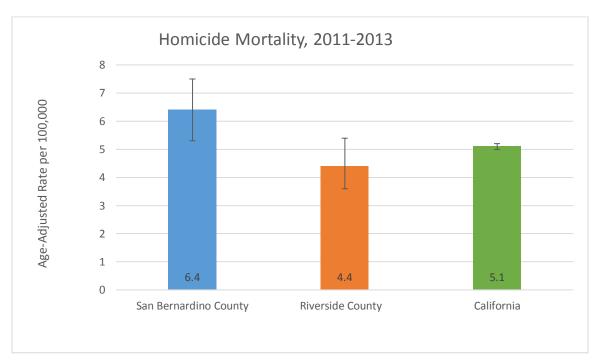


Data Source: Death Certificates, California Department of Health, 2010-2013

The mortality rate due to suicide was similar between San Bernardino County, Riverside County, and California. There was no significant difference between the three populations.

Homicide Mortality

Despite the low overall mortality as compared with accidents or suicides, homicides remain a leading cause of death in certain segments of the population. In 2013, homicides were the 14th leading cause of death. Almost 90 percent of homicide victims among 18- to 24-year-olds are males. Homicide is the fourth leading cause of death for black males. Males are almost four times more likely than females to be murdered.

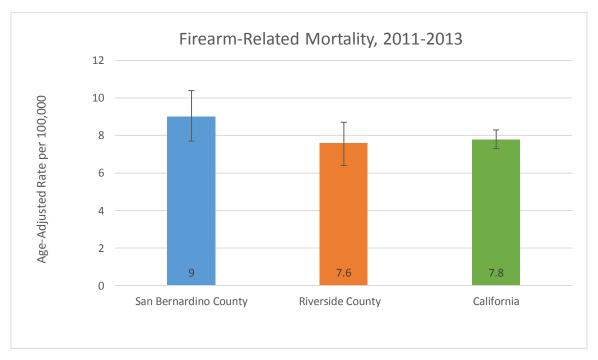


Data Source: Death Certificates, California Department of Health, 2010-2013

The mortality rate due to homicide is significantly higher in San Bernardino County (6.4/100,000) compared to Riverside County (4.4/100,000) and California (5.1/100,000). The rate in San Bernardino County is 36.8% higher compared to California and 45.5% higher compared to Riverside County. There is no difference in the mortality rate due to homicide between Riverside County and California.

Firearm-Related Mortality

Gun violence in the United States results in thousands of deaths and injuries annually. According to the Centers for Disease Control and Prevention, in 2013, firearms were used in 84,258 nonfatal injuries (26.65 per 100,000 U.S. citizens) and 11,208 deaths by homicide (3.5 per 100,000), 21,175 by suicide with a firearm, 505 deaths due to accidental discharge of a firearm, and 281 deaths due to firearms-use with "undetermined intent" for a total of 33,169 deaths related to firearms (excluding firearm deaths due to legal intervention). 1.3% of all deaths in the country were related to firearms. Gun violence is most common in poor urban areas and frequently associated with gang violence, often involving male juveniles or young adult males.

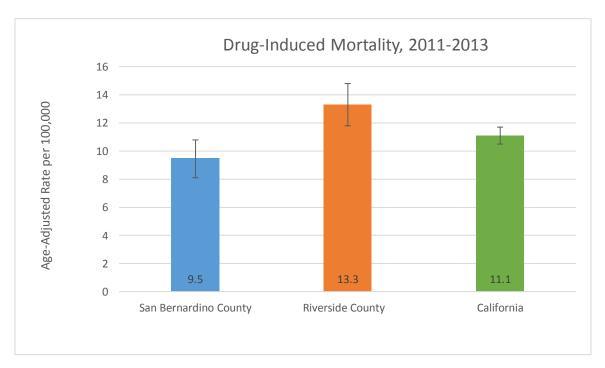


Data Source: Death Certificates, California Department of Health, 2010-2013

The mortality rate due to firearms was similar between San Bernardino County, Riverside County, and California. There was no significant difference between the three populations.

Drug-Induced Mortality

Drug-induced deaths include all deaths for which drugs is the underlying cause, including those attributable to acute poisoning by drugs (drug overdoses) and deaths from medical conditions resulting from chronic drug use. A drug includes illicit or street drugs (e.g., heroin and cocaine), as well as legal prescription and over-the-counter drugs; alcohol is not included. Deaths from drug overdose have increased sharply in the past decade. This increase has been associated with overdoses of prescription opioid pain relievers, which have more than tripled in the past 20 years. From 2012 to 2013, drug induced deaths have increased by 6%. Deaths involving heroin had the largest upsurge overall, with a 39% increase, while deaths from cocaine increased by 12%. Most drug-induced deaths are unintentional drug poisoning deaths, with suicidal drug poisoning and drug poisoning of undetermined intent comprising the majority of the remainder.



Data Source: Death Certificates, California Department of Health, 2010-2013

The mortality rate identified as drug-induced was significantly higher in Riverside County (13.3/100,000) compared to San Bernardino County (9.5/100,000) and California (11.1/100,000). The mortality rate in Riverside County was 40% higher compared to San Bernardino County and approximately 20% higher compared to California. There was no difference is drug-induced mortalities between San Bernardino County and California.

Morbidity

Chronic and infectious diseases cause physical and psychological stress. This can reduce one's quality of life. The impact that chronic and acute illness has on a population can be significant and reducing the disease burden can increase the quality of life and prosperity of a community.

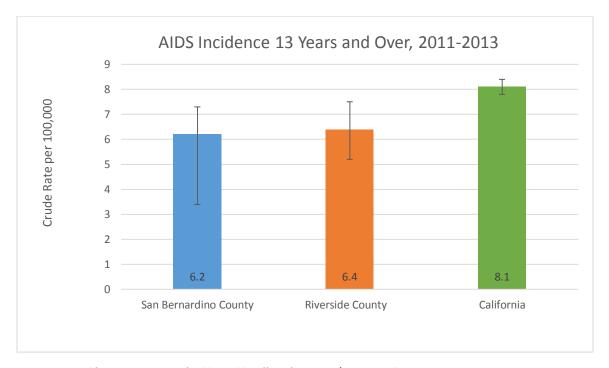
Key Findings

- The AIDS incidence was 23.5% less in San Bernardino County compared to California and 21% less in Riverside County compared to California.
- The chlamydia incidence was significantly higher in San Bernardino County (543.7/100,000) compared to Riverside County (397.9/100,000) and the State of California (442.6/100,000). The incidence rate for chlamydia was 36.6% higher in San Bernardino County compared to Riverside County and 22.8% higher than California.
- Gonorrhea incidence among men was significantly lower in San Bernardino County (169.2/100,000) and Riverside County (108.2/100,000) compared to the State of California (213.1/100,000). The incidence rate was approximately 20% lower in San Bernardino County compared to California and approximately 50% lower in Riverside County compared to California.
- Gonorrhea incidence among women was significantly higher in San Bernardino County (203.7/100,000) compared to Riverside County (108.6/100,000) and the State of California (152.8/100,000).
- Among the genders in San Bernardino County, women had a significantly higher gonorrhea incidence rate than men. The incidence rate was 20.4% higher among women compared to men.
- The incidence for tuberculosis was significantly lower in San Bernardino County (2.7/100,000) and Riverside County (2.7/100,000) compared to the State of California (5.9/100,000). The tuberculosis rate was 54% lower in San Bernardino County and Riverside County compare to California.

MORBIDITY							
Morbidity Indicator 2011-2013 per 100,000 Population	San Bernardino			Riverside			California
	Crude Infection Rate	95% Confidence Limits		Crude Infection Rate	95% Confidence Limits		Crude Infection Rate
		Lower CI	Upper CI	Crude illiection rate	Lower CI	Upper CI	Crude infection rate
AIDS INCIDENCE (AGE 13 AND OVER)	6.2	5.0	7.3	6.4	5.2	7.5	8.1
CHLAMYDIA INCIDENCE	543.7	533.7	553.8	397.9	389.6	406.1	442.6
GONORRHEA INCIDENCE FEMALE AGE 15-44	203.7	190.5	217.0	108.6	99.1	118.0	152.8
GONORRHEA INCIDENCE MALE AGE 15-44	169.2	157.2	181.1	108.2	98.9	1176.0	213.1
TUBERCULOSIS INCIDENCE	2.7	2.0	3.5	2.7	2.0	3.4	5.9

AIDS Incidence

CDC estimates that 1,218,400 persons aged 13 years and older are living with HIV infection, including 156,300 (12.8%) who are unaware of their infection. Over the past decade, the number of people living with HIV has increased, while the annual number of new HIV infections has remained relatively stable. Still, the pace of new infections continues at far too high a level—particularly among certain groups. The estimated incidence (new infections) of HIV has remained stable overall in recent years, at about 50,000 new HIV infections per year. Within the overall estimates, however, some groups are affected more than others. Men having sex with men continue to bear the greatest burden of HIV infection, and among races/ethnicities, African Americans continue to be disproportionately affected. If you get an STD you are more likely to get HIV than someone who is STD-free. This is because the same behaviors and circumstances that may put you at risk for getting an STD can also put you at greater risk for getting HIV.

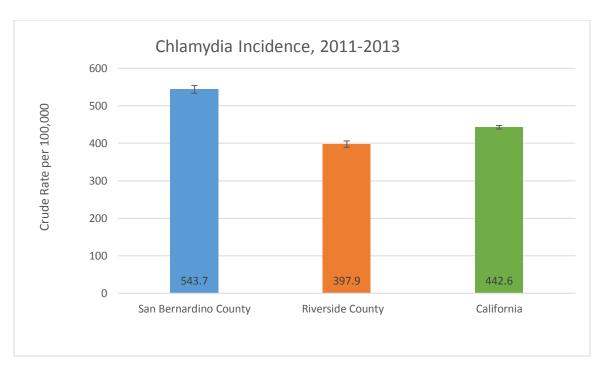


Data Source: California Department of Public Health, Office of AIDS, HIV/AIDS Surveillance Section, 2011-2013

The crude rate for AIDS incidence is significantly lower in San Bernardino County (6.2/100,000) and Riverside County (6.4/100,000) compared to the State of California (8.1/100,000). There was no difference in the incidence of AIDS between San Bernardino County and Riverside County. The AIDS incidence was 23.5% less in San Bernardino County compared to California and 21% less in Riverside County compared to California.

Chlamydia Incidence

Chlamydia is a common sexually transmitted disease (STD) caused by infection with Chlamydia trachomatis. It can cause cervicitis in women and urethritis and proctitis in both men and women. Chlamydial infections in women can lead to serious consequences including pelvic inflammatory disease (PID), tubal factor infertility, ectopic pregnancy, and chronic pelvic pain. Chlamydia is the most frequently reported bacterial sexually transmitted infection in the United States. In 2014, 1,441,789 cases of chlamydia were reported to CDC from 50 states and the District of Columbia, but an estimated 2.86 million infections occur annually. A large number of cases are not reported because most people with chlamydia are asymptomatic and do not seek testing. Chlamydia is most common among young people. Almost two-thirds of new chlamydia infections occur among youth aged 15-24 years. It is estimated that 1 in 20 sexually active young women aged 14-24 years has chlamydia. Substantial racial/ethnic disparities in chlamydial infection exist, with prevalence among non-Hispanic blacks 6.7 times the prevalence among non-Hispanic whites. Chlamydia is also common among men who have sex with men (MSM). Among MSM screened for rectal chlamydial infection, positivity has ranged from 3.0% to 10.5%. Among MSM screened for pharyngeal chlamydial infection, positivity has ranged from 0.5% to 2.3%.

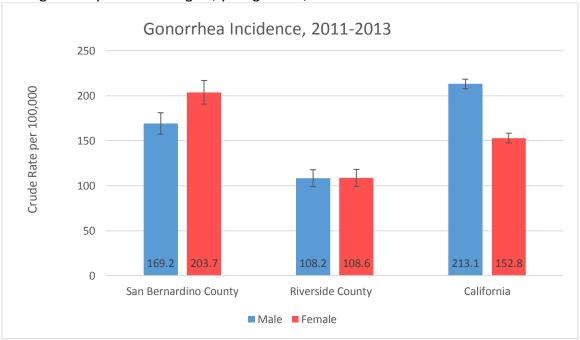


Data Source: California Department of Public Health, STD Control Branch, Chlamydia, 2011-2013

The chlamydia incidence was significantly higher in San Bernardino County (543.7/100,000) compared to Riverside County (397.9/100,000) and the State of California (442.6/100,000). The incidence rate for chlamydia was 36.6% higher in San Bernardino County compared to Riverside County and 22.8% higher than California. The incidence rate for chlamydia was significantly lower in Riverside County compared to California. The rate was 10% lower.

Gonorrhea Incidence

Gonorrhea is the second most commonly reported notifiable disease in the United States and is caused by infection with the *Neisseria gonorrhoeae* bacterium. *N. gonorrhoeae* infects the mucous membranes of the reproductive tract, including the cervix, uterus, and fallopian tubes in women, and the urethra in women and men. *N. gonorrhoeae* can also infect the mucous membranes of the mouth, throat, eyes, and rectum. Gonorrhea is a very common infectious disease. CDC estimates that approximately 820,000 new gonorrheal infections occur in the United States each year, and that less than half of these infections are detected and reported to CDC. CDC estimates that 570,000 of them were among young people 15-24 years of age. In 2014, 350,062 cases of gonorrhea were reported to CDC. Any sexually active person can be infected with gonorrhea. In the United States, the highest reported rates of infection are among sexually active teenagers, young adults, and African Americans.



Data Source: California Department of Public Health, STD Control Branch, Gonorrhea, 2011-2013

Gonorrhea incidence among men was significantly lower in San Bernardino County (169.2/100,000) and Riverside County (108.2/100,000) compared to the State of California (213.1/100,000). The incidence rate was approximately 20% lower in San Bernardino County compared to California and approximately 50% lower in Riverside County compared to California. Moreover, the gonorrhea incidence among men was significantly higher in San Bernardino County compared to Riverside County. The gonorrhea incidence rate among men was 56.4% higher in San Bernardino County compared to Riverside County.

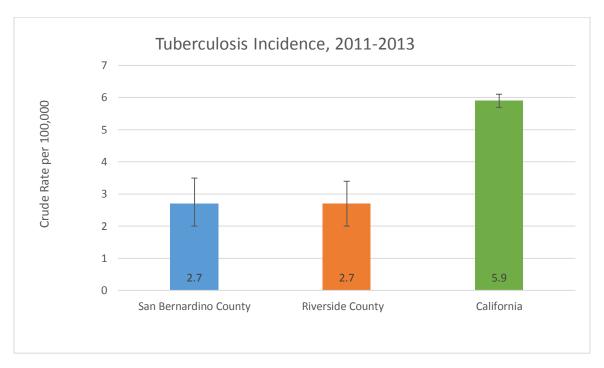
Gonorrhea incidence among women was significantly higher in San Bernardino County (203.7/100,000) compared to Riverside County (108.6/100,000) and the State of California (152.8/100,000). The incidence rate for gonorrhea among women was 87.6% higher in San Bernardino County compared to Riverside County and 33.3% higher compared to California. Moreover, the gonorrhea incidence rate among women in Riverside County was significantly lower compared to California. The incidence rate was approximately 30% lower in Riverside County compared to California.

Among the genders in San Bernardino County, women had a significantly higher gonorrhea incidence rate than men. The incidence rate was 20.4% higher among women compared to men. In Riverside County, there was no difference in the incidence rate of gonorrhea between

men and women. In California, the gonorrhea incidence rate was significantly higher in men compared to women. The incidence for gonorrhea was approximately 40% higher in men than women.

Tuberculosis Incidence

Tuberculosis (TB) is caused by a bacterium called Mycobacterium tuberculosis. The bacteria usually attack the lungs, but TB bacteria can attack any part of the body such as the kidney, spine, and brain. If not treated properly, TB disease can be fatal. TB is spread through the air from one person to another. The TB bacteria are put into the air when a person with TB disease of the lungs or throat coughs, sneezes, speaks, or sings. People nearby may breathe in these bacteria and become infected. TB bacteria can live in the body without making you sick. This is called latent TB infection. In most people who breathe in TB bacteria and become infected, the body is able to fight the bacteria to stop them from growing. People with latent TB infection do not feel sick and do not have any symptoms. People with latent TB infection are not infectious and cannot spread TB bacteria to others. However, if TB bacteria become active in the body and multiply, the person will go from having latent TB infection to being sick with TB disease. Once a person is infected with TB bacteria, the chance of developing TB disease is higher if the person, has HIV infection; has been recently infected with TB bacteria (in the last 2 years); has other health problems, like diabetes, that make it hard for the body to fight bacteria; abuses alcohol or uses illegal drugs; or was not treated correctly for TB infection in the past.



Data Source: California Department of Public Health, Tuberculosis Control Branch, 2011-2013

The incidence for tuberculosis was significantly lower in San Bernardino County (2.7/100,000) and Riverside County (2.7/100,000) compared to the State of California (5.9/100,000). The tuberculosis rate was 54% lower in San Bernardino County and Riverside County compare to California. There was no difference in the incidence of tuberculosis between San Bernardino County and Riverside County.

Focus Groups

The focus groups were tailored to assess the direct and indirect needs of the community throughout the Inland Empire. Getting the thoughts, experiences and opinions of residents was done through pre-defined questions. Questions revolved around changes over time in the past five years, strengths and weaknesses within the community, community health and a brief summary of main points of discussion. Number of attendees ranged from 5 to 10 people per focus group. The information shared gave insight into some of the concerns and points of pride individuals had for their community. Participant's opinions will help to direct improvement and outreach efforts for the coming years.

Location	Language		
San Gorgonio Memorial Hospital	English		
Redlands Hospital	English		
San Antonio Regional Hospital	Spanish		
Montclair Hospital	English		
Loma Linda University Hospital	English		
Parkview Community Hospital	English		
Medical Center			
San Bernardino School District	Spanish		
San Bernardino Mt. Community	English		
Hospital			

Methodology

Eight focus groups were conducted from February 8, 2016 to February 11, 2016 at different times to provide participants various opportunities to attend. A total of 106 individuals were invited to participate in the focus groups and a total of 62 individuals attended, representing various populations from the surrounding communities. Six focus groups were conducted in English and two were conducted in Spanish. Each focus group was scheduled for 1 ½ hours with a total of 15 questions asked. All questions were asked in the same manner for all focus groups.

The focus groups were confidential, anonymous sessions. The sessions were audio taped as well as a recorder present who took notes to ensure accuracy. The participants' words were used in the report as much as possible to keep from altering their meaning, but no names were used to identify the source. The qualitative analysis consisted of identifying themes within each focus group for each question from the answers given and the top themes were presented in descending order in the report for each focus group. The top themes reflect more than one participant stating an answer.

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San Bernardino School District Focus Group Analysis

Question #1 – How long have you lived in the Inland Empire? If you are new to the area, what brought you here?

Data for question 1 was analyzed individually for each focus group and as an aggregate. A mean and range was calculated for each focus group and a mean, median and range was calculated for the aggregate data. Among all participants, 4.3% stated they lived in the Inland Empire their entire life. This information was not incorporated in the analysis as the number of years living in the Inland Empire was not identified for these participants. Among all participants, the highest frequency of individual years living in the Inland Empire was six and eight years; 8.7% for each.

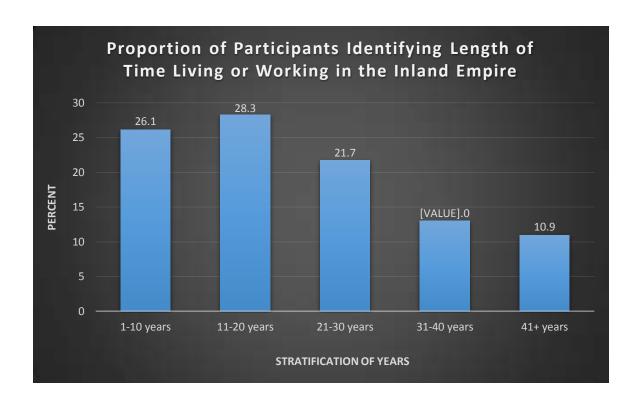
- A. San Bernardino School District
 - a. Mean 20.2 years
 - b. Range (8-30 years)

Overall Participating Hospitals (Aggregate)

Mean – 21.8 years

Median – 19 years

Range – 1-56 years



Question #2 – What if anything is different about your community now that was not the case five years ago?

- 1. Built Environment (neighborhoods) see new construction projects and new shopping centers, however seeing increase in violence, trash, (less maintenance of streets, suggesting City is going bankrupt), crime, drugs
- 2. Education schools encouraging parents to be involved, focus on education, increase in graduation rates and increase in students getting into college, yet one person suggested administration and community less vigilance at schools
- 3. Increase in homeless population

Question #3 – What kind of projects, if any, have people in your community worked on together in the past five years? (Note: Participants stated they were members of organizations who assist with services)

- 1. Parent participation in education share information about schools in area by distributing flyers (i.e. DELAC Committee). This program addresses English language barriers, parents share information about schools with churches, parents participate in catechism at church
- 2. Housing Ronald McDonald Foundation which is instrumental with the House for the Needy program
- 3. Mental health programs nothing specifically stated but participants made reference to mental health programs

Question #4 – Think about your community over the next five years, what changes would you make or not make and why?

- 1. Healthcare need more hospitals and dentists in community
- 2. Schools need more schools and parents to be involved with their children's education
- 3. Programs that promote job growth

Question #5 – If you knew someone was thinking about moving to your community, what would you tell them or her about the area to convince them to move or not to move?

I – Positive

- 1. People are neighborly and cooperative
- 2. Community gets involved
- 3. Streets are calm
- 4. Neighbors are kind
- 5. The homeless population is nice
- 6. Neighbors leave you alone

II - Negative

- 1. Homeless population
- 2. Highland neighborhood is a drug problem
- 3. Lack of recreational centers
- 4. Lack of activities for youth
- 5. Cost of living high
- 6. No street lights

Question #6 – Describe how your community could be improved.

- 1. Create skate parks for youth in community
- 2. City government involved with community to make changes that benefit everyone

Question #7 – What makes your community a healthy community?

- 1. Access to nutrition classes that promote healthy eating
- 2. Access to physical activities programs, such as Zumba
- 3. Medical services for women, such as Loma Linda Healthcare

Question #8 – What makes your community unhealthy?

- 1. Lack of resources for people to engage in physical activities. For instance, many parks are not safe or useable. Also lack of spaces for people for people to engage in group activities
- 2. The homeless population

Question #9 – Describe barriers that may pose challenges to achieving positive community health.

1. People are afraid of doctors, people with no medical insurance, language barriers, lack of transportation

Question #10 – From what health problems do people in your community suffer?

- 1. Chronic disease diabetes asthma, cancer obesity
- 2. Maternal smoking
- 3. Unhealthy eating

Question #11 - Where do people in your community go to receive health care?

1. Clinics

Question #12 – What, if any, environmental health concerns do you face in your community?

1. A lot of open spaces with dirt, a lot of rodents, gas leaks, pollution from trains, smoking in public/private areas

Question #13 – Think about the issues we have talked about today. What issues do you think are the most important for your community to address? Why?

- 1. Educating kids on healthy lifestyles and life tasks so they are successful and healthy
- 2. Policing
- 3. The litter problem
- 4. Economy of City. The city is facing bankruptcy so there are no funds to fix city

Question #14 – Think about the strengths in your community we have talked about today. What do you think is the community's greatest asset?

1. Schools, libraries, unity of community, community is safe and clean

Question #15 – Is there anything else we have not asked about that is important for us to know about in your community?

1. There is nothing to motivate kids. The community should use Chavez School drumline program as an example which motivates kids to participate in drumming competitions. In order to participate, kids need to maintain high grades, so kids do well in school and maintain grades.

All other focus group analyses are provided in the hospital specific analysis section.

Quality of Life Survey (QOLS) Analysis

The QOL survey was used as part of the visioning and planning process for local area hospitals. The word 'community' represented the county as a whole: its cities, municipalities, unincorporated areas, neighborhoods and their residents. The survey captured opinions about the Inland Empire by highlighting characteristics that people may enjoy or see as areas of improvement for the community. The QOL survey was distributed in various forms including, email lists, paper copies, many of which were passes out at focus groups, links on social media pages and also given at health care facilities. Spanish versions were available for those whose first language was not English.

Methodology

The QOLS was finalized and sent out to all participating hospitals on February 7th, 2016. Contacts from each participating hospital distributed the survey via Survey Monkey and with the help of community members via paper. There were 541 QOLS collected in both Spanish and English. The survey consisted of 52 questions and took participants approximately 20 minutes to complete. The survey was closed on March 12th.

The QOLS was confidential and anonymous. All paper surveys were manually entered into Survey Monkey for a combined analysis. Survey Monkey analytics were used to compile the results. The results were then stratified by hospital service area.

The following three sections contain the QOLS analysis as a whole and separated by San Bernardino and Riverside counties. The survey was also analyzed be hospital service area and is discussed in each service area section.

Key Findings

- A total of 541 individuals completed the QOL survey.
- Among individuals who completed the QOL survey, there were four times more women who completed the survey than men. Of the completed surveys, 80% were from women and 20% were from men.
- Approximately 50% of those who completed the survey were between the ages of 40-65 and 12.6% were seniors who were 65 years or older.
- Among the population that completed the survey, 54.8% were married and one-in-five were single who had never been married.
- Approximately 50% of individuals who completed survey had a high school education or less; approximately one-in-three had a bachelor's degree or higher.
- Approximately 30% of individuals who completed the survey had an annual household income of \$25,000 or less.
- Hispanics were 60% of those individuals who completed the Quality of Life survey and whites were approximately 26%.
- Of those individuals who completed the survey, 67% stated they have a personal doctor or medical provider.
- Among individuals who completed the survey, 68% stated that when they see their medical provider, the medical provider explains clearly what they need to do to take care of their health; approximately four percent said their medical provider never explains clearly what they need to do to take care of their health and approximately

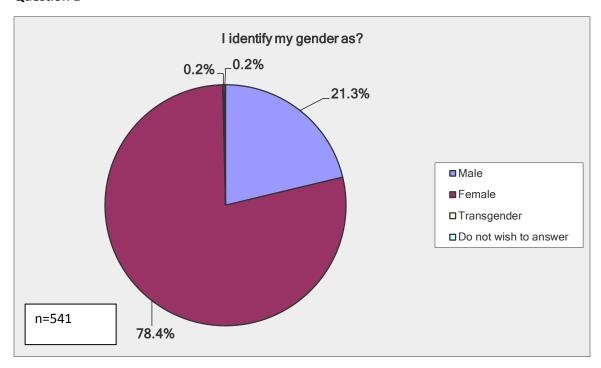
10% stated they do not have a medical provider so they were unable to assess the question.

- Approximately 50% of individuals who completed the QOL survey stated that they can always or usually see their doctor or medical provider within two days if they need to; approximately one-in-three stated they rarely or never can.
- Three-in-four individuals who completed the QOL survey stated that their doctor either always or usually speaks to them in their primary language, whereas 16% said that their doctor rarely or never speaks to them in their primary language.
- Approximately 15% of individuals who completed the QOL survey stated it's difficult to understand their doctor when they see them, whereas two-thirds stated that it was rarely or never difficult to understand their doctor when they see them.
- For individuals who completed the survey, 43% stated they do not have someone to help them understand their doctor; 23.2% sated it was the medical staff and 10% stated it was an adult family member.
- For those individuals who completed the QOL survey, two-thirds stated they rarely or never needed help from someone to understand their doctor, whereas just under 20% said they always or usually needed help from someone to understand their doctor.
- Seven-in-ten individuals who completed the survey stated they did not visit the hospital emergency room in the past 12 months for their own health, whereas a quarter did visit the emergency room for their own health 1-2 times.
- Approximately 86% percent of individuals who completed the QOL survey stated they have not been hospitalized in the last 12 months.
- Approximately one-third of individuals who completed the survey stated they delayed or did not get medical care they felt they needed.
- The number one reason why individuals delayed getting care they felt they needed was because they could not get a timely appointment (23.2%) followed by lack of insurance (22.5%) and then followed by "could not afford to see a doctor" (11.9%).
- Approximately 73% of individuals who completed the survey rated their general health as excellent, very good or good; approximately rated their general health as fair or poor.
- Approximately 30% of individuals who completed the survey stated that they were told by a doctor they have high blood pressure.
- Approximately 26% of individuals who completed the survey stated that they were told by a doctor they have some form of arthritis.
- Approximately 18% of individuals who completed the survey stated they have a condition that substantially limits one or more basic physical activities.
- Ten percent of those individuals who completed the survey stated in the past 12 months they have fallen to the ground more than once, however 96.4% did not go to the emergency room because of fall and 98% stated they were not hospitalized.
- Approximately 50% of individuals who completed the survey stated they had an eye exam within the last 12 months, whereas 33.7% stated they either had an eye exam over two years ago or they never had an eye exam.
- Approximately 60% or individuals who completed the survey stated they had a dental
 exam within the last 12 months, whereas one-quarter stated they either had a dental
 exam over two years ago or they never had a dental exam.

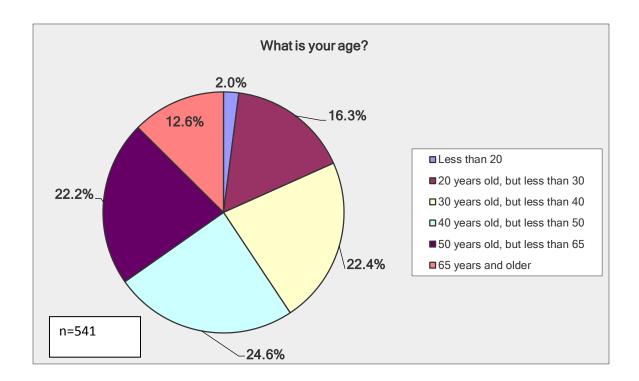
- Approximately 60% of individuals who completed the survey stated they did not get a flu vaccination.
- Among women 45 years of age or older who completed the survey, 25% stated they never had a mammogram screening.
- Approximately 12% of individuals who completed the survey stated they have seen their physician/general practitioner for problems related to mental health, their emotions, their nerves, or for alcohol/drug use.
- Approximately 12% of individuals who completed the survey stated they have seen a professional such as a counselor, psychiatrist, or social worker for problems related to mental health, their emotions, their nerves, or for alcohol/drug use.
- Just under 10% of individuals who completed the survey have felt nervous in the past 30 days either all of the time or most of the time.
- According to individuals who completed the survey, when asked, in the last 30 days how often did you feel so depressed that nothing could cheer you up, approximately 80% stated either a little of the time or never.
- According to individuals who completed the survey, when asked, in the last 30 days how often did you feel hopeless, approximately 80% stated either a little of the time or never.
- Approximately 91% of individuals completing the survey stated they do not smoke cigarettes.
- When individuals who completed the survey were asked about how much they agree or disagree with the following statement, "You can count on adults in this neighborhood to watch out that children are safe and don't get in trouble", 36.3% either strongly agreed or agreed with the statement, whereas 22.2% stated they either strongly disagreed or disagreed with the statement.
- When individuals who completed the survey were asked about how much they agree or disagree with the following statement, "I feel safe in my neighborhood", 73% either strongly agreed or agreed with the statement, whereas 12.1% stated they either strongly disagreed or disagreed with the statement.
- When individuals who completed the survey were asked about how much they agree or disagree with the following statement, "I feel comfortable getting together informally with others to deal with community problems", 47% either strongly agreed or agreed with the statement, whereas 14.4% stated they either strongly disagreed or disagreed with the statement.
- According to individuals who completed the survey, 30.2% stated that in an average week they spend 30 minutes doing light physical activity 3-4 times a week and 28.8% do light physical activity 5-7 times a week.
- According to individuals who completed the survey, 37.2% stated that in an average week they do not do any moderate physical activity for at least 30 minutes, 21.5% stated they do moderate physical activity for 30 minutes at least 3-4 times a week, and 8.2% stated they do moderate physical activity for 30 minutes at least 5-7 times a week.
- According to individuals who completed the survey, 54% stated that in an average week they do not do any high physical activity for at least 30 minutes, whereas only 14.6% stated they do high physical activity for 30 minutes at least 3-4 times a week, and 5% stated they do high physical activity for 30 minutes at least 5-7 times a week.

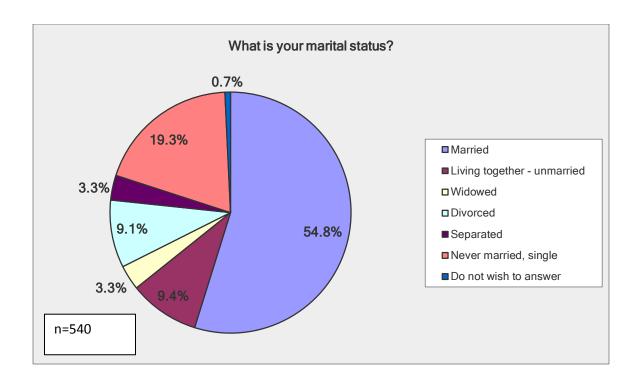
Quality of Life Survey Master Data Analysis

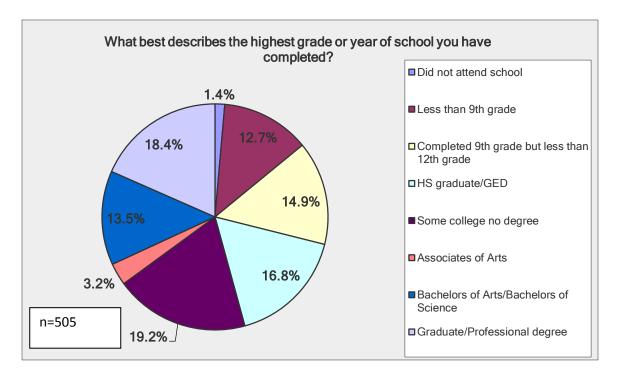
Question 1

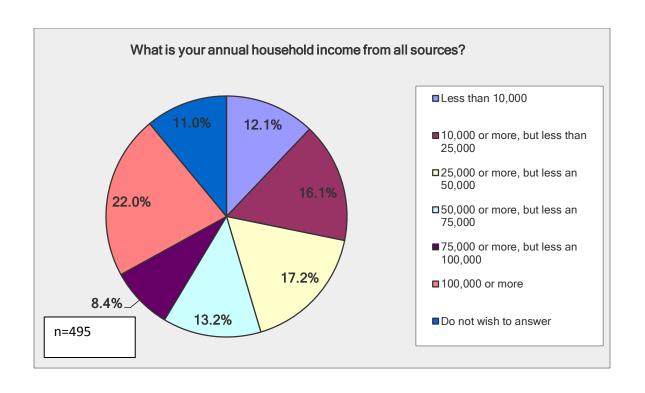


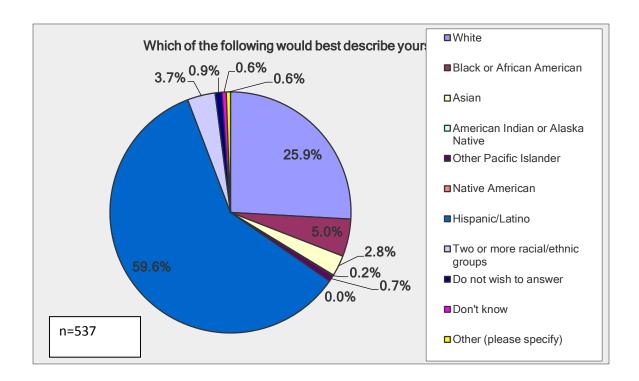
What is your zip code?	
Answer Options	Response Count
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answered question	527

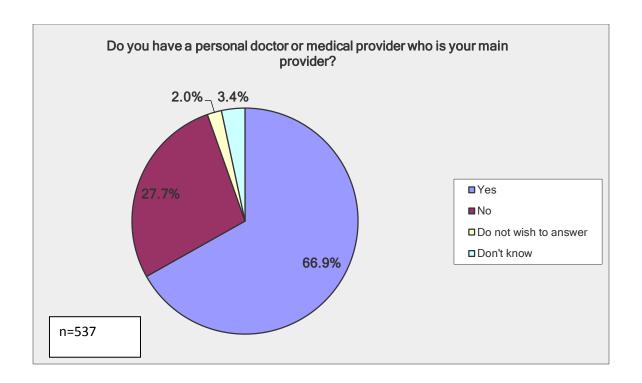


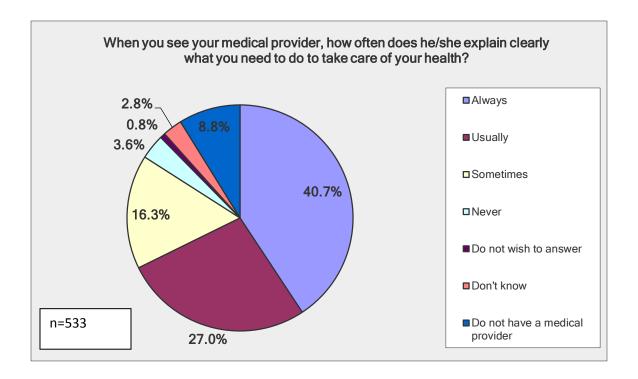


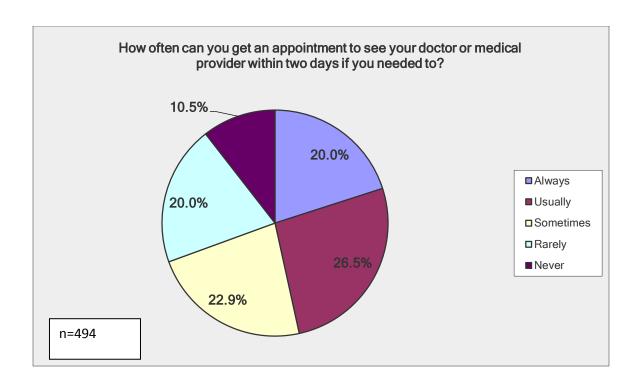


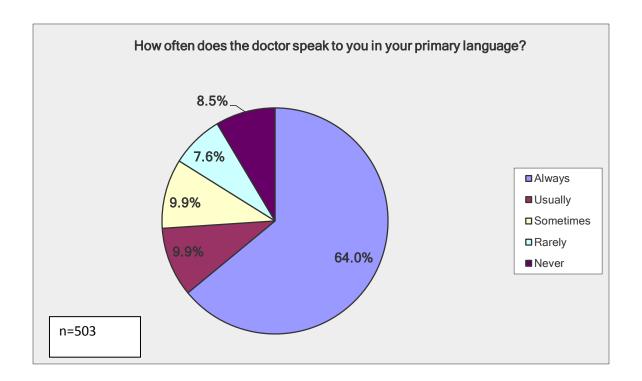


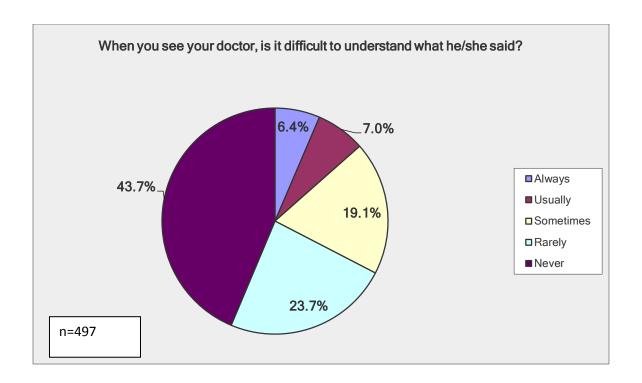


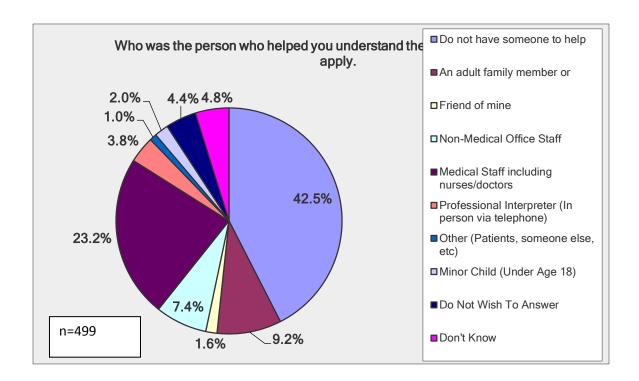


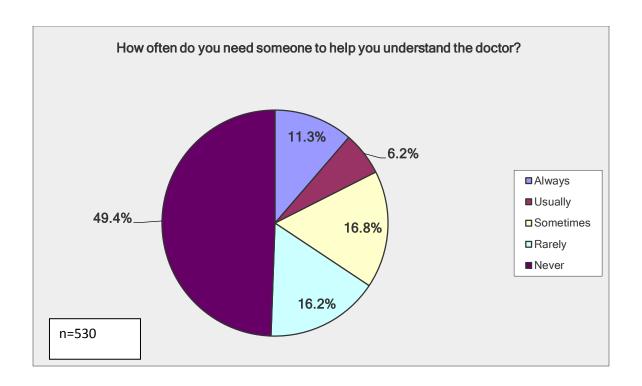


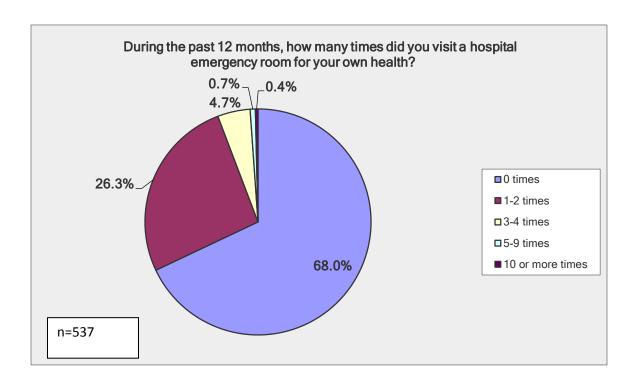


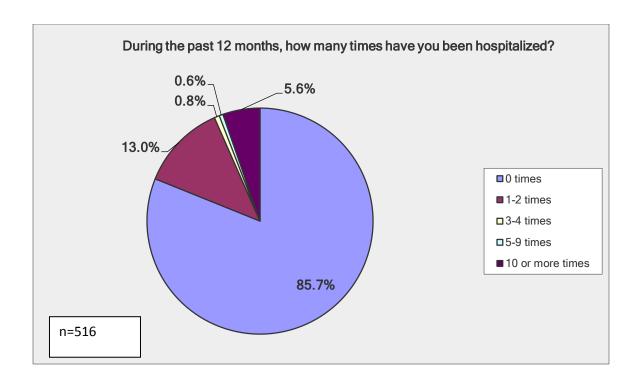


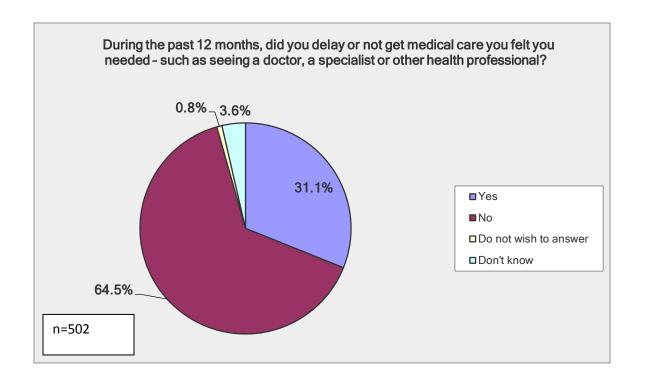


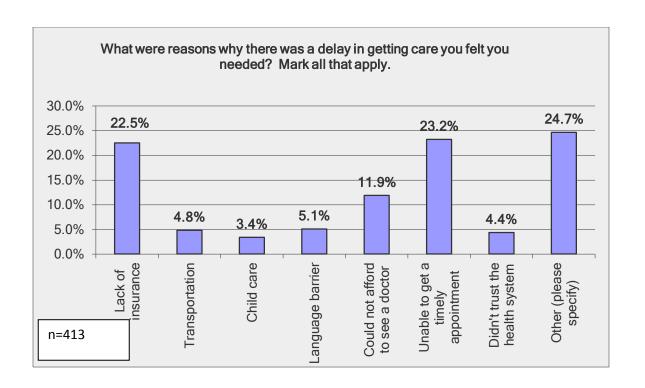


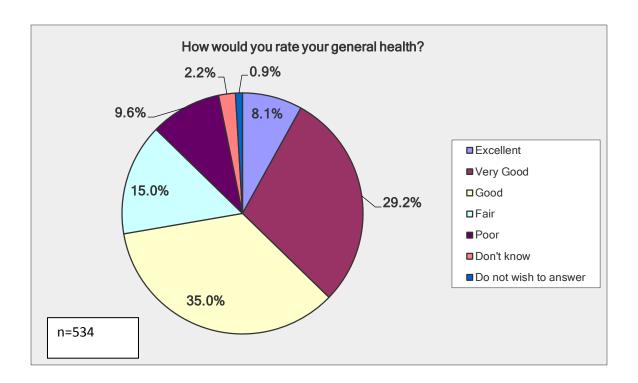


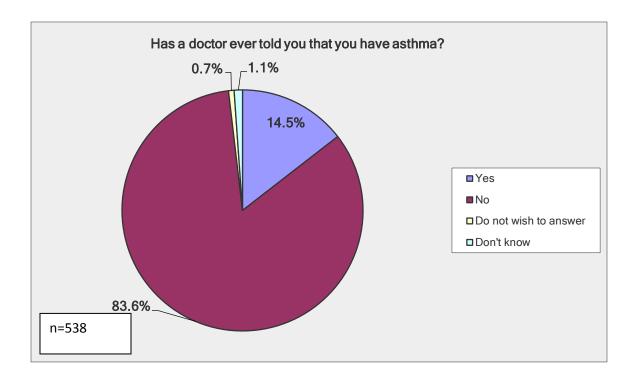


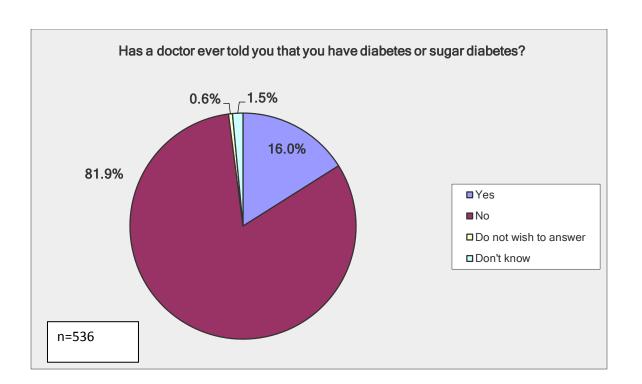


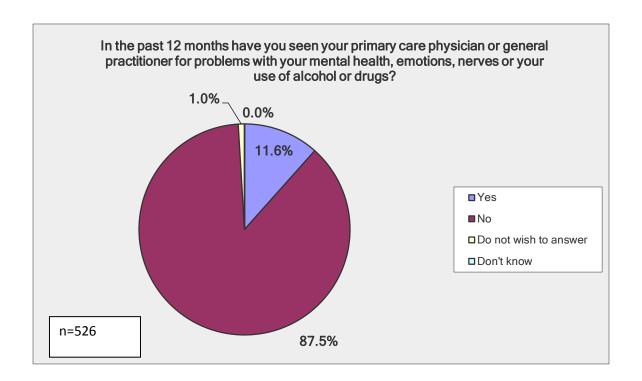


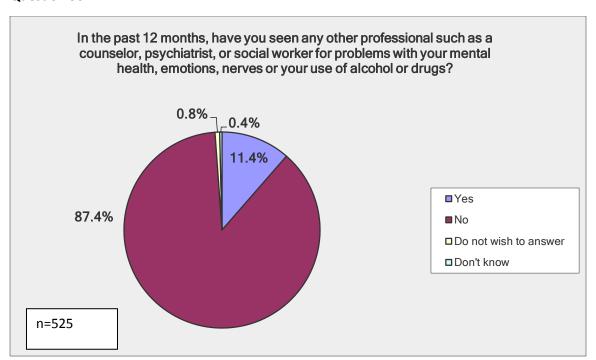






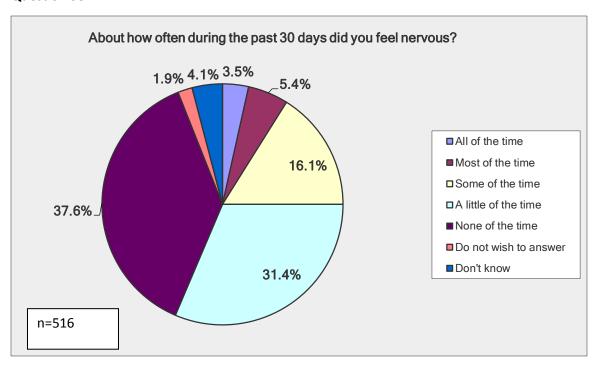


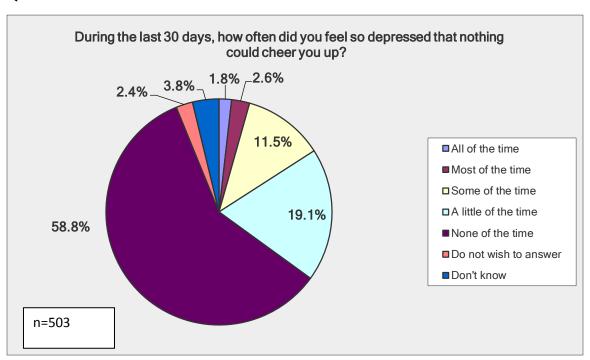


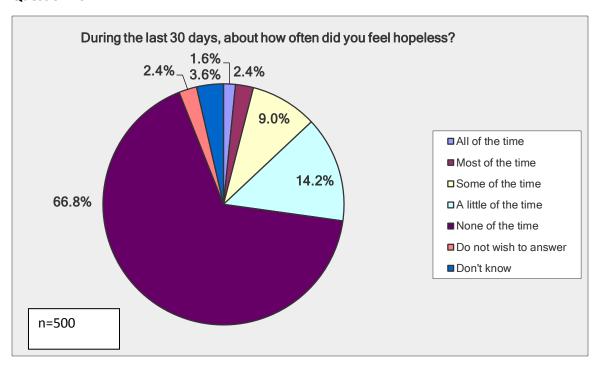


How many days out of the past 30 days were you unable to work or carry out your normal activities because of your feeling nervous, depressed or emotionally stressed?

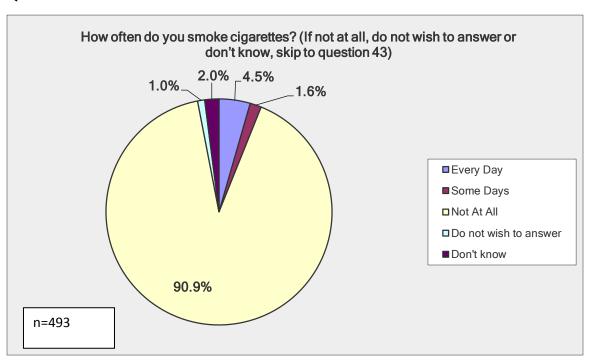
Answer Options	Response Count
	352
answered question	352







Question 41



On average, how many cigarettes do you smoke a day?	
Answer Options	Response Count
	251
answered question	251

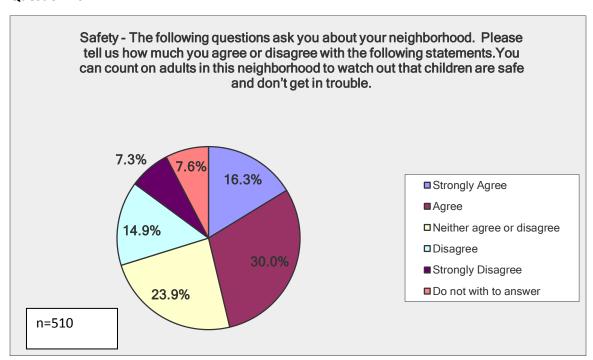
In the past 12 months, about how many times did you have 1 or 2 alcoholic drinks in a single day?	
Answer Options	Response Count
	460
answered question	460

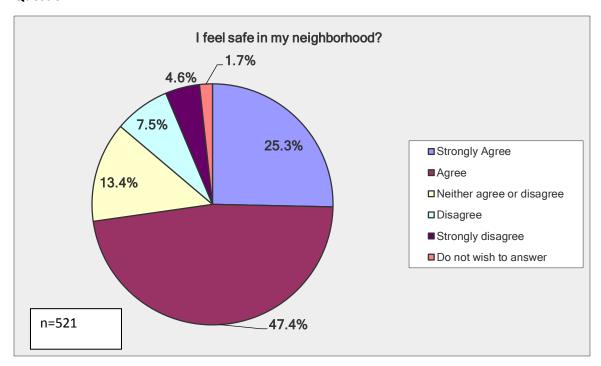
Question 44

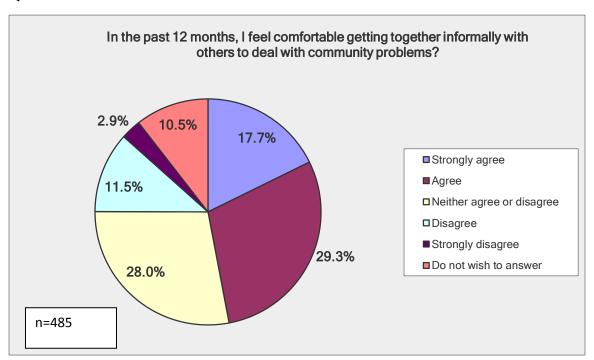
In the past 12 months, about how many times did you alcoholic drinks in a single day?	ou have 3 or 4
Answer Options	Response Count
	441
answered question	441

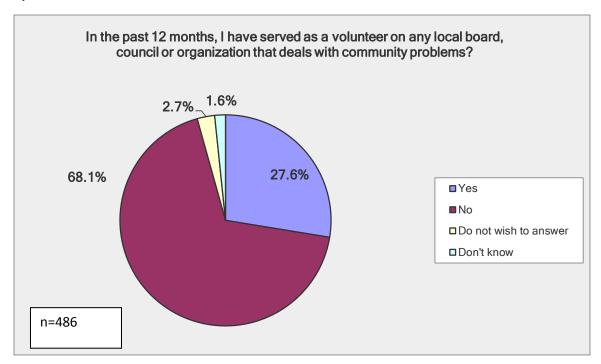
Question 45

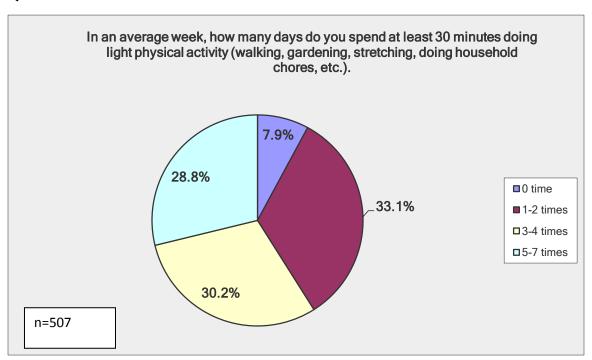
In the past 12 months, about how many times did y more alcoholic drinks in a single day?	you have 5 or
Answer Options	Response Count
	442
answered question	442

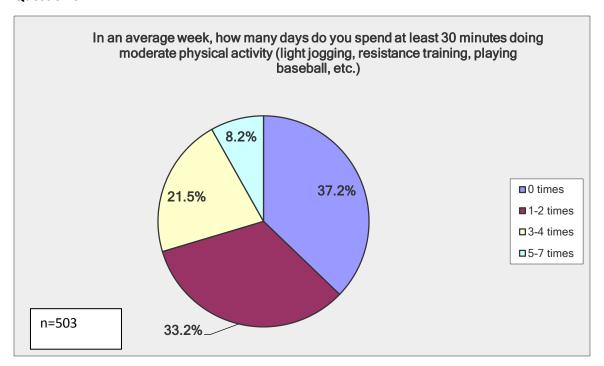


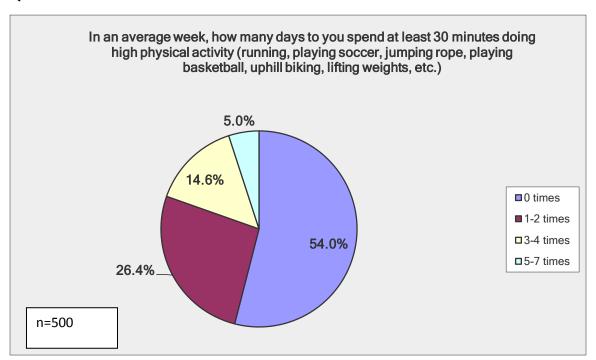






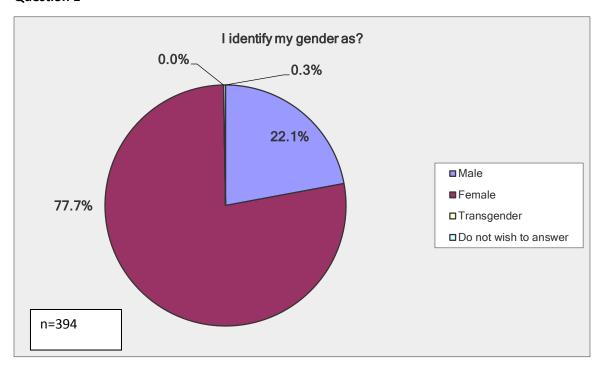






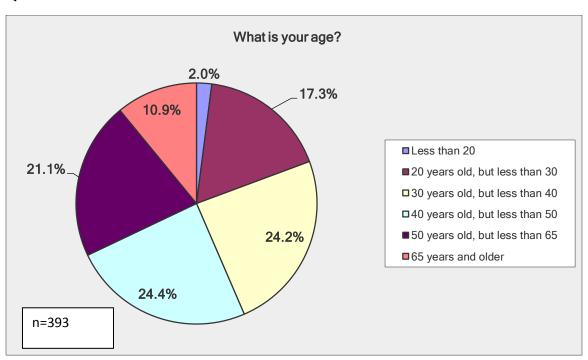
San Bernardino County QOLS Analysis

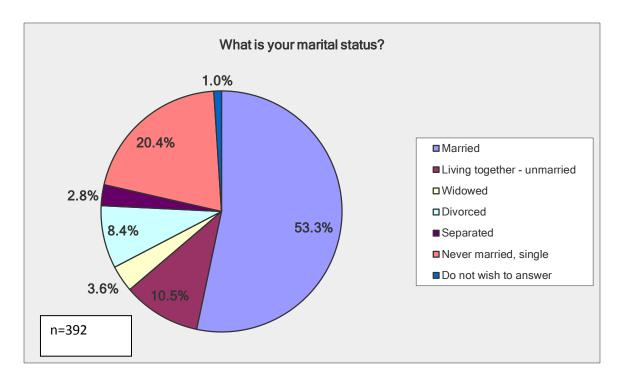
Question 1

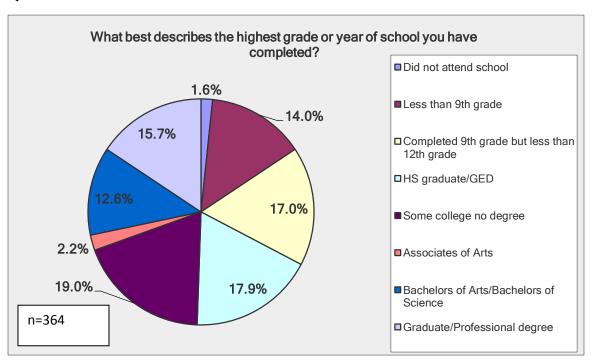


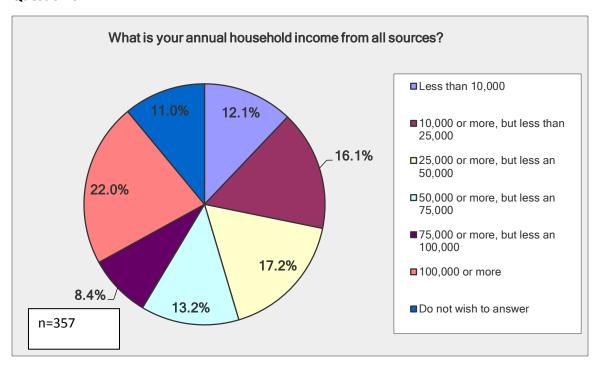
Question 2

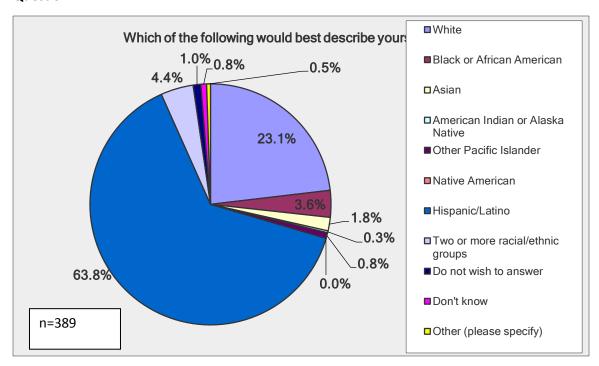
What is your zip code?	
Answer Options	Response Count
	398
answered question	398

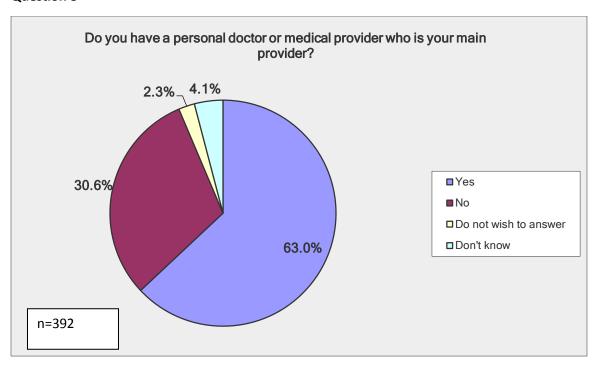


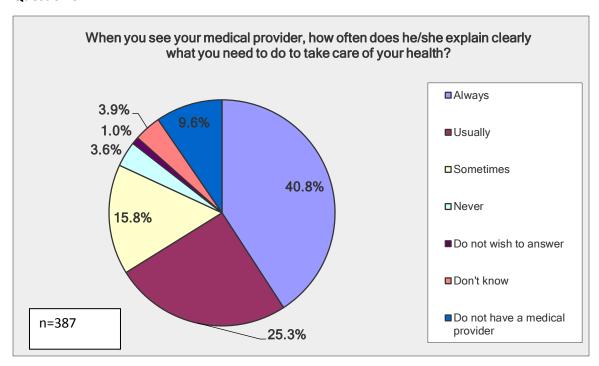


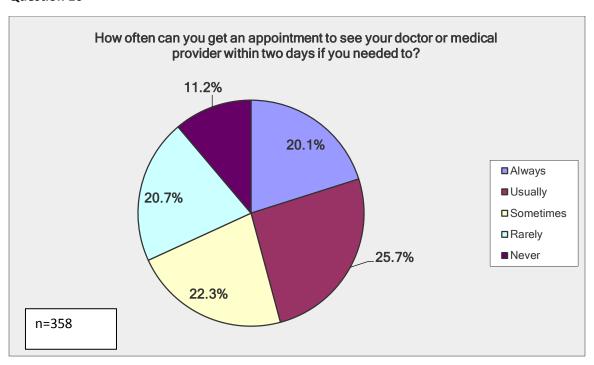


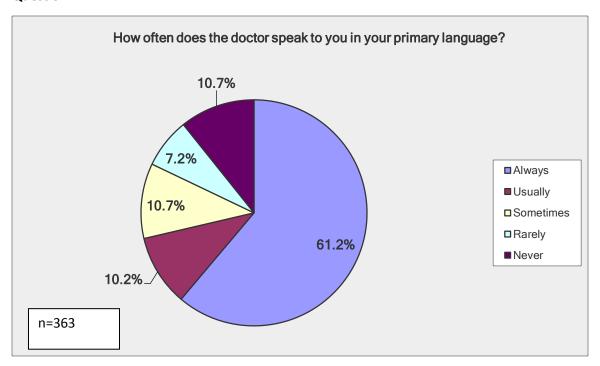


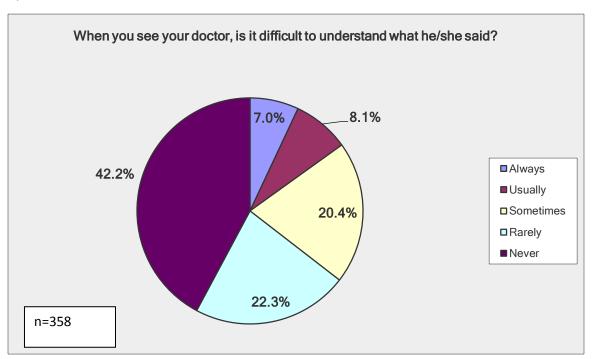


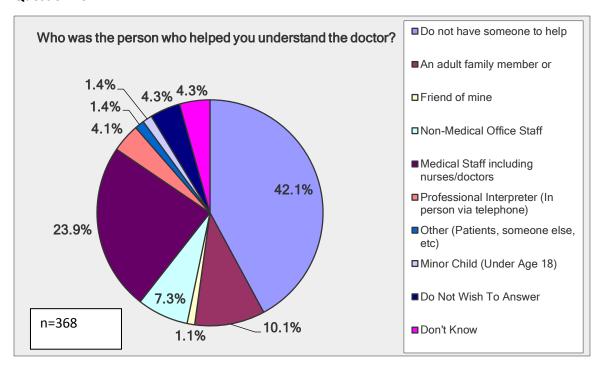


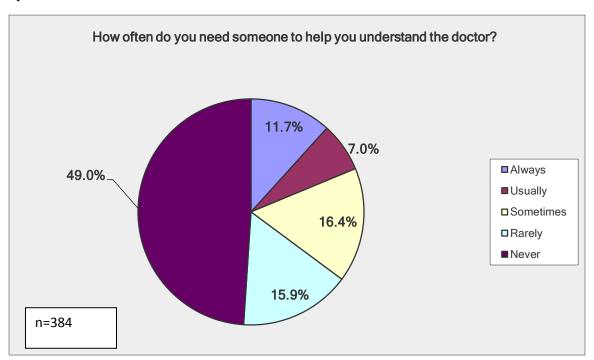


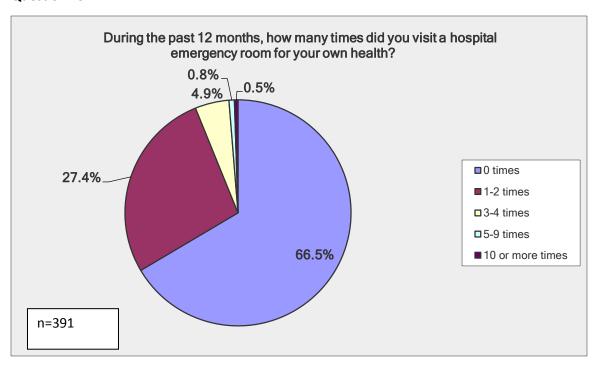


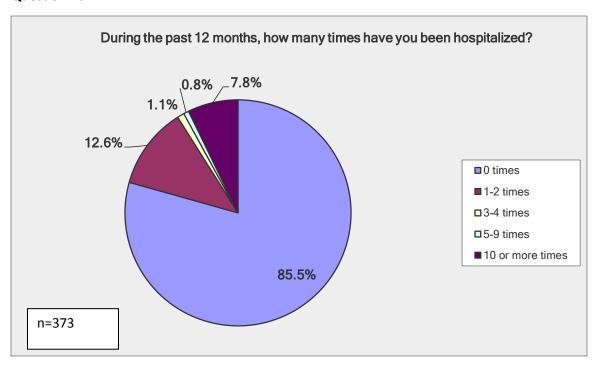


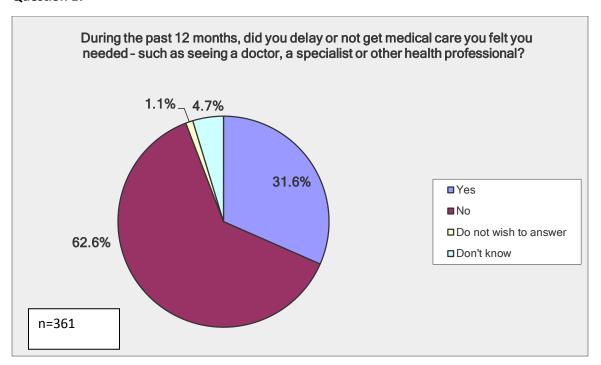


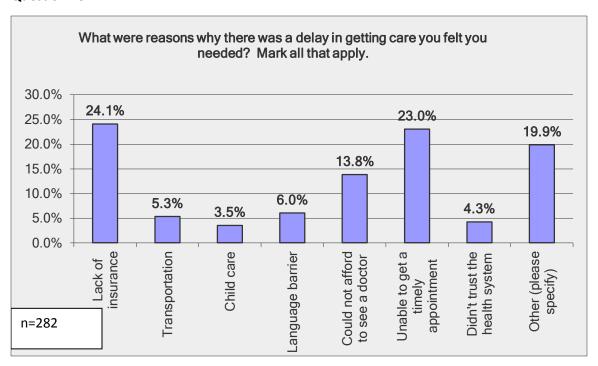


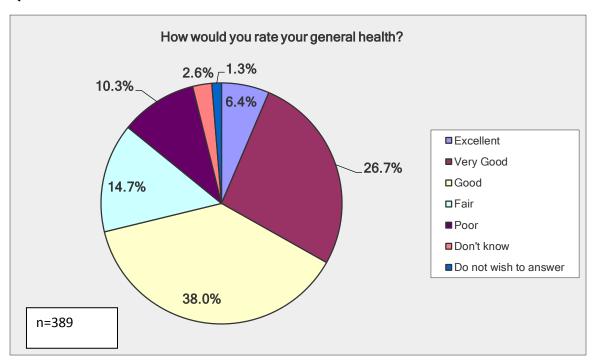


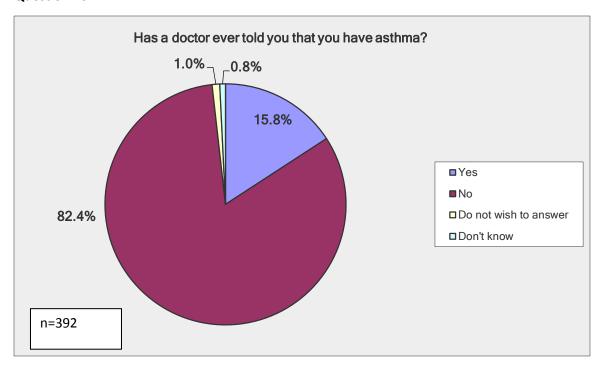


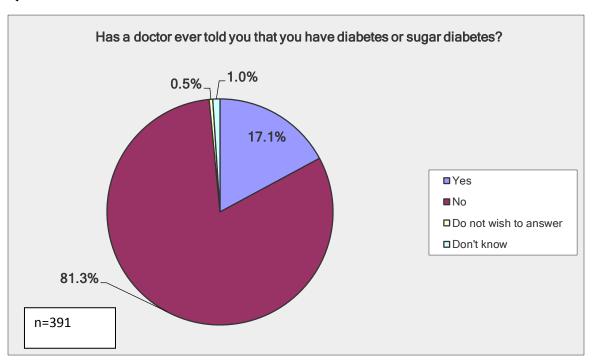


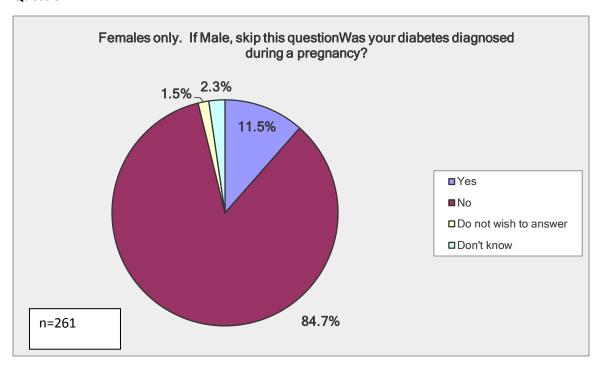


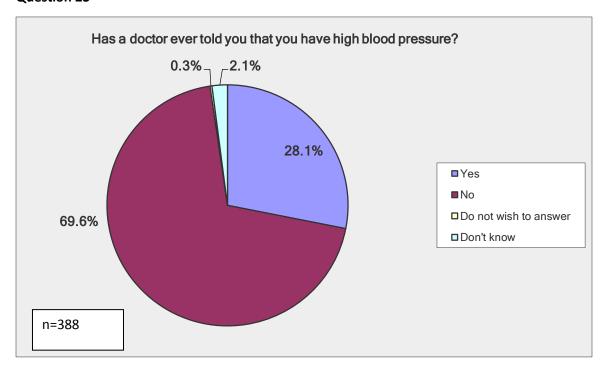


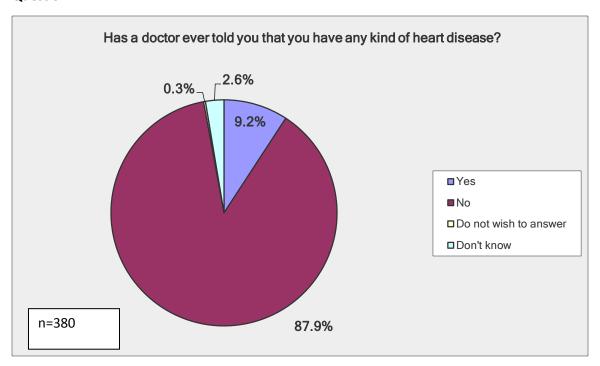


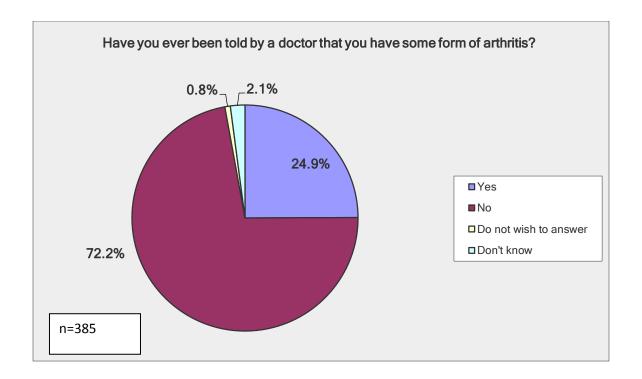


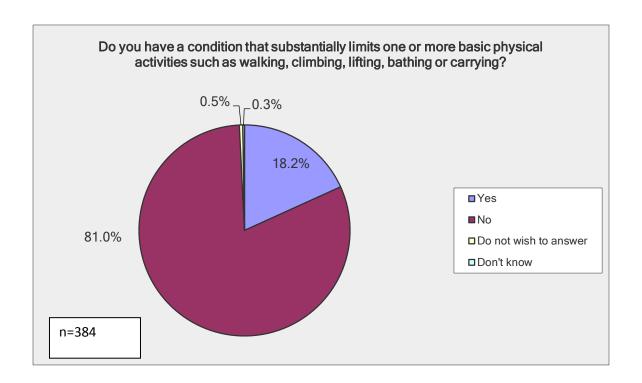


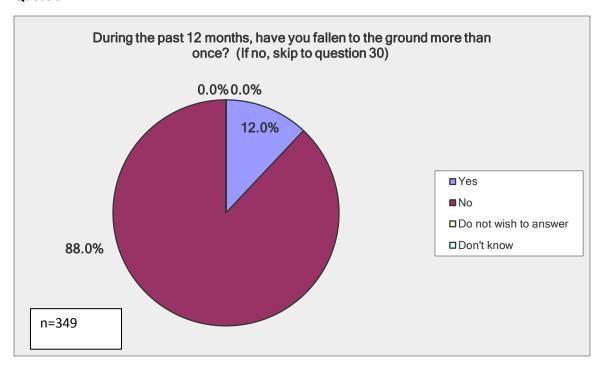


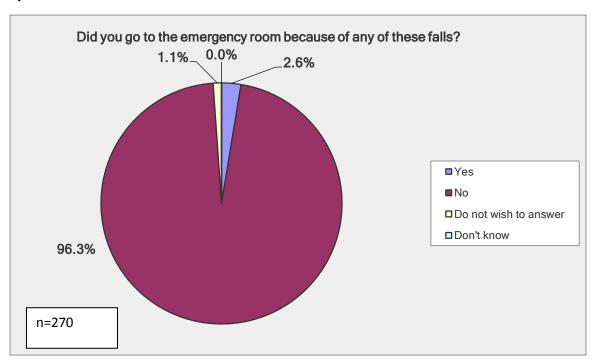


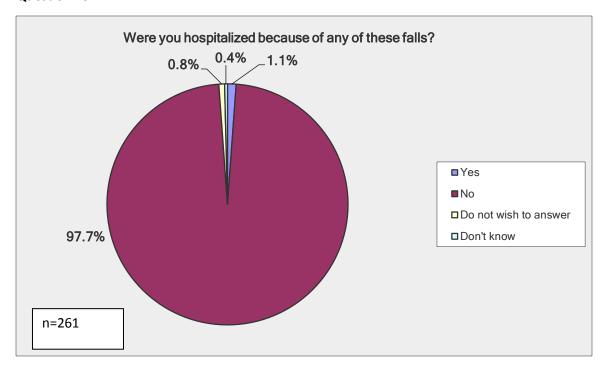


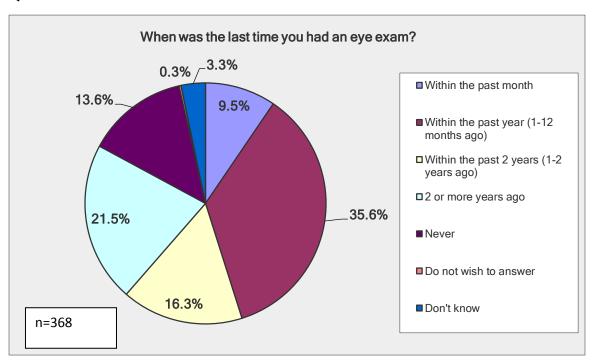


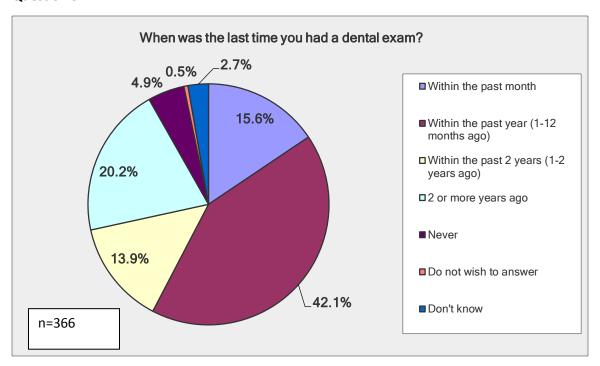


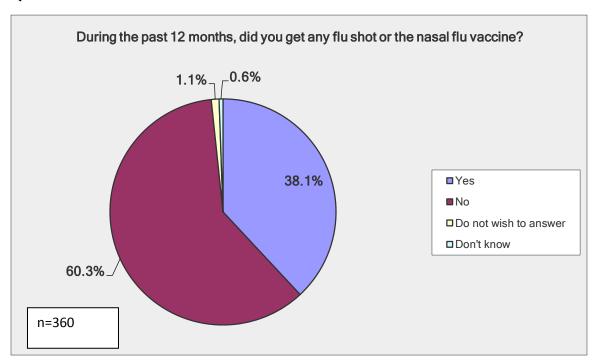


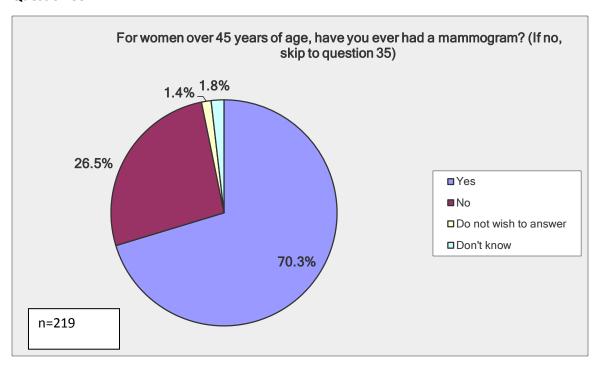






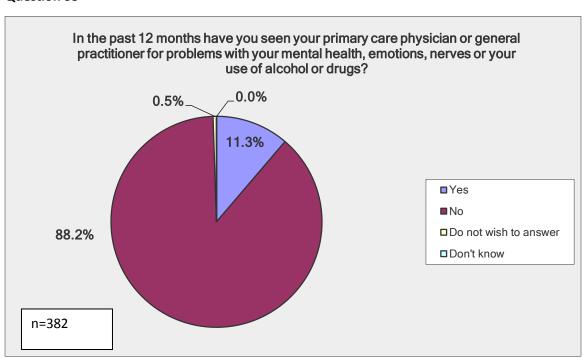


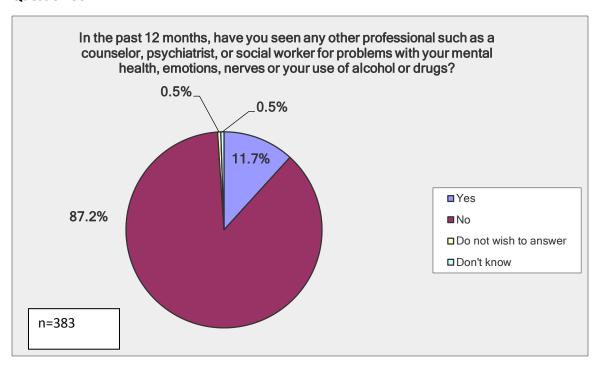




Question 34

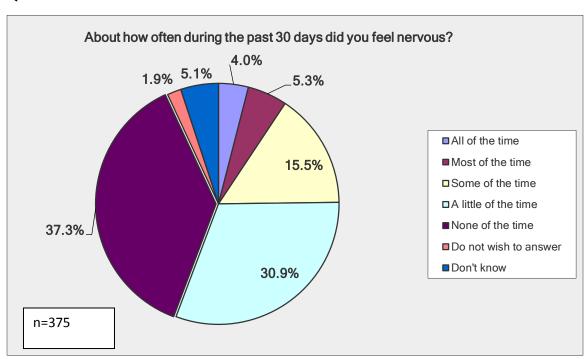
How long ago did you have your most recent mammogram?	
Answer Options	Response Count
	167
answered question	167

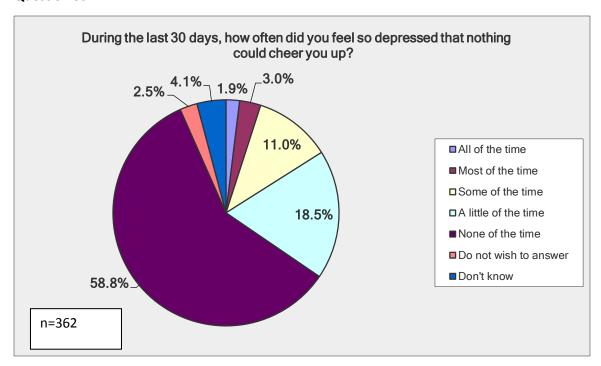


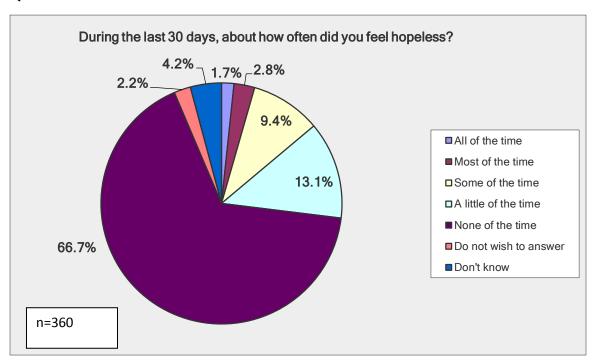


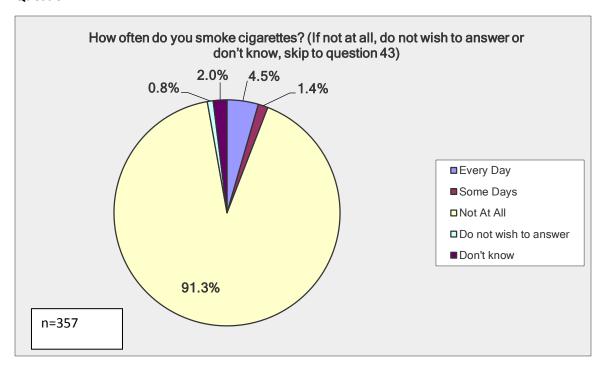
Question 37

How many days out of the past 30 days were you unable to work or carry out your normal activities because of your feeling nervous, depressed or emotionally stressed?	
Answer Options	Response Count
	255
answered question	255









Question 42

On average, how many cigarettes do you smoke a day?	
Answer Options	Response Count
	188
answered question	188

Question 43

In the past 12 months, about how many times did you alcoholic drinks in a single day?	ou have 1 or 2
Answer Ontions	Response

Answer Options	Count
	336
answered question	336

Question 44

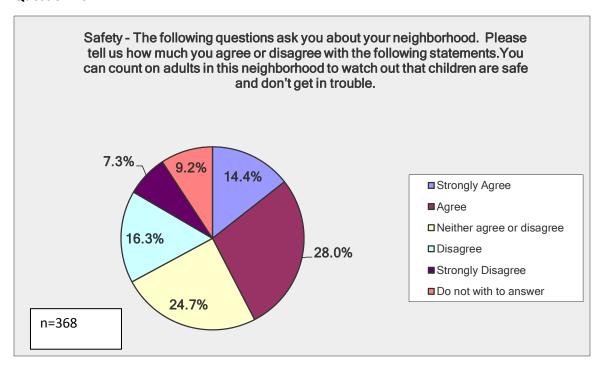
In the past 12 months, about how many times did you have 3 or 4 alcoholic drinks in a single day?

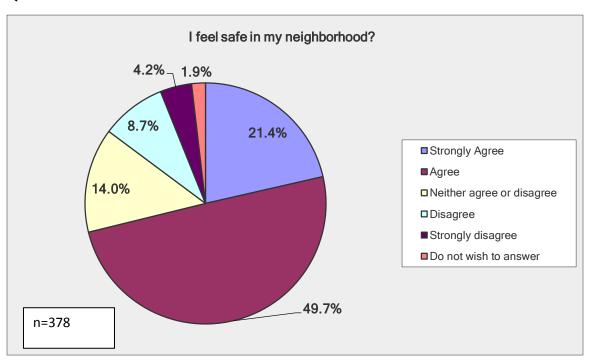
Answer Options	Response Count
	321
answered question	321

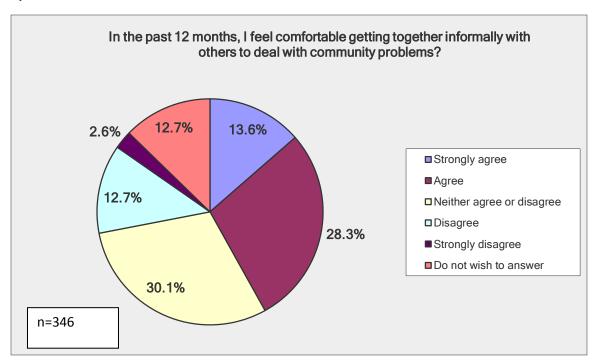
Question 45

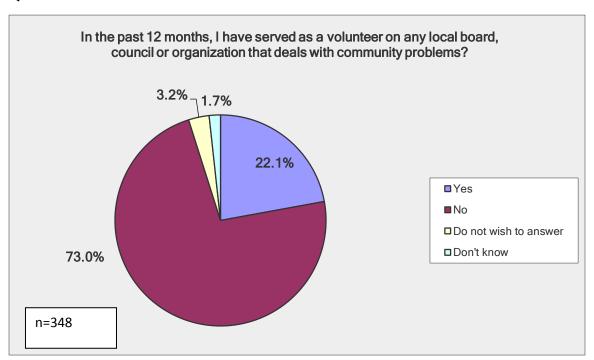
In the past 12 months, about how many times did you have 5 or more alcoholic drinks in a single day?

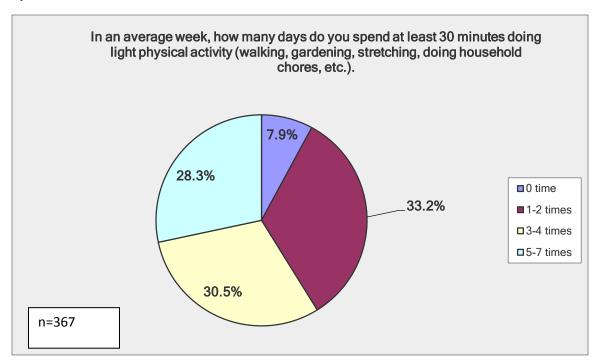
Answer Options	Response Count
	324
answered question	324

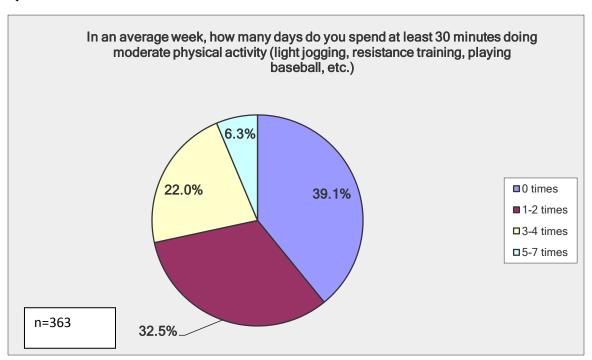


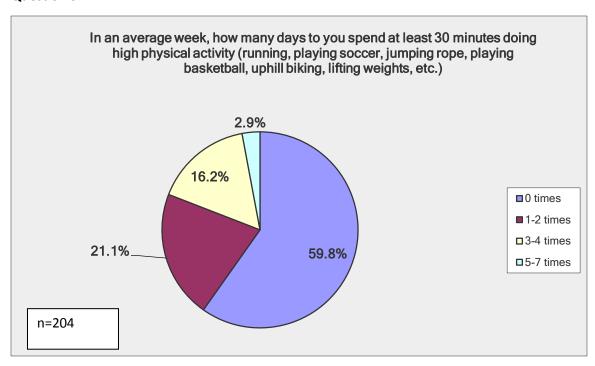






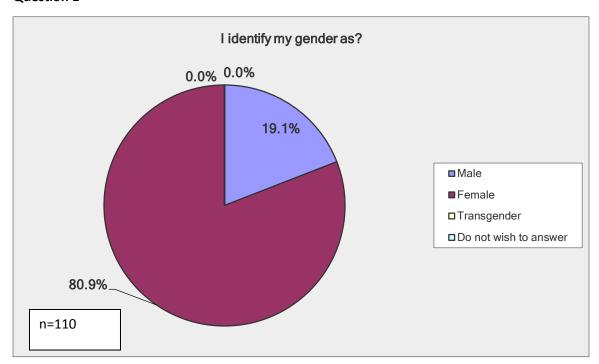




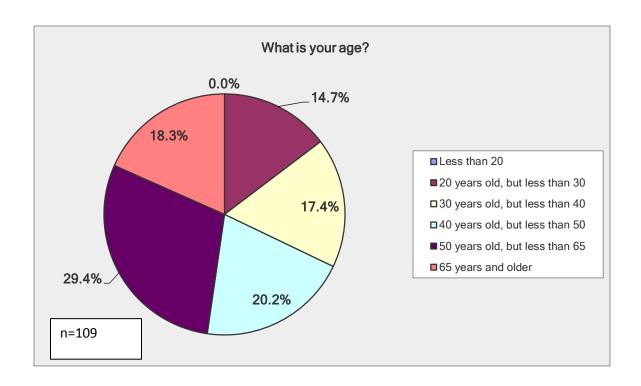


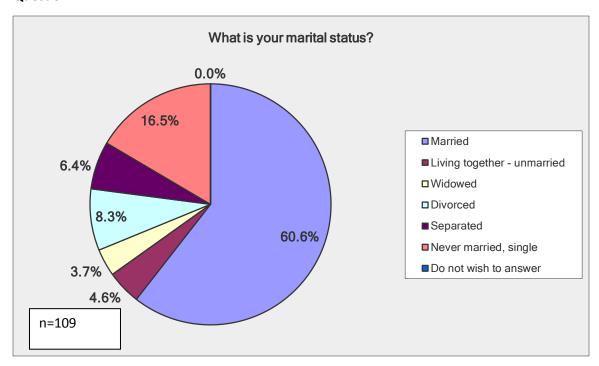
Riverside County QOLS Analysis

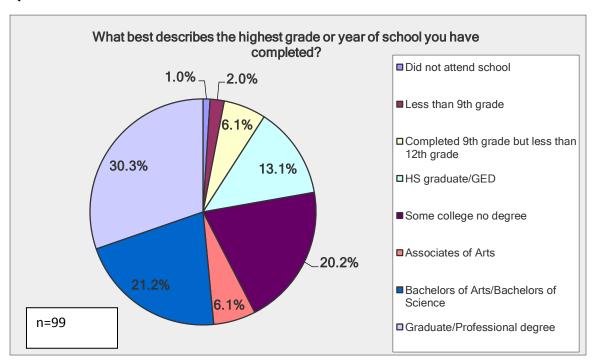
Question 1

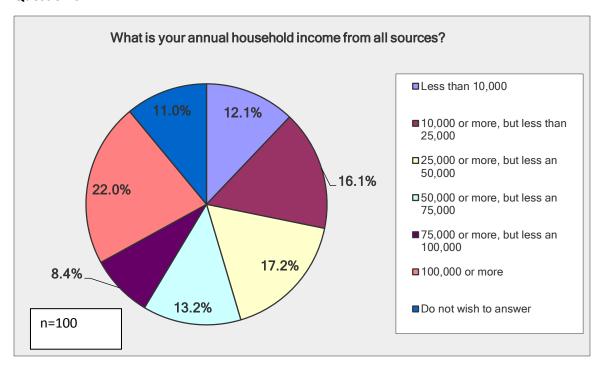


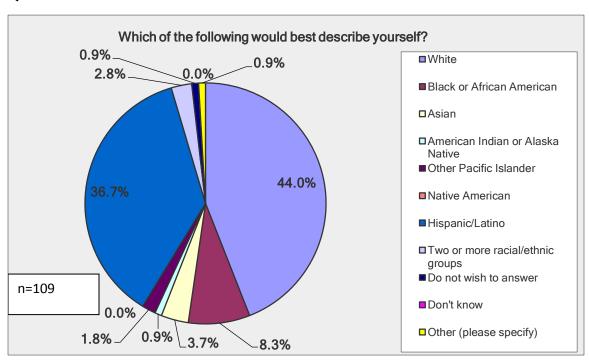
What is your zip code?	
Answer Options	Response Count
	110
answered question	110

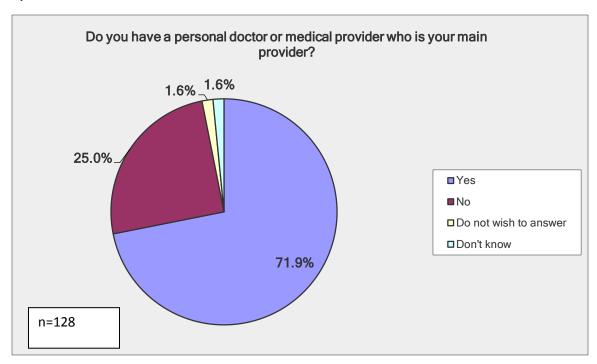


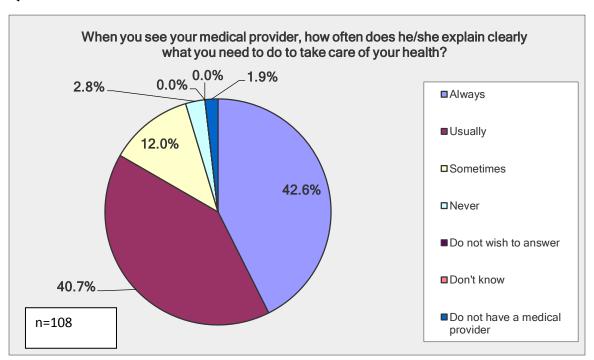


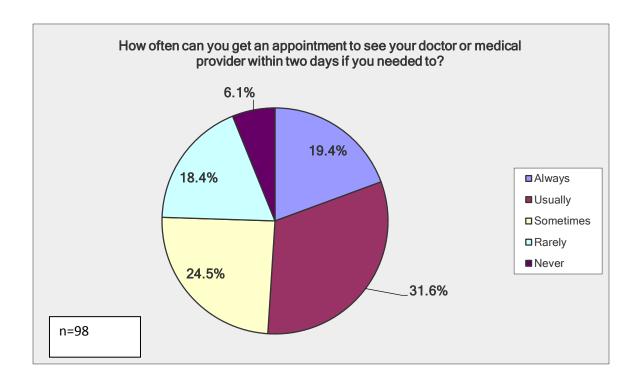


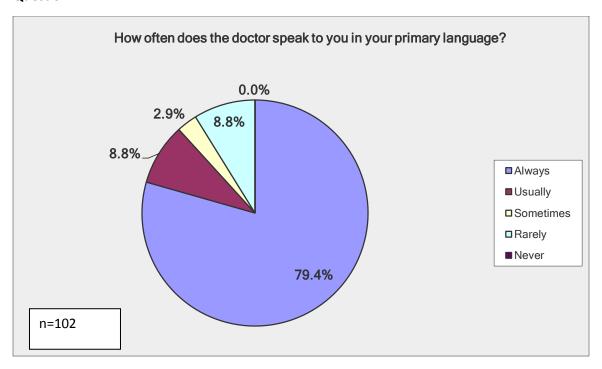


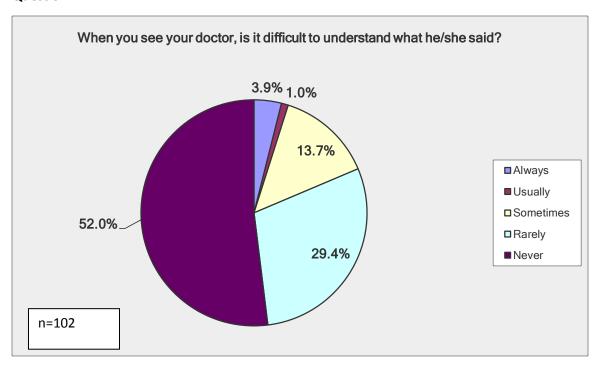


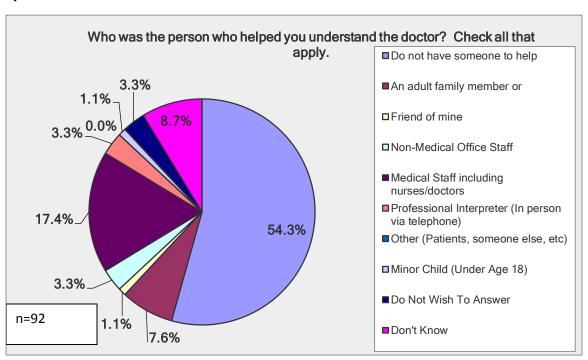


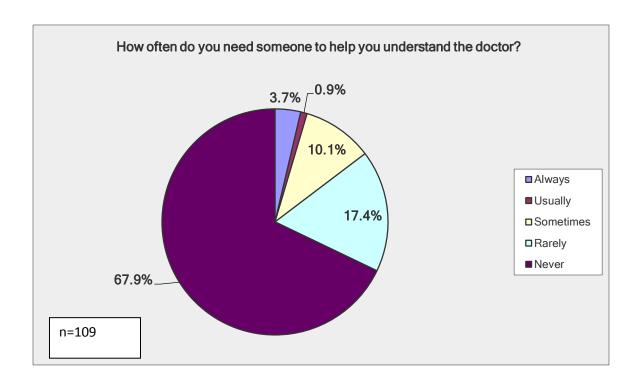


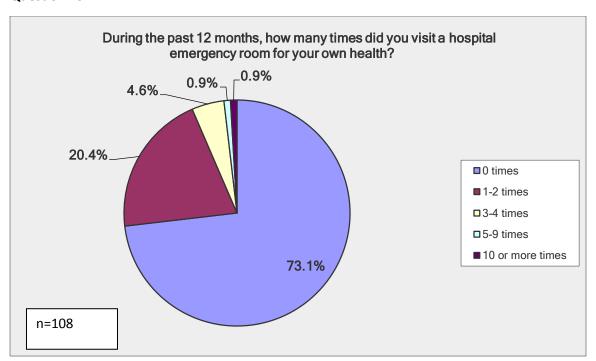


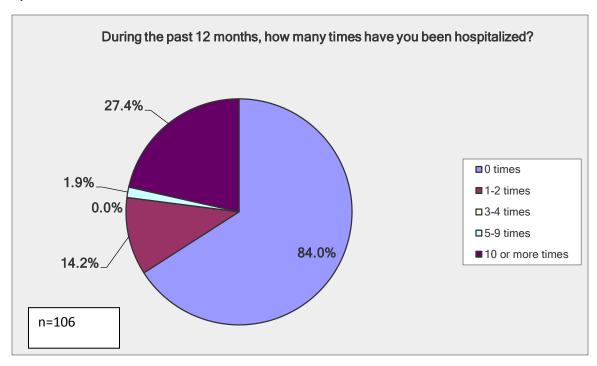


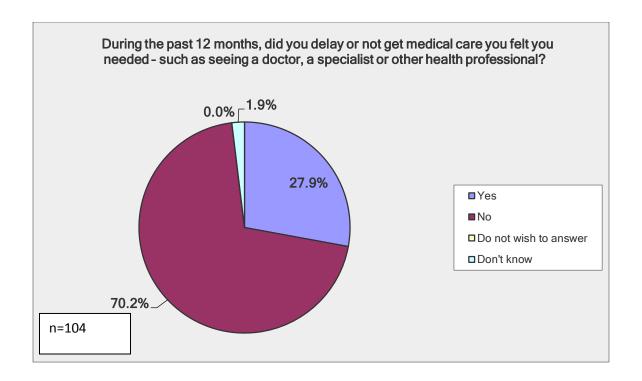


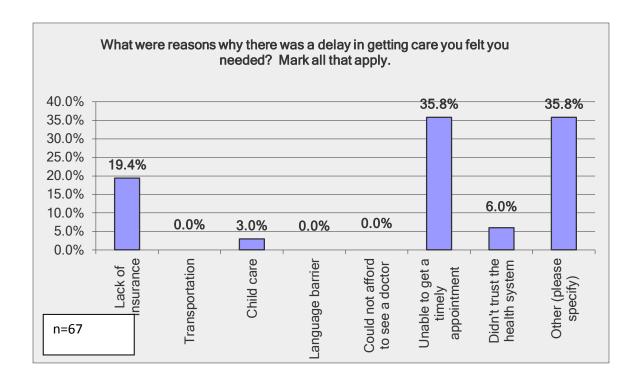


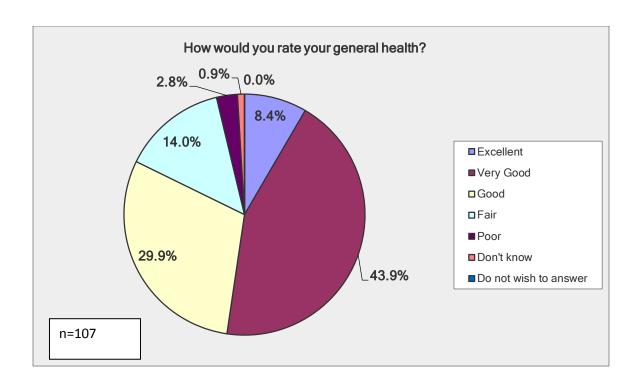


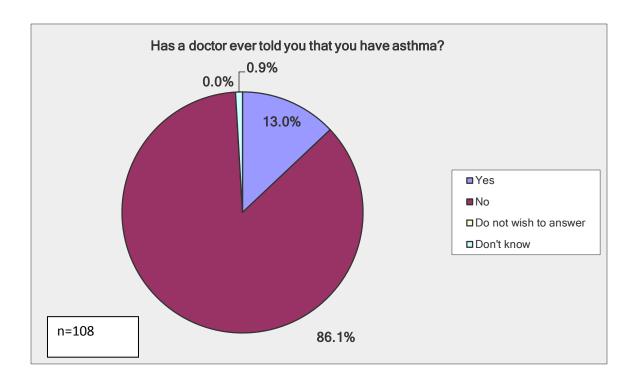


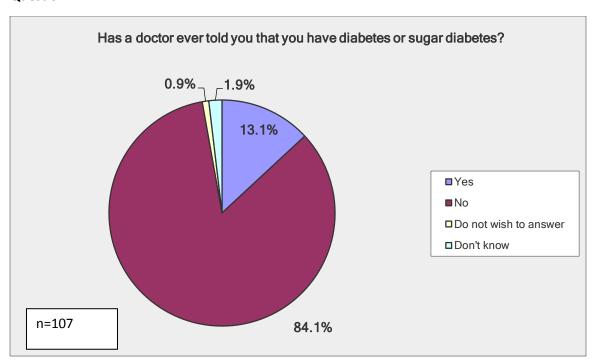


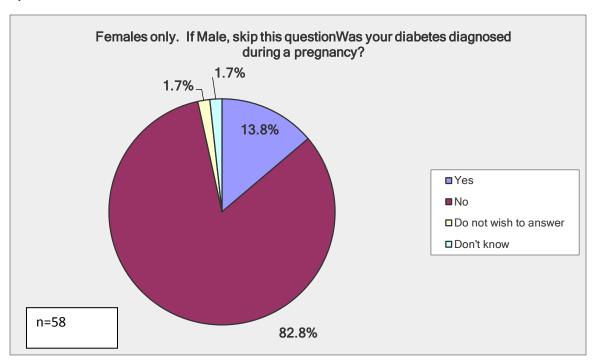


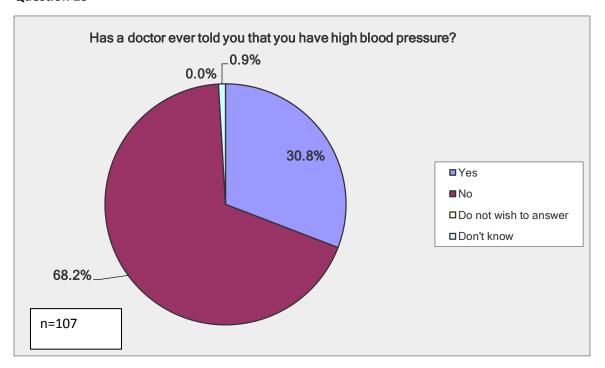


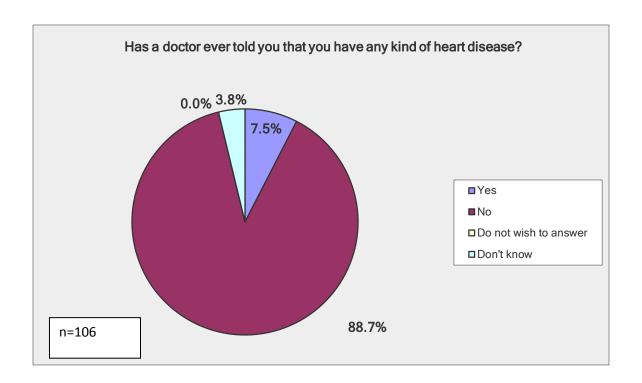


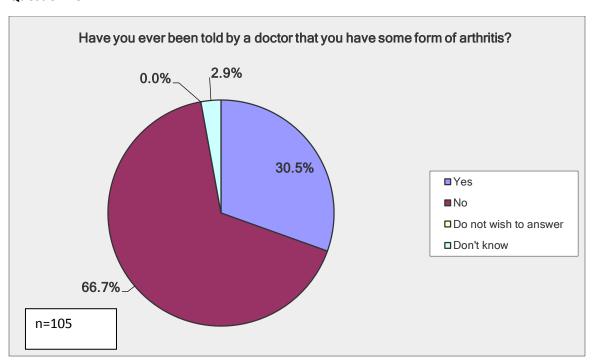


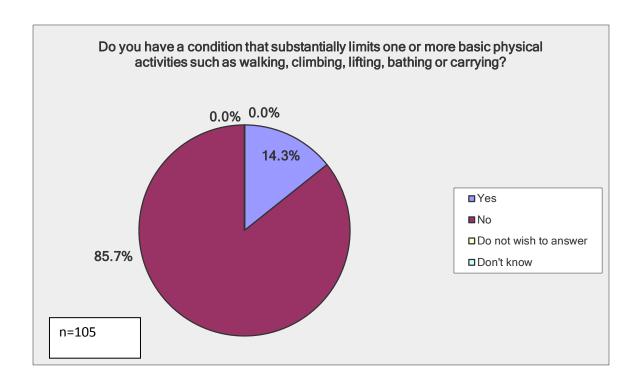


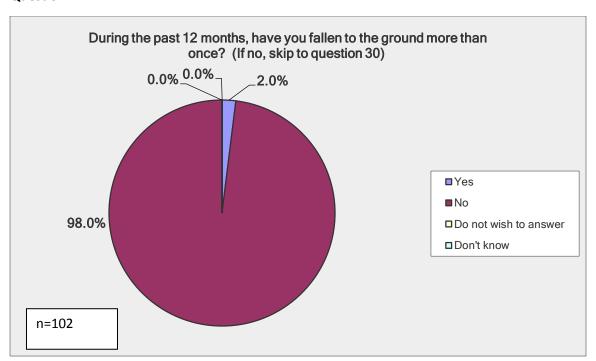


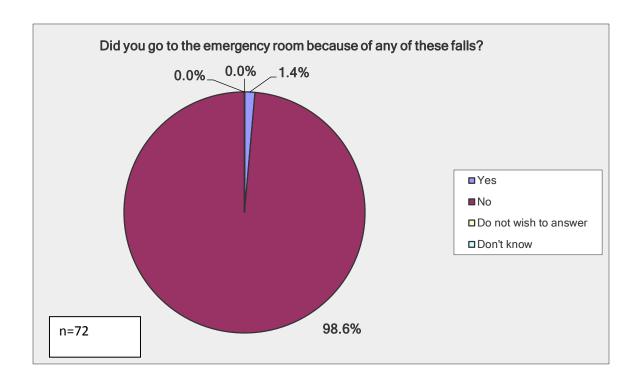


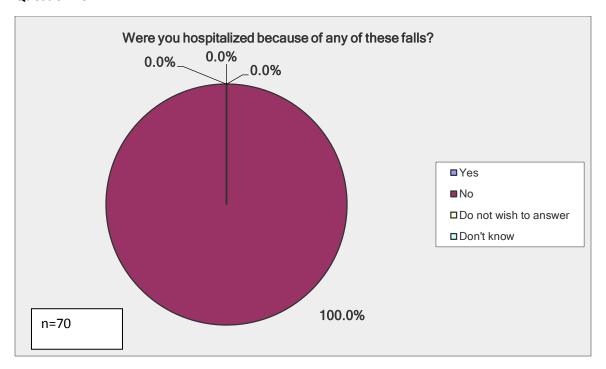


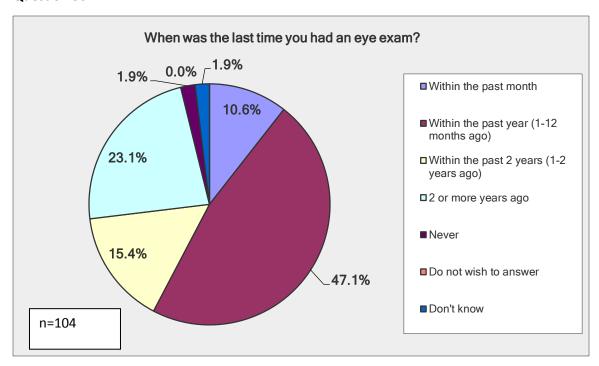


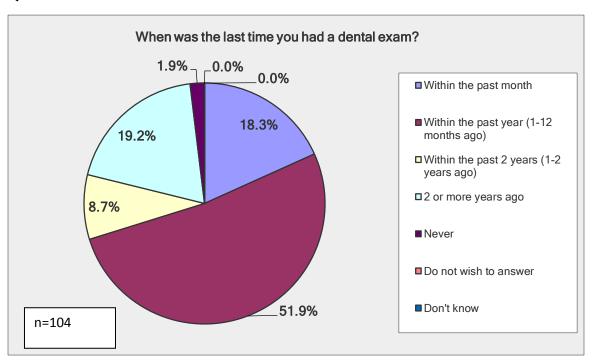


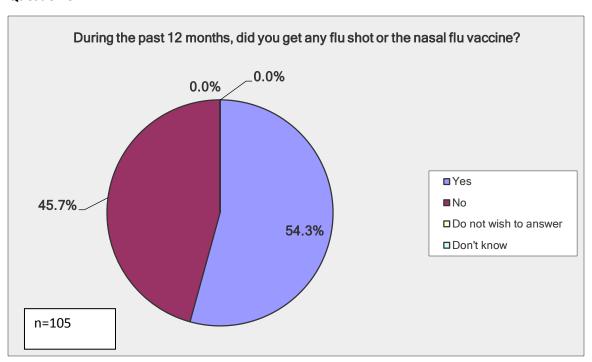


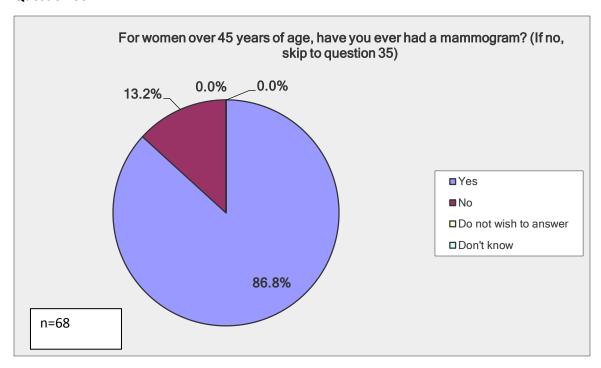






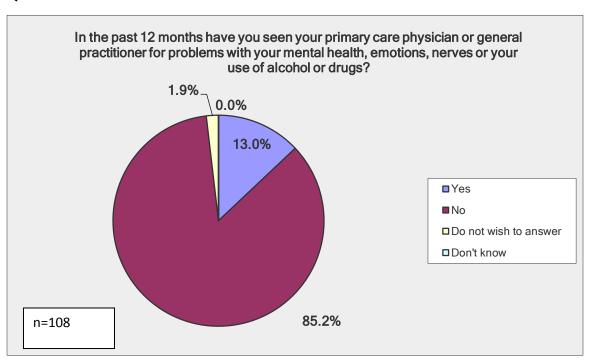


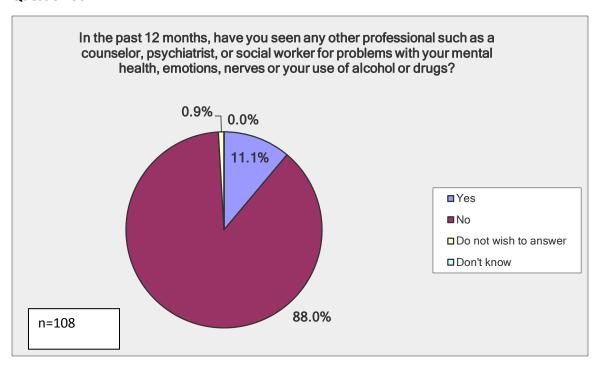




Question 34

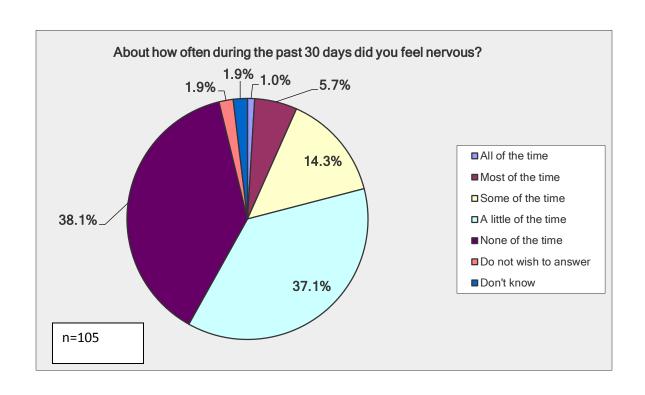
How long ago did you have your most recent mammogram?	
Answer Options	Response Count
	57
answered question	57

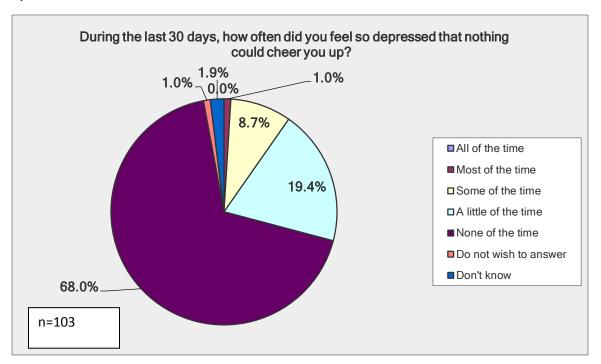


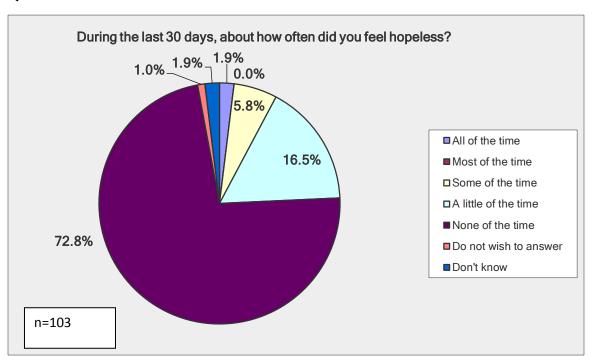


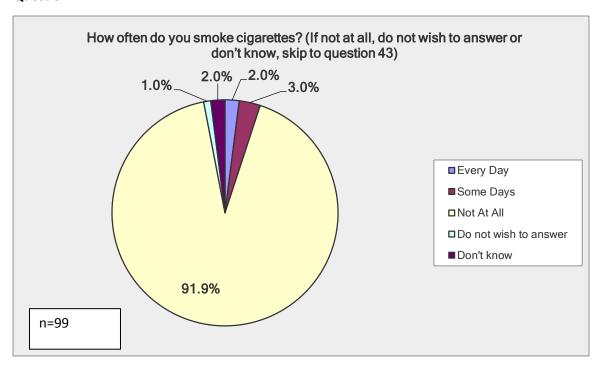
Question 37

How many days out of the past 30 days were you unable to work or carry out your normal activities because of your feeling nervous, depressed or emotionally stressed?	
Answer Options	Response Count
	85
answered question	85









Question 42

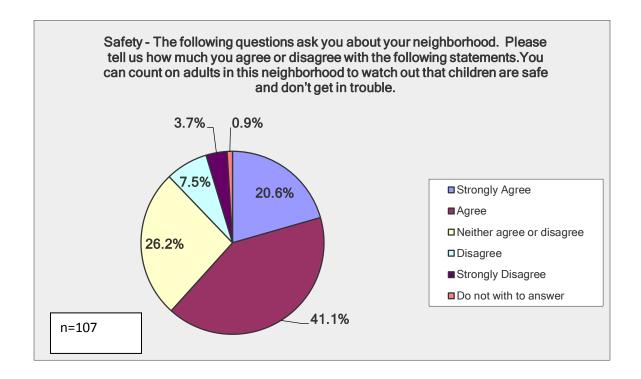
On average, how many cigarettes do you smoke a day?	
Answer Options	Response Count
	53
answered question	53

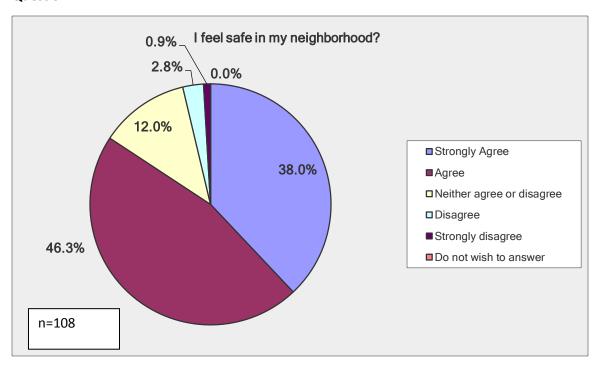
Question 43

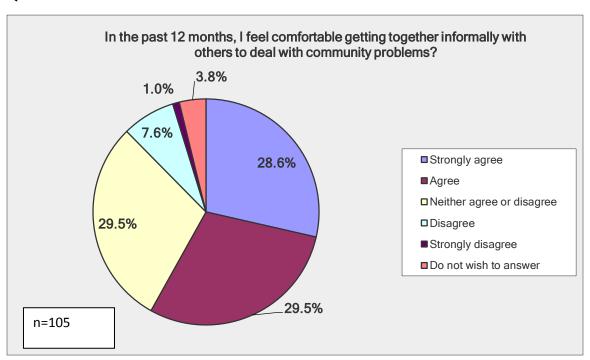
In the past 12 months, about how many times did you have 1 or 2 alcoholic drinks in a single day?	
Answer Options	Response Count
	99
answered question	99

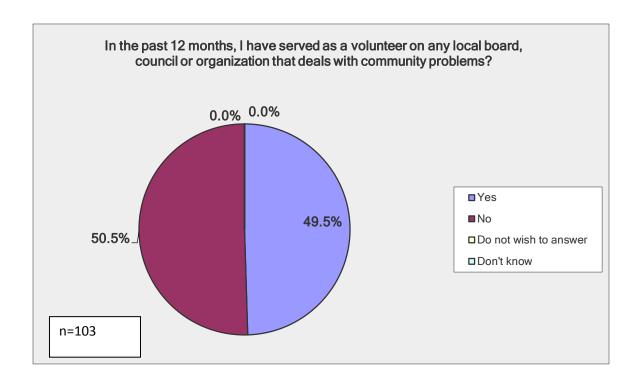
In the past 12 months, about how many times did you have 3 or 4 alcoholic drinks in a single day?	
Answer Options	Response Count
	97
answered question	97

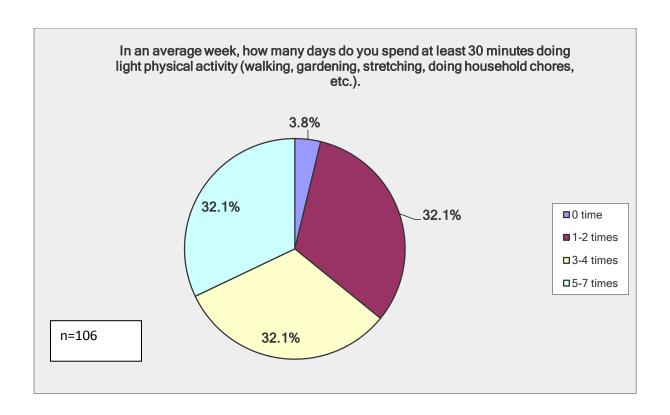
In the past 12 months, about how many times did you have 5 or more alcoholic drinks in a single day?	
Answer Options	Response Count
	95
answered question	95

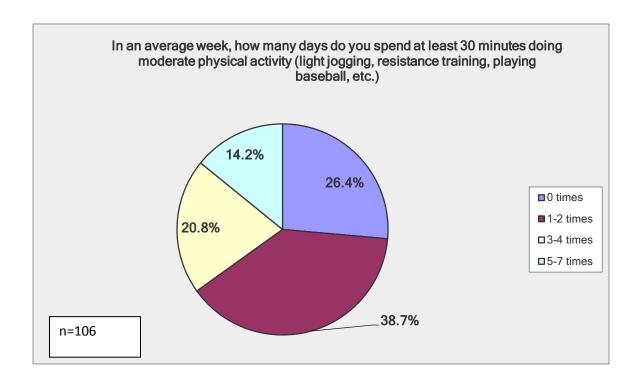


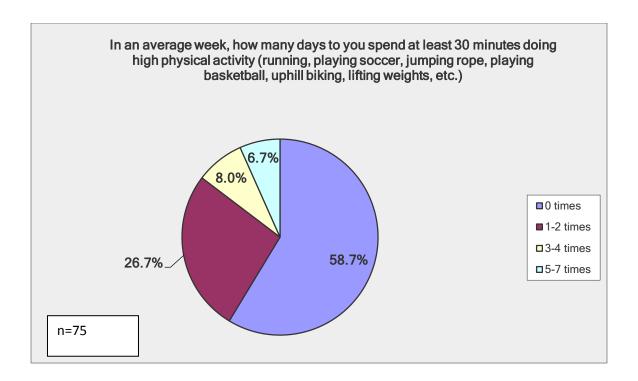












All other quality of life survey results are provided in the hospital specific analysis section.

Hospital Specific Analysis

Loma Linda University Medical Center Service Area Top 25 Discharges by DRG, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	25,259
870/871/872	Septicemia	16,885
469/470	Major joint replacement/reattachment lower extremity	10,451
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	9,007
291/292/293	Heart failure & shock	8,607
193/194/195	Simple pneumonia & Pleurisy	7,561
313	Chest pain	6,175
682/683/684	Renal failure	5,933
064/065/066	Intercranial hemorrhage or cerebral infarction	5,458
190/191/192	Chronic obstructive pulmonary disease	5,370
417/418/419	Laparoscopic cholecystectomy	5,310
308/309/310	Cardiac arrhythmia & conduction disorders	5,299
689/690	Urinary tract infections	5,108
736-743	Uterine & adnexa procedures	5,008
602/603	Cellulitis	4,714
246-251	Percutaneous cardiovascular procedures	4,696
377/378/379	G.I. hemorrhage	4,660
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	4,456
894-897	Alcohol/drug abuse or dependence	4,389
637/638/639	Diabetes	4,326
338-343	Appendectomy	4,103
945/946	Rehabilitation	4,076
202/203	Bronchitis & asthma	3,816
811/812	Red blood cell disorders	3,264
100/101	Seizures	3,150
TOTAL		167,081

Top DRG Discharges among Loma Linda University Medical Center Service Area by Race/Ethnicity, 2014

LLUMC's Top DRG among Service Area Non-Hispanic White Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	11,971
870/871/872	Septicemia	8,859
469/470	Major joint replacement/reattachment lower extremity	7,330
291/292/293	Heart failure & shock	4,420
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	4,353
193/194/195	Simple pneumonia & Pleurisy	3,958
190/191/192	Chronic obstructive pulmonary disease	3,681
308/309/310	Cardiac arrhythmia	3,409
064/065/066	Intercranial hemorrhage or cerebral infarction	2,902
945/946	Rehabilitation	2,870
682/683/684	Renal failure	2,847
313	Chest pain	2,845
894-897	Alcohol/drug abuse or dependence	2,819
246-251	Percutaneous cardiovascular procedures	2,801

689/690	Urinary tract infections	2,745
602/603	Cellulitis	2,661
377/378/379	G.I. hemorrhage	2,475
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	2,152
736-743	Uterine & adnexa procedures	2,125
417/418/419	Laparoscopic cholecystectomy	1,891
637/638/639	Diabetes	1,726
286/287	Circulatory disorders	1,572
456-460	Spinal Fusion	1,563
189	Pulmonary edema & respiratory disorders	1,455
100/101	Seizures	1,389
338-343	Appendectomy	1,352
202/203	Bronchitis & asthma	1,124
811/812	Red blood cell disorders	1,051
Total		90,346

LLUMC's Top DRG among Service Area Hispanic (Any Race) Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	7,617
870/871/872	Septicemia	5,185
291/292/293	Heart failure & shock	3,063
682/683/684	Renal failure	2,754
193/194/195	Simple pneumonia & Pleurisy	2,452
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	2,314
286/287	Circulatory disorders	2,312
190/191/192	Chronic obstructive pulmonary disease	1,934
469/470	Major joint replacement/reattachment lower extremity	1,893
246-251	Percutaneous cardiovascular procedures	1,870
308/309/310	Cardiac arrhythmia	1,816
456-460	Spinal Fusion	1,801
417/418/419	Laparoscopic cholecystectomy	1,715
894-897	Alcohol/drug abuse or dependence	1,643
689/690	Urinary tract infections	1,509
064/065/066	Intercranial hemorrhage or cerebral infarction	1,498
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	1,468
377/378/379	G.I. hemorrhage	1,361
313	Chest pain	1,131
100/101	Seizures	1,092
602/603	Cellulitis	1,057
736-743	Uterine & adnexa procedures	1,033
189	Pulmonary edema & respiratory disorders	950
338-343	Appendectomy	847
945/946	Rehabilitation	830
637/638/639	Diabetes	804
202/203	Bronchitis & asthma	579
811/812	Red blood cell disorders	531

Total 53,059

LLUMC's Top DRG among Service Area Non-Hispanic Black Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	4,021
870/871/872	Septicemia	1,536
291/292/293	Heart failure & shock	677
682/683/684	Renal failure	912
193/194/195	Simple pneumonia & Pleurisy	1,313
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	631
286/287	Circulatory disorders	936
190/191/192	Chronic obstructive pulmonary disease	866
469/470	Major joint replacement/reattachment lower extremity	572
246-251	Percutaneous cardiovascular procedures	615
308/309/310	Cardiac arrhythmia	276
456-460	Spinal Fusion	399
417/418/419	Laparoscopic cholecystectomy	402
894-897	Alcohol/drug abuse or dependence	536
689/690	Urinary tract infections	300
064/065/066	Intercranial hemorrhage or cerebral infarction	301
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	448
377/378/379	G.I. hemorrhage	430
313	Chest pain	276
100/101	Seizures	625
602/603	Cellulitis	239
736-743	Uterine & adnexa procedures	135
189	Pulmonary edema & respiratory disorders	622
338-343	Appendectomy	1,034
945/946	Rehabilitation	450
637/638/639	Diabetes	360
202/203	Bronchitis & asthma	296
811/812	Red blood cell disorders	160
Total		19,368

LLUMC's Top DRG among Service Area Non-Hispanic Asian Residents, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	614
885	Psychoses	472
193/194/195	Simple pneumonia & Pleurisy	238
682/683/684	Renal failure	237
894-897	Alcohol/drug abuse or dependence	236
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	234
469/470	Major joint replacement/reattachment lower extremity	223
377/378/379	G.I. hemorrhage	212
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	210

291/292/293	Heart failure & shock	209
190/191/192	Chronic obstructive pulmonary disease	207
286/287	Circulatory disorders	170
064/065/066	Intercranial hemorrhage or cerebral infarction	168
456-460	Spinal Fusion	154
308/309/310	Cardiac arrhythmia	142
338-343	Appendectomy	125
417/418/419	Laparoscopic cholecystectomy	116
736-743	Uterine & adnexa procedures	116
637/638/639	Diabetes	107
189	Pulmonary edema & respiratory disorders	99
100/101	Seizures	96
602/603	Cellulitis	93
246-251	Percutaneous cardiovascular procedures	80
689/690	Urinary tract infections	73
202/203	Bronchitis & asthma	70
945/946	Rehabilitation	69
313	Chest pain	53
811/812	Red blood cell disorders	53
Total		4,876

LLUMC's Top DRG among Service Area Non-Hispanic Native-American Residents, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	75
637/638/639	Diabetes	50
885	Psychoses	43
682/683/684	Renal failure	35
894-897	Alcohol/drug abuse or dependence	25
189	Pulmonary edema & respiratory disorders	23
193/194/195	Simple pneumonia & Pleurisy	22
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	20
456-460	Spinal Fusion	18
377/378/379	G.I. hemorrhage	17
064/065/066	Intercranial hemorrhage or cerebral infarction	17
417/418/419	Laparoscopic cholecystectomy	16
736-743	Uterine & adnexa procedures	16
291/292/293	Heart failure & shock	15
469/470	Major joint replacement/reattachment lower extremity	14
945/946	Rehabilitation	13
286/287	Circulatory disorders	11
308/309/310	Cardiac arrhythmia	11
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	10
338-343	Appendectomy	8
602/603	Cellulitis	8
246-251	Percutaneous cardiovascular procedures	8
190/191/192	Chronic obstructive pulmonary disease	7

100/101	Seizures	7
202/203	Bronchitis & asthma	7
811/812	Red blood cell disorders	6
689/690	Urinary tract infections	5
313	Chest pain	3
Total		510

LLUMC's Top DRG among Service Area Non-Hispanic Other/Unknown Race, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	1,105
870/871/872	Septicemia	658
682/683/684	Renal failure	414
064/065/066	Intercranial hemorrhage or cerebral infarction	366
291/292/293	Heart failure & shock	327
193/194/195	Simple pneumonia & Pleurisy	303
286/287	Circulatory disorders	279
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	272
469/470	Major joint replacement/reattachment lower extremity	261
308/309/310	Cardiac arrhythmia	241
894-897	Alcohol/drug abuse or dependence	226
456-460	Spinal Fusion	199
637/638/639	Diabetes	195
417/418/419	Laparoscopic cholecystectomy	189
190/191/192	Chronic obstructive pulmonary disease	185
736-743	Uterine & adnexa procedures	185
377/378/379	G.I. hemorrhage	182
189	Pulmonary edema & respiratory disorders	169
689/690	Urinary tract infections	167
313	Chest pain	160
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	156
246-251	Percutaneous cardiovascular procedures	150
945/946	Rehabilitation	149
100/101	Seizures	145
338-343	Appendectomy	103
602/603	Cellulitis	96
202/203	Bronchitis & asthma	95
811/812	Red blood cell disorders	80
Total		7,057

Top DRG Discharges among Loma Linda University Medical Center Service Area by Age Group, 2014

LLUMC's Top DRG among Service Area Residents under 18 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	3,938
202/203	Bronchitis & asthma	2,445

338-343	Appendectomy	1,521
193/194/195	Simple pneumonia & Pleurisy	1,347
100/101	Seizures	975
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	948
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	654
637/638/639	Diabetes	496
689/690	Urinary tract infections	474
602/603	Cellulitis	420
870/871/872	Septicemia	265
811/812	Red blood cell disorders	246
456-460	Spinal Fusion	158
417/418/419	Laparoscopic cholecystectomy	118
189	Pulmonary edema & respiratory failure	89
377/378/379	G.I. hemorrhage	88
736-743	Uterine & adnexa procedures	68
894-897	Alcohol/drug abuse or dependence	57
308/309/310	Cardiac arrhythmia & conductive disorders	56
246-251	Percutaneous cardiovascular procedures	49
682/683/684	Renal failure	44
945/946	Rehabilitation	42
313	Chest pain	25
286/287	Circulatory disorders	25
190/191/192	Chronic obstructive pulmonary disease	24
064/065/066	Intercranial hemorrhage or cerebral infarction	23
291/292/293	Heart failure & shock	17
469/470	Major joint replacement/reattachment lower extremity	9
Total		14,621

LLUMC's Top DRG among Service Area Residents 18 – 59 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	19,329
870/871/872	Septicemia	5,724
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	4,640
736-743	Uterine & adnexa procedures	4,242
417/418/419	Laparoscopic cholecystectomy	3,824
894-897	Alcohol/drug abuse or dependence	3,656
313	Chest pain	3,487
637/638/639	Diabetes	2,644
602/603	Cellulitis	2,513
469/470	Major joint replacement/reattachment lower extremity	2,465
291/292/293	Heart failure & shock	2,464
338-343	Appendectomy	2,211
682/683/684	Renal failure	2,075
193/194/195	Simple pneumonia & Pleurisy	1,947
811/812	Red blood cell disorders	1,634
689/690	Urinary tract infections	1,591

246-251	Percutaneous cardiovascular procedures	1,585
190/191/192	Chronic obstructive pulmonary disease	1,502
377/378/379	G.I. hemorrhage	1,492
064/065/066	Intercranial hemorrhage or cerebral infarction	1,474
308/309/310	Cardiac arrhythmia & conductive disorders	1,469
100/101	Seizures	1,443
286/287	Circulatory disorders	1,360
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	1,315
456-460	Spinal Fusion	1,084
945/946	Rehabilitation	1,040
202/203	Bronchitis & asthma	941
189	Pulmonary edema & respiratory failure	748
Total		79,899

LLUMC's Top DRG among Service Area Residents 60 plus Years, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	10,906
469/470	Major joint replacement/reattachment lower extremity	7,984
291/292/293	Heart failure & shock	6,132
193/194/195	Simple pneumonia & Pleurisy	4,273
064/065/066	Intercranial hemorrhage or cerebral infarction	3,969
190/191/192	Chronic obstructive pulmonary disease	3,845
682/683/684	Renal failure	3,819
308/309/310	Cardiac arrhythmia & conductive disorders	3,778
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	3,426
377/378/379	G.I. hemorrhage	3,086
246-251	Percutaneous cardiovascular procedures	3,067
689/690	Urinary tract infections	3,047
945/946	Rehabilitation	3,027
313	Chest pain	2,666
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	2,491
885	Psychoses	1,994
602/603	Cellulitis	1,788
286/287	Circulatory disorders	1,709
189	Pulmonary edema & respiratory failure	1,661
811/812	Red blood cell disorders	1,388
417/418/419	Laparoscopic cholecystectomy	1,369
637/638/639	Diabetes	1,190
456-460	Spinal Fusion	1,151
100/101	Seizures	738
736-743	Uterine & adnexa procedures	701
894-897	Alcohol/drug abuse or dependence	678
202/203	Bronchitis & asthma	437
338-343	Appendectomy	376
Total		80,696

Loma Linda University Hospital Focus Group Analysis

Question #1 – How long have you lived in the Inland Empire? If you are new to the area, what brought you here?

Data for question 1 was analyzed individually for each focus group and as an aggregate. A mean and range was calculated for each focus group and a mean, median and range was calculated for the aggregate data. Among all participants, 4.3% stated they lived in the Inland Empire their entire life. This information was not incorporated in the analysis as the number of years living in the Inland Empire was not identified for these participants. Among all participants, the highest frequency of individual years living in the Inland Empire was six and eight years; 8.7% for each.

A. Loma Linda

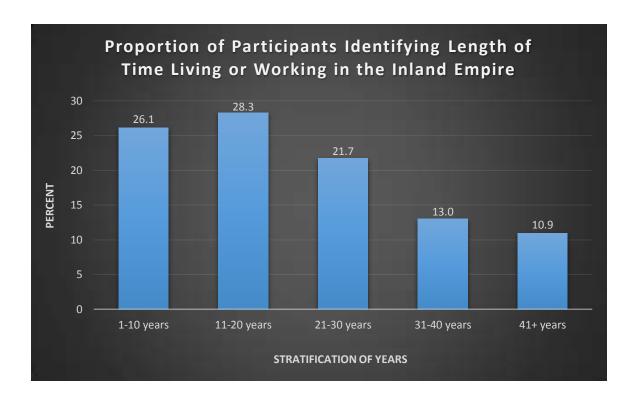
- a. Mean 32 years
- b. Range (13-54 years)

Overall Participating Hospitals (Aggregate)

Mean - 21.8 years

Median - 19 years

Range – 1-56 years



Question #2 – What if anything is different about your community now that was not the case five years ago?

- Built environment (neighborhoods)

 see closure of small businesses and shops,
 area looking run down
 - restoration project of Riverside

- infrastructure of Loma Linda has changed leading to more fast food restaurants
- transportation increase in traffic, highways have more lanes and more connections

Question #3 – What kind of projects, if any, have people in your community worked on together in the past five years? (Note: Participants stated they were members of organizations who assist with services)

- 1. Youth education programs addressing school to prison pipeline, after school programs, San Bernardino has a strong partnerships with colleges
- 2. Collaboration efforts with faith based organizations, nonprofit organizations participate in addressing the built environment of the community so as to include access to health care and transportation needs

Question #4 – Think about your community over the next five years, what changes would you make or not make and why?

- 1. Physical activity more walking spaces, biking trails, larger roads for pedestrian and bikers to share with vehicle, sidewalks in Riverside and San Bernardino so people can walk
- 2. Program that address climate change cut fewer trees as this is significant to our changing climate
- 3. Programs that address the increase in traffic

Question #5 – If you knew someone was thinking about moving to your community, what would you tell them or her about the area to convince them to move or not to move?

I – Positive

- 1. Access to healthcare services
- 2. Commute to work is short
- 3. Increased number of jobs, particularly for high skill labor

II - Negative

- 1. Distance to services/resources too far
- 2. Housing is not affordable, not many homes available for occupancy because housing is expensive
- 3. Cost of living to expensive, particularly utilities such as water and electricity
- 4. Public transportation slow
- 5. Public schools not necessarily good
- 6. Poverty rate increasing

Question #6 – Describe how your community could be improved.

- Physical activity more walking spaces, biking trails, larger roads for pedestrian and bikers to share with vehicle, sidewalks in Riverside and San Bernardino so people can walk
- 2. Program that address climate change cut fewer trees as this is significant to our changing climate

3. Programs that address the increase in traffic

Question #7 – What makes your community a healthy community?

- 1. An environment that has access to recreational activities, such as walking paths, soccer fields, hiking paths, running paths, biking lanes
- 2. Community activities that are multi-generational
- 3. Culture

Question #8 – What makes your community unhealthy?

- 1. The abundance of fast foods restaurants and the lack of grocery stores
- 2. Traffic
- 3. Lack of trails for people who want to exercise

Question #9 – Describe barriers that may pose challenges to achieving positive community health.

- 1. Lack of services and resources at parks due to drug activity. For instance, bathrooms are lock and no lighting at night so people do not feel safe.
- 2. Lack of parking near hiking trails
- 3. Undocumented population with no medical services
- 4. Lack of medical services for seniors, especially dental

Question #10 – From what health problems do people in your community suffer?

- 1. Chronic diseases HTN, diabetes, asthma, metabolic syndrome disease
- 2. Diseases caused by the environment and pollution. This impacts air quality
- 3. Health problems instigated from unhealthy eating and lack of exercise

Question #11 – Where do people in your community go to receive health care?

- 1. Uninsured go to county hospitals
- 2. Free clinics
- 3. Emergency rooms
- 4. Mexico

Question #12 – What, if any, environmental health concerns do you face in your community?

1. Crime and safety

Question #13 – Think about the issues we have talked about today. What issues do you think are the most important for your community to address? Why?

- 1. Availability of healthy option for students. For instance, healthy activities focusing on physical activity and healthy foods.
- 2. Workforce development. The community needs to keep the workforce in the area. Once students graduate from local schools it's important to keep them here especially if they grew up in this community.
- 3. Educating teachers who are not from this community but come here to tech to teach that children who live here have different social circumstances

Question #14 – Think about the strengths in your community we have talked about today. What do you think is the community's greatest asset?

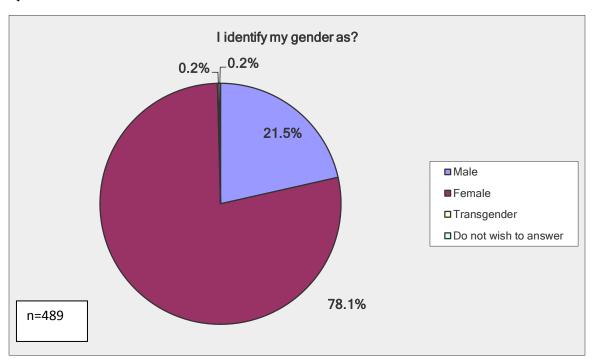
1. People are supportive and engaged, parent and teacher organizations are well attended, volunteerism, interpreters, renovation of streets, a lot of places to walk

Question #15 – Is there anything else we have not asked about that is important for us to know about in your community?

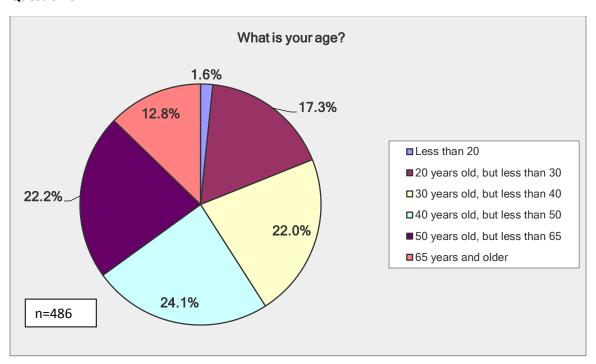
The involvement of city youth (the youth provide support), the community needs more money to improve resources, opportunities for people to get to know each other, churches and universities help out with the community's needs, especially during a crisis (faith based organizations respond fast when community is in need) diversity of backgrounds in the community, children from different socio-economic statuses go to the same school, there is a sense of safety in the community.

Loma Linda University Medical Center QOLS Service Area Analysis

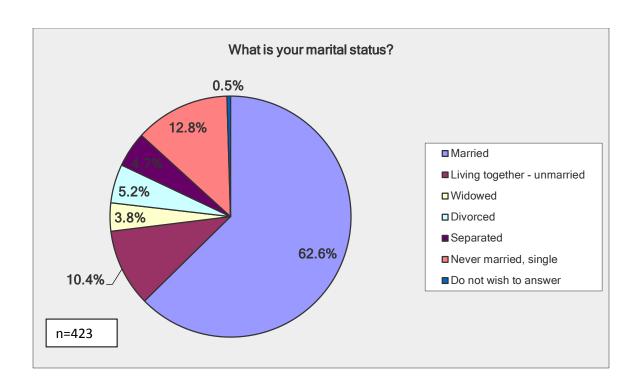
Question 1

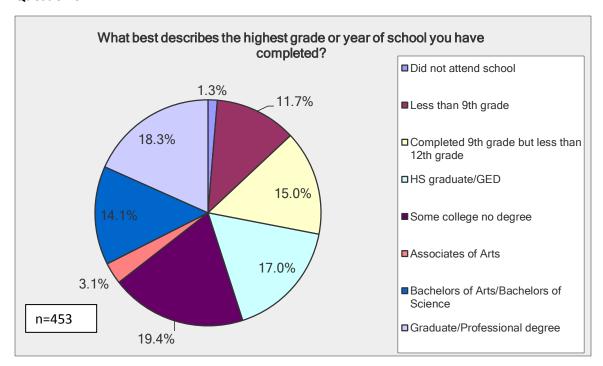


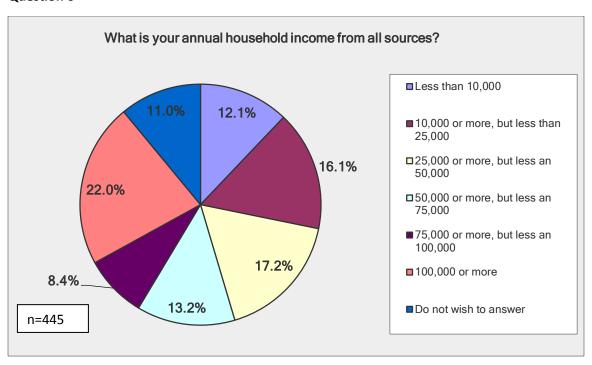
What is your zip code?	
Answer Options	Response Count
	489
answered question	489

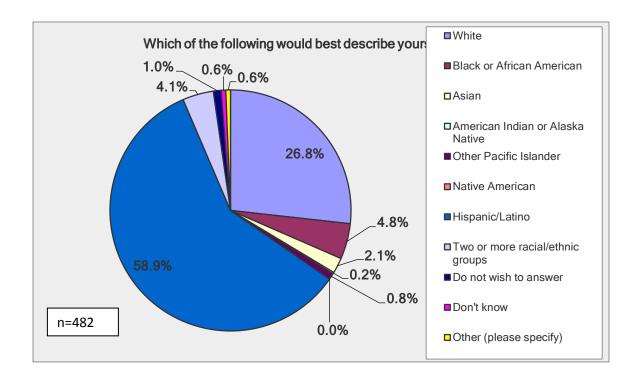


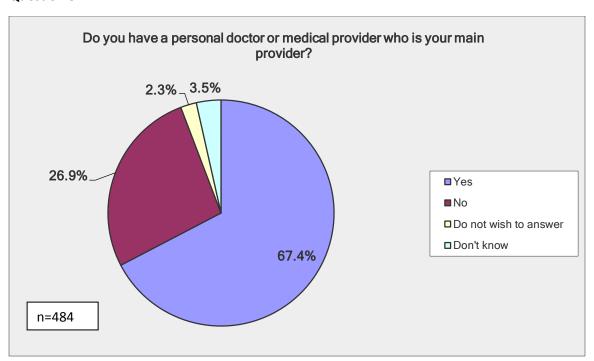
Question 4

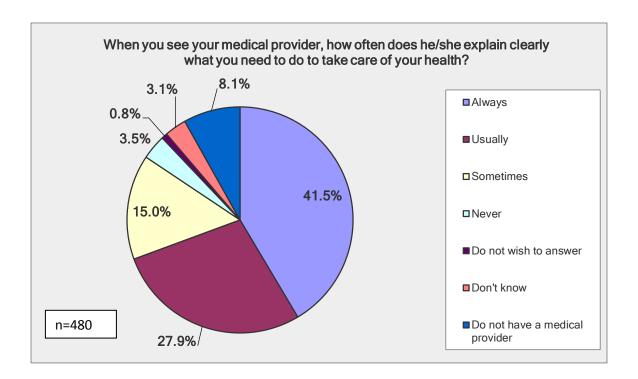


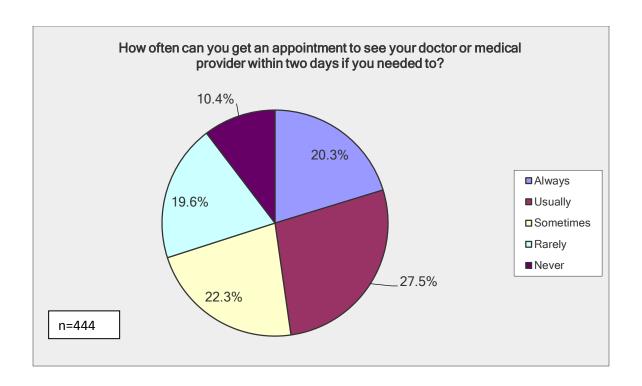


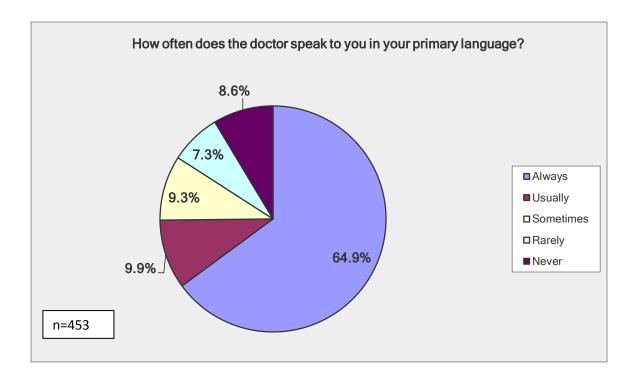


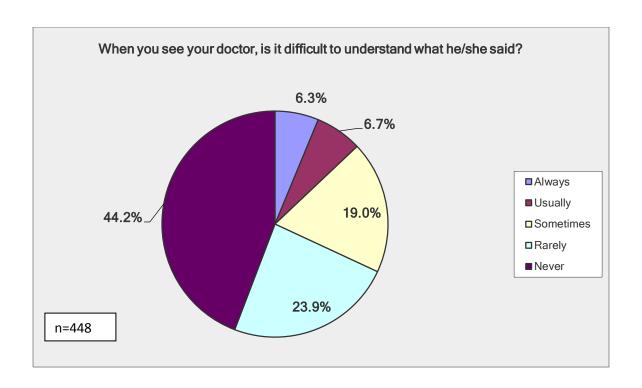


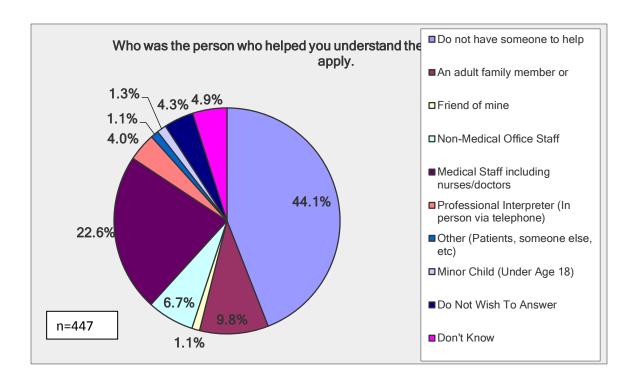


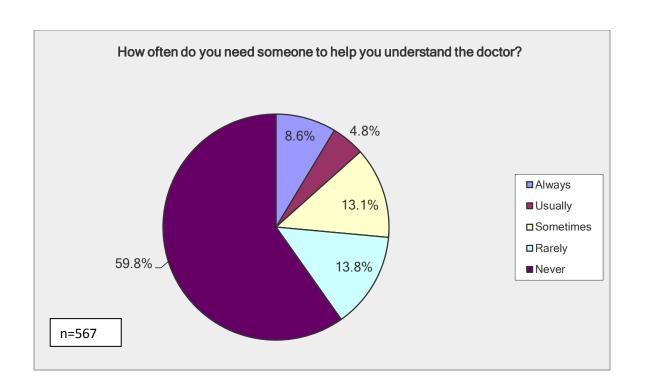


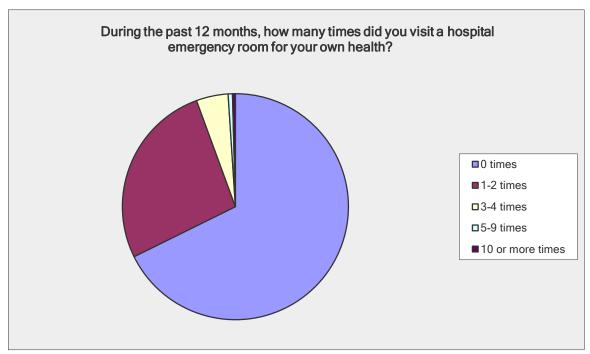




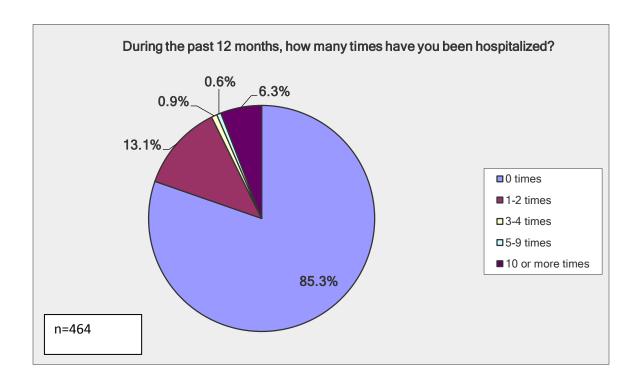


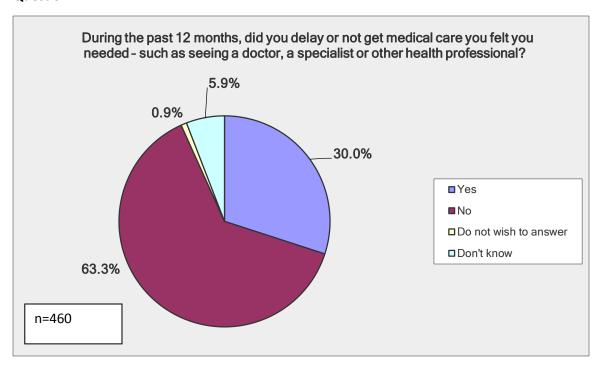


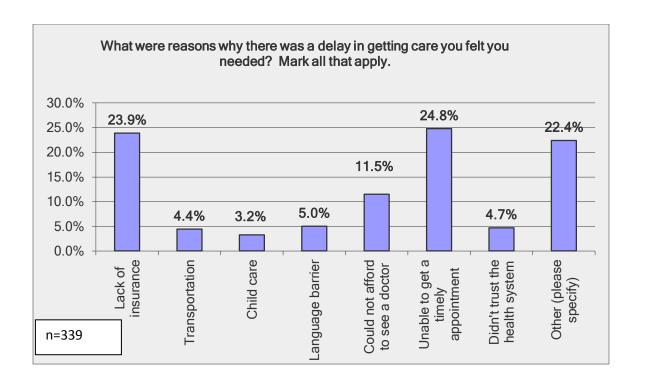


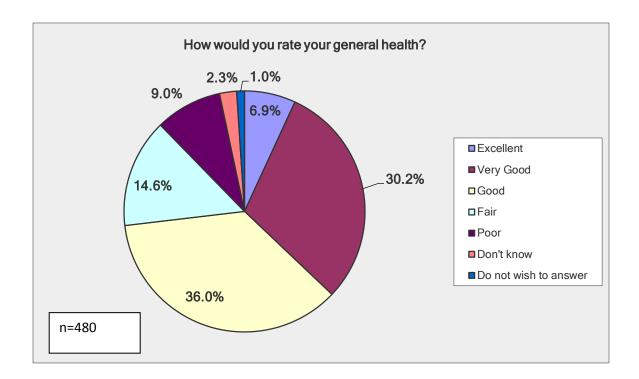


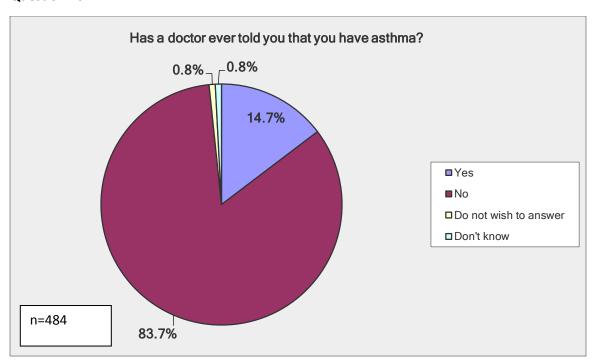
Question 16

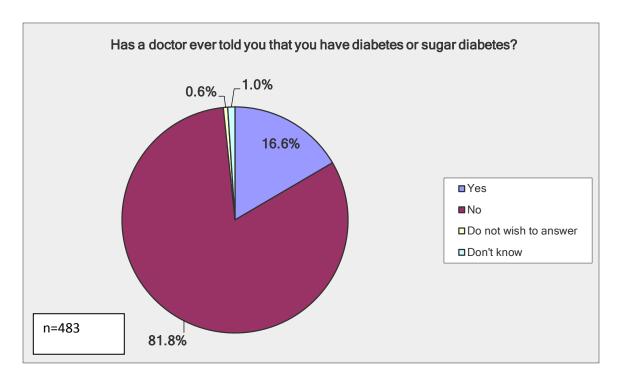




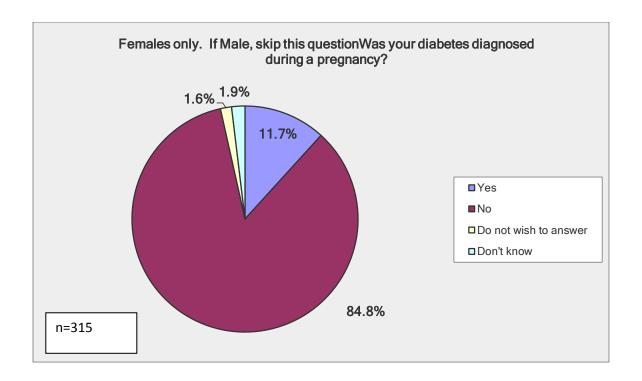


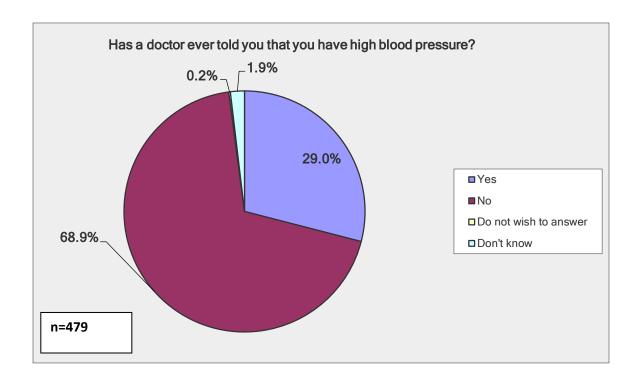


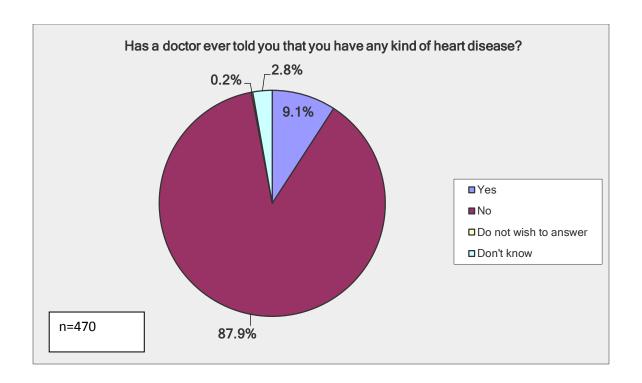


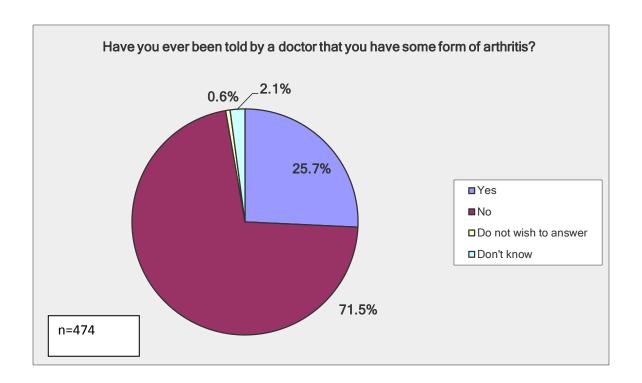


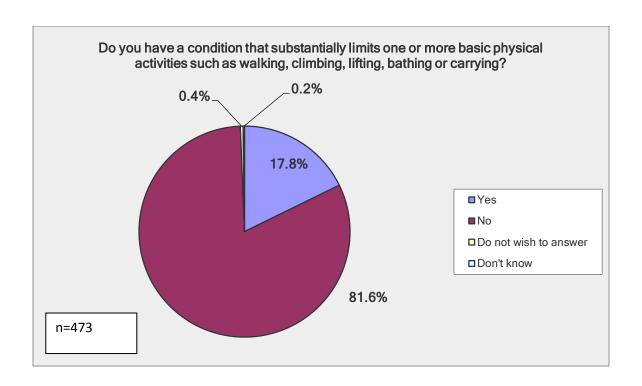
Question 22

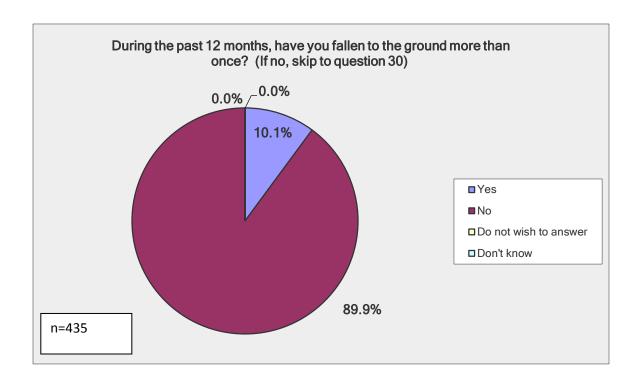


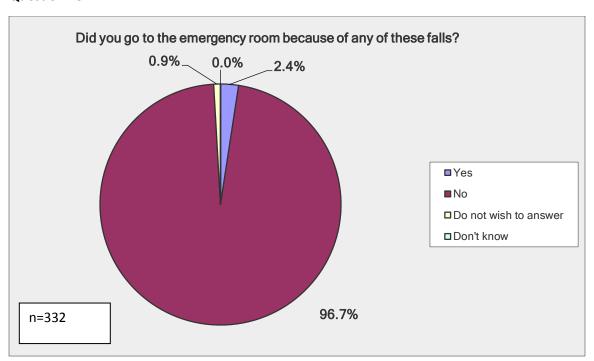


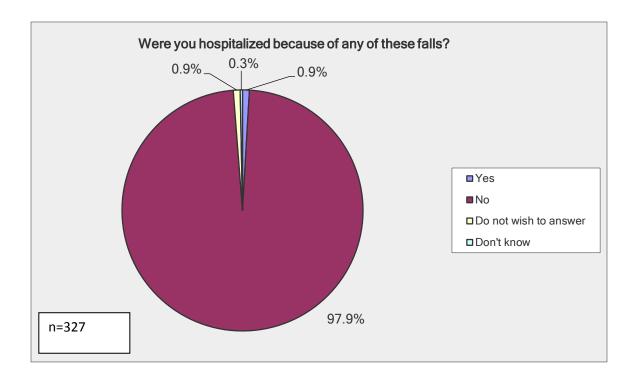


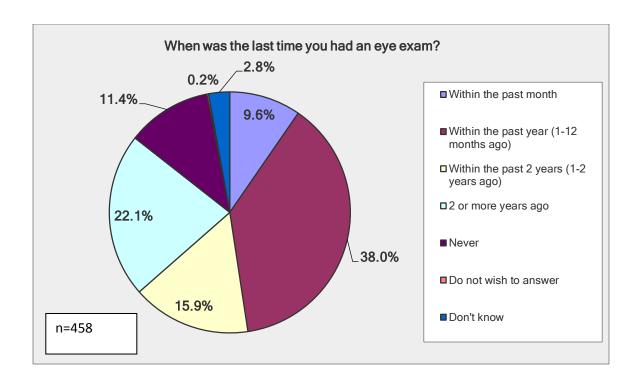


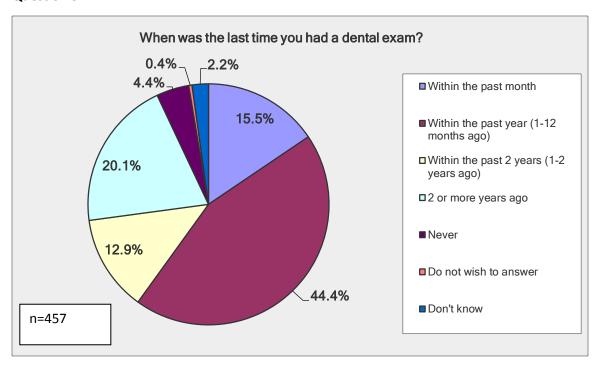


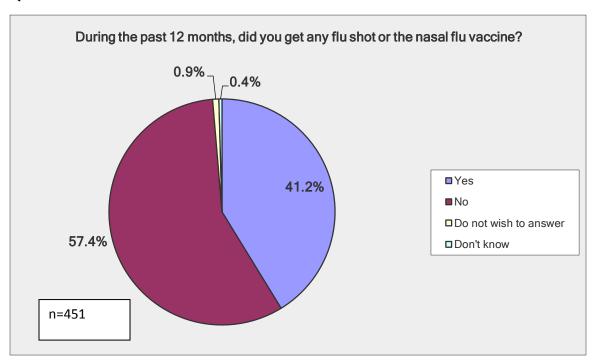


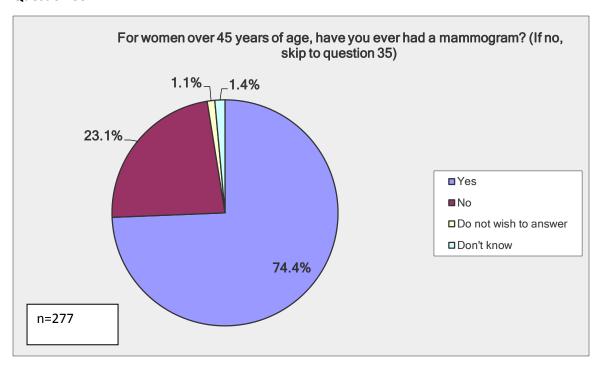




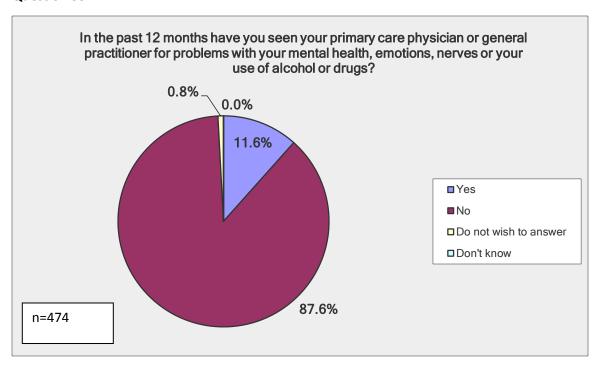


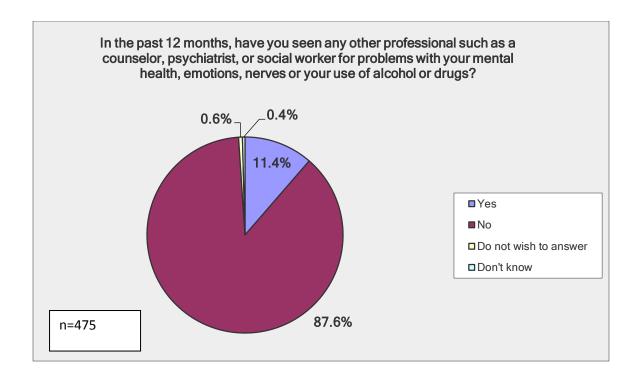






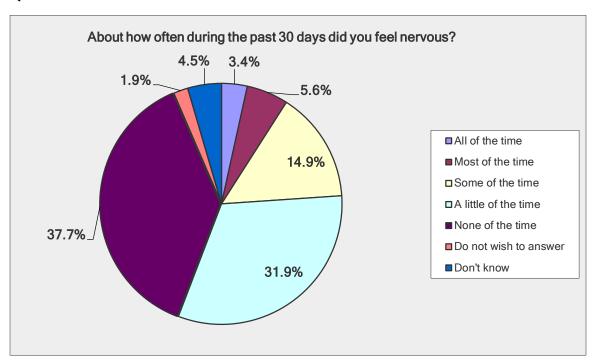
How long ago did you have your most recent mammogram?	
Answer Options	Response Count
	218
answered question 218	

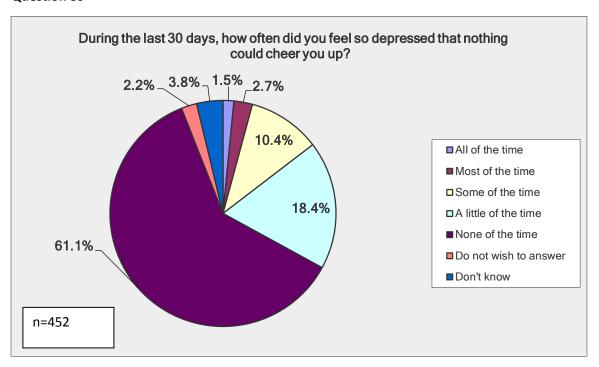


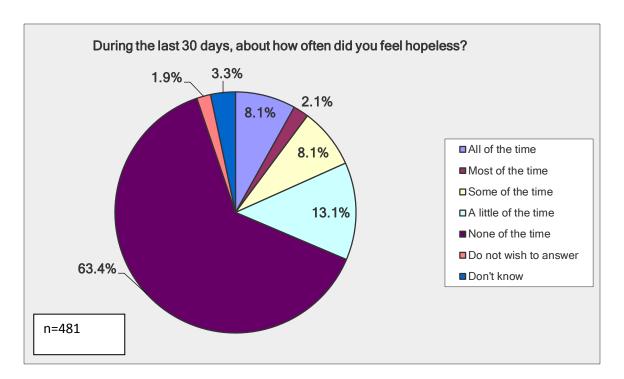


How many days out of the past 30 days were you unable to work or carry out your normal activities because of your feeling nervous, depressed or emotionally stressed?		
Answer Options Respons Count		
327		
answered question 327		

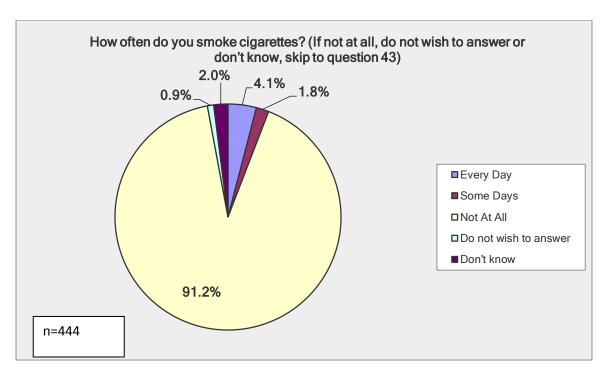
Question 38







Question 41



Question 42

On average, how many cigarettes do you smoke a day?			
Answer Options Response Count			
	229		
answered question 229			

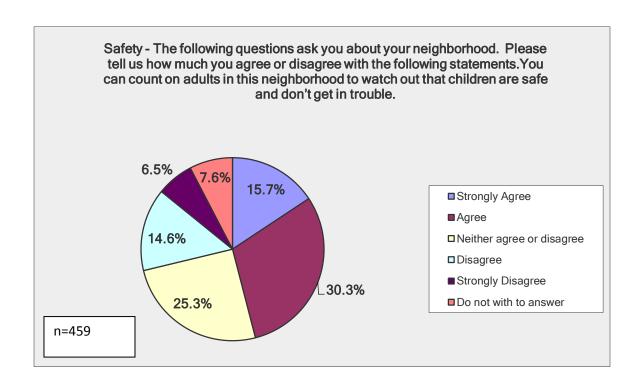
In the past 12 months, about how many times did you have 1 or 2 alcoholic drinks in a single day?	
Answer Options Response Count	
	422
answered question 422	

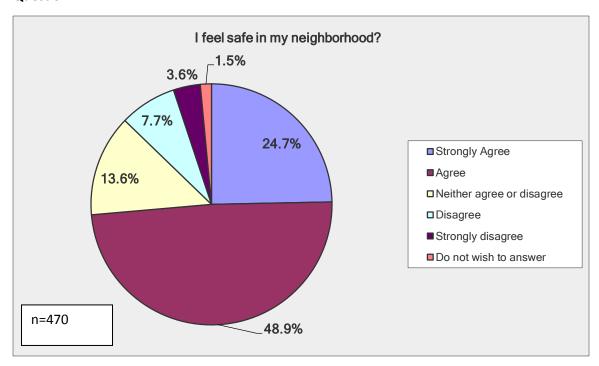
Question 44

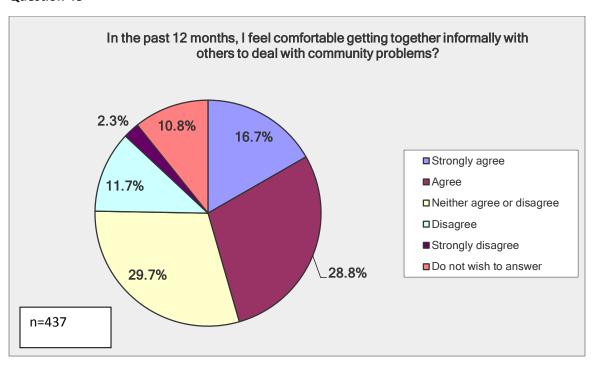
In the past 12 months, about how many times did you have 3 or 4 alcoholic drinks in a single day?	
Answer Options Respond Count	
	405
answered question	405

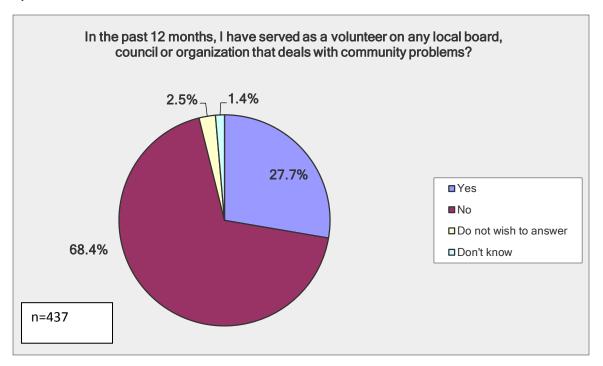
Question 45

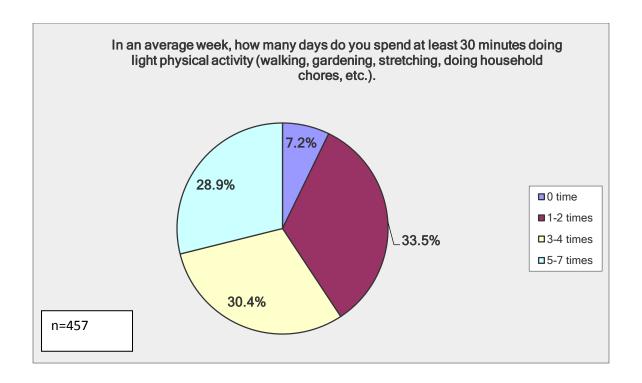
In the past 12 months, about how many times did you have 5 or more alcoholic drinks in a single day?	
Answer Options	Response Count
	406
answered question	406

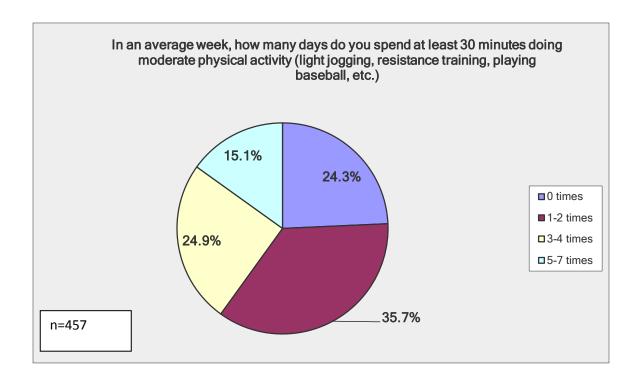


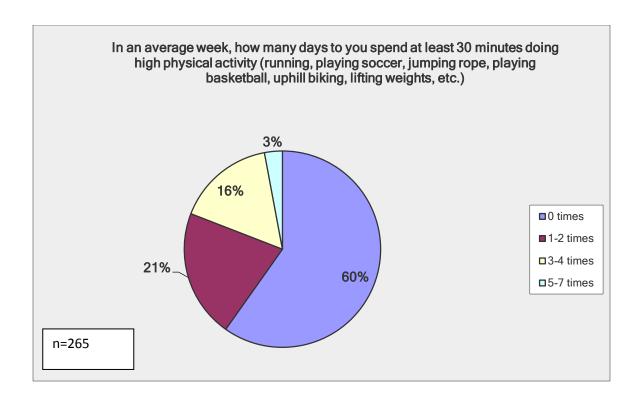












Loma Linda University Medical Center-Murrieta Service Area Top 25 Discharges by DRG, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	6,774
870/871/872	Septicemia	5,083
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	2,343
469/470	Major joint replacement/reattachment lower extremity	2,193
291/292/293	Heart failure & shock	1,937
193/194/195	Simple pneumonia & Pleurisy	1,612
736-743	Uterine & adnexa procedures	1,446
682/683/684	Renal failure	1,399
417/418/419	Laparoscopic cholecystectomy	1,379
064/065/066	Intercranial hemorrhage or cerebral infarction	1,276
689/690	Urinary tract infections	1,159
602/603	Cellulitis	1,131
338-343	Appendectomy	1,106
945/946	Rehabilitation	1,103
308/309/310	Cardiac arrhythmia & conduction disorders	1,071
377/378/379	G.I. hemorrhage	1,057
313	Chest pain	1,054
637/638/639	Diabetes	1,043
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	1,027
246-251	Percutaneous cardiovascular procedures	1,023
894-897	Alcohol/drug abuse or dependence	1,014
202/203	Bronchitis & asthma	962
811/812	Red blood cell disorders	833
190/191/192	Chronic obstructive pulmonary disease	818
189	Pulmonary edema & respiratory failure	738
TOTAL		40,581

Top DRG Discharges among Loma Linda University Medical Center-Murietta Service Area by Race/Ethnicity, 2014

LLUMC-Murietta's Top DRG among Service Area Non-Hispanic White Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	5693
870/871/872	Septicemia	4661
469/470	Major joint replacement/reattachment lower extremity	4618
291/292/293	Heart failure & shock	2845
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	2807
190/191/192	Chronic obstructive pulmonary disease	2564
193/194/195	Simple pneumonia & Pleurisy	2511
308/309/310	Cardiac arrhythmia & conduction disorders	2185
313	Chest pain	2014
682/683/684	Renal failure	1842
246-251	Percutaneous cardiovascular procedures	1832
689/690	Urinary tract infections	1827

945/946	Rehabilitation	1798
064/065/066	Intercranial hemorrhage or cerebral infarction	1774
602/603	Cellulitis	1624
894-897	Alcohol/drug abuse or dependence	1608
377/378/379	G.I. hemorrhage	1599
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	1316
736-743	Uterine & adnexa procedures	1205
417/418/419	Laparoscopic cholecystectomy	1184
286/287	Circulatory disorders	1064
637/638/639	Diabetes	1054
456-460	Spinal fusion	1006
100/101	Seizures	881
189	Pulmonary edema & respiratory failure	831
338-343	Appendectomy	810
202/203	Bronchitis & asthma	702
811/812	Red blood cell disorders	598
Total		54453

LLUMC-Murietta's Top DRG among Service Area Hispanic (Any Race) Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	2764
870/871/872	Septicemia	1789
291/292/293	Heart failure & shock	1394
945/946	Rehabilitation	1202
190/191/192	Chronic obstructive pulmonary disease	1149
637/638/639	Diabetes	1028
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	982
193/194/195	Simple pneumonia & Pleurisy	915
469/470	Major joint replacement/reattachment lower extremity	864
377/378/379	G.I. hemorrhage	762
456-460	Spinal fusion	729
286/287	Circulatory disorders	723
313	Chest pain	713
246-251	Percutaneous cardiovascular procedures	681
689/690	Urinary tract infections	613
894-897	Alcohol/drug abuse or dependence	608
417/418/419	Laparoscopic cholecystectomy	588
602/603	Cellulitis	587
682/683/684	Renal failure	490
064/065/066	Intercranial hemorrhage or cerebral infarction	489
189	Pulmonary edema & respiratory failure	465
736-743	Uterine & adnexa procedures	429
308/309/310	Cardiac arrhythmia & conduction disorders	416
100/101	Seizures	388
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	375
202/203	Bronchitis & asthma	340

338-343	Appendectomy	244
811/812	Red blood cell disorders	213
Total		21940

LLUMC-Murietta's Top DRG among Service Area Non-Hispanic Black Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	1121
190/191/192	Chronic obstructive pulmonary disease	563
870/871/872	Septicemia	488
945/946	Rehabilitation	432
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	420
469/470	Major joint replacement/reattachment lower extremity	340
338-343	Appendectomy	336
193/194/195	Simple pneumonia & Pleurisy	294
637/638/639	Diabetes	287
189	Pulmonary edema & respiratory failure	266
291/292/293	Heart failure & shock	259
286/287	Circulatory disorders	240
308/309/310	Cardiac arrhythmia & conduction disorders	227
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	220
417/418/419	Laparoscopic cholecystectomy	216
456-460	Spinal fusion	185
100/101	Seizures	175
689/690	Urinary tract infections	169
377/378/379	G.I. hemorrhage	165
064/065/066	Intercranial hemorrhage or cerebral infarction	165
894-897	Alcohol/drug abuse or dependence	140
313	Chest pain	137
246-251	Percutaneous cardiovascular procedures	130
602/603	Cellulitis	103
811/812	Red blood cell disorders	103
682/683/684	Renal failure	89
202/203	Bronchitis & asthma	68
736-743	Uterine & adnexa procedures	57
Total		7395

LLUMC-Murietta's Top DRG among Service Area Non-Hispanic Asian Residents, 2014

MSDRG	DRG Description	Discharges
190/191/192	Chronic obstructive pulmonary disease	231
885	Psychoses	176
870/871/872	Septicemia	137
338-343	Appendectomy	109
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	106
811/812	Red blood cell disorders	95
189	Pulmonary edema & respiratory failure	92

100/101	Seizures	90
469/470	Major joint replacement/reattachment lower extremity	89
945/946	Rehabilitation	85
894-897	Alcohol/drug abuse or dependence	80
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	77
313	Chest pain	77
637/638/639	Diabetes	69
291/292/293	Heart failure & shock	67
456-460	Spinal fusion	58
736-743	Uterine & adnexa procedures	55
417/418/419	Laparoscopic cholecystectomy	51
286/287	Circulatory disorders	49
377/378/379	G.I. hemorrhage	43
246-251	Percutaneous cardiovascular procedures	40
308/309/310	Cardiac arrhythmia & conduction disorders	37
064/065/066	Intercranial hemorrhage or cerebral infarction	35
602/603	Cellulitis	34
193/194/195	Simple pneumonia & Pleurisy	30
689/690	Urinary tract infections	25
682/683/684	Renal failure	25
202/203	Bronchitis & asthma	24
Total		2086

LLUMC-Murietta's Top DRG among Service Area Non-Hispanic Native-American Residents, 2014

MSDRG	DRG Description	Discharges
286/287	Circulatory disorders	41
190/191/192	Chronic obstructive pulmonary disease	35
338-343	Appendectomy	23
885	Psychoses	16
246-251	Percutaneous cardiovascular procedures	14
469/470	Major joint replacement/reattachment lower extremity	13
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	12
811/812	Red blood cell disorders	12
736-743	Uterine & adnexa procedures	12
870/871/872	Septicemia	11
894-897	Alcohol/drug abuse or dependence	10
291/292/293	Heart failure & shock	10
189	Pulmonary edema & respiratory failure	9
602/603	Cellulitis	9
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	8
456-460	Spinal fusion	8
100/101	Seizures	7
945/946	Rehabilitation	7
417/418/419	Laparoscopic cholecystectomy	6
064/065/066	Intercranial hemorrhage or cerebral infarction	6
689/690	Urinary tract infections	6

193/194/195	Simple pneumonia & Pleurisy	5
313	Chest pain	4
377/378/379	G.I. hemorrhage	4
637/638/639	Diabetes	3
308/309/310	Cardiac arrhythmia & conduction disorders	3
682/683/684	Renal failure	3
202/203	Bronchitis & asthma	1
Total		298

LLUMC-Murietta's Top DRG among Service Area Non-Hispanic Other/Unknown Race Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	544
190/191/192	Chronic obstructive pulmonary disease	366
945/946	Rehabilitation	278
870/871/872	Septicemia	189
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	189
338-343	Appendectomy	174
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	160
308/309/310	Cardiac arrhythmia & conduction disorders	149
469/470	Major joint replacement/reattachment lower extremity	140
291/292/293	Heart failure & shock	129
286/287	Circulatory disorders	128
189	Pulmonary edema & respiratory failure	119
313	Chest pain	109
637/638/639	Diabetes	107
100/101	Seizures	105
064/065/066	Intercranial hemorrhage or cerebral infarction	104
811/812	Red blood cell disorders	99
377/378/379	G.I. hemorrhage	94
193/194/195	Simple pneumonia & Pleurisy	93
894-897	Alcohol/drug abuse or dependence	93
602/603	Cellulitis	93
456-460	Spinal fusion	91
246-251	Percutaneous cardiovascular procedures	85
417/418/419	Laparoscopic cholecystectomy	78
689/690	Urinary tract infections	56
202/203	Bronchitis & asthma	53
736-743	Uterine & adnexa procedures	50
682/683/684	Renal failure	38
Total		3913

Top DRG Discharges among Loma Linda University Medical Center-Murietta Service Area by Age Group, 2014

LLUMC-Murietta's Top DRG among Service Area Residents under 18 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	1880
202/203	Bronchitis & asthma	1062
338-343	Appendectomy	708
193/194/195	Simple pneumonia & Pleurisy	668
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	424
100/101	Seizures	417
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	297
637/638/639	Diabetes	223
689/690	Urinary tract infections	219
602/603	Cellulitis	184
870/871/872	Septicemia	102
456-460	Spinal fusion	73
811/812	Red blood cell disorders	70
417/418/419	Laparoscopic cholecystectomy	62
189	Pulmonary edema & respiratory failure	42
377/378/379	G.I. hemorrhage	34
736-743	Uterine & adnexa procedures	28
246-251	Percutaneous cardiovascular procedures	26
945/946	Rehabilitation	24
308/309/310	Cardiac arrhythmia & conduction disorders	21
894-897	Alcohol/drug abuse or dependence	20
190/191/192	Chronic obstructive pulmonary disease	14
682/683/684	Renal failure	13
064/065/066	Intercranial hemorrhage or cerebral infarction	11
286/287	Circulatory disorders	8
313	Chest pain	7
291/292/293	Heart failure & shock	4
469/470	Major joint replacement/reattachment lower extremity	0
Total		45538

LLUMC-Murietta's Top DRG among Service Area Residents 18-59 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	7560
193/194/195	Simple pneumonia & Pleurisy	2539
202/203	Bronchitis & asthma	2305
736-743	Uterine & adnexa procedures	1994
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	1979
811/812	Red blood cell disorders	1910
945/946	Rehabilitation	1876
377/378/379	G.I. hemorrhage	1305

894-897	Alcohol/drug abuse or dependence	1304
338-343	Appendectomy	1284
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	1190
190/191/192	Chronic obstructive pulmonary disease	1132
100/101	Seizures	1041
689/690	Urinary tract infections	984
637/638/639	Diabetes	896
417/418/419	Laparoscopic cholecystectomy	839
870/871/872	Septicemia	825
286/287	Circulatory disorders	822
064/065/066	Intercranial hemorrhage or cerebral infarction	769
189	Pulmonary edema & respiratory failure	759
602/603	Cellulitis	756
456-460	Spinal fusion	667
308/309/310	Cardiac arrhythmia & conduction disorders	632
291/292/293	Heart failure & shock	612
313	Chest pain	595
246-251	Percutaneous cardiovascular procedures	516
682/683/684	Renal failure	489
469/470	Major joint replacement/reattachment lower extremity	326
Total		37906

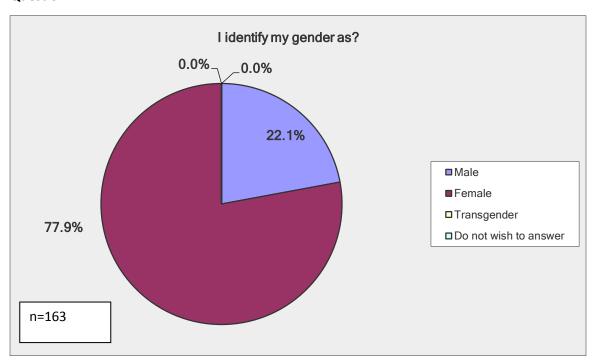
LLUMC-Murietta's Top DRG among Service Area Residents 60 plus Years, 2014

MSDRG	DRG Description	Discharges
193/194/195	Simple pneumonia & Pleurisy	5144
202/203	Bronchitis & asthma	4742
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	3474
377/378/379	G.I. hemorrhage	2501
811/812	Red blood cell disorders	2499
338-343	Appendectomy	2256
190/191/192	Chronic obstructive pulmonary disease	2177
736-743	Uterine & adnexa procedures	2108
894-897	Alcohol/drug abuse or dependence	2107
689/690	Urinary tract infections	1847
286/287	Circulatory disorders	1841
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	1837
637/638/639	Diabetes	1740
945/946	Rehabilitation	1623
189	Pulmonary edema & respiratory failure	1328
417/418/419	Laparoscopic cholecystectomy	1017
291/292/293	Heart failure & shock	1003
885	Psychoses	893
469/470	Major joint replacement/reattachment lower extremity	855
100/101	Seizures	781
246-251	Percutaneous cardiovascular procedures	718
682/683/684	Renal failure	703

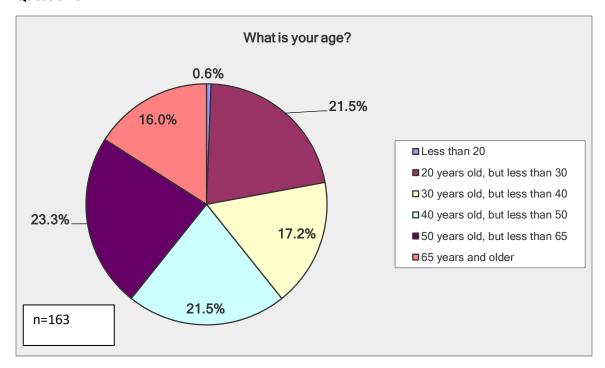
602/603	Cellulitis	657
313	Chest pain	456
064/065/066	Intercranial hemorrhage or cerebral infarction	395
870/871/872	Septicemia	373
308/309/310	Cardiac arrhythmia & conduction disorders	238
456-460	Spinal fusion	225
Total		6641

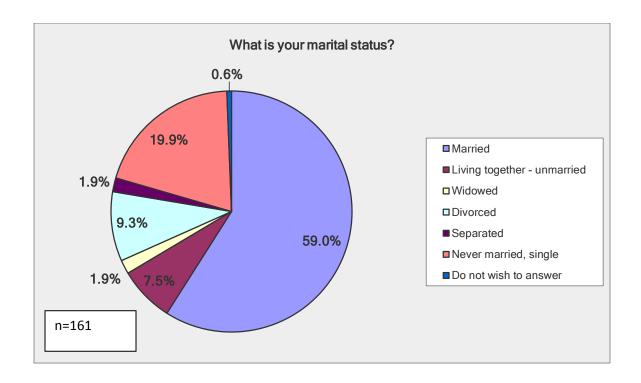
Loma Linda University Medical Center-Murrieta QOLS Service Area Analysis

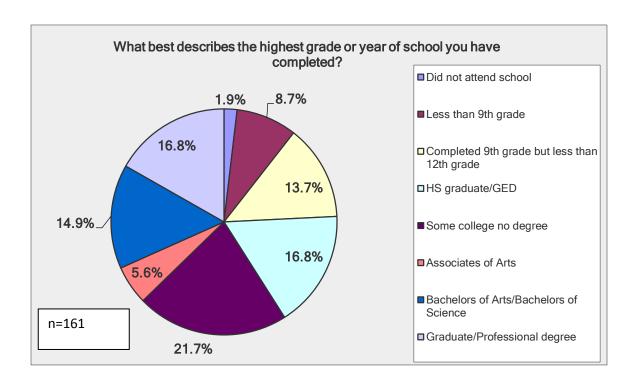
Question 1

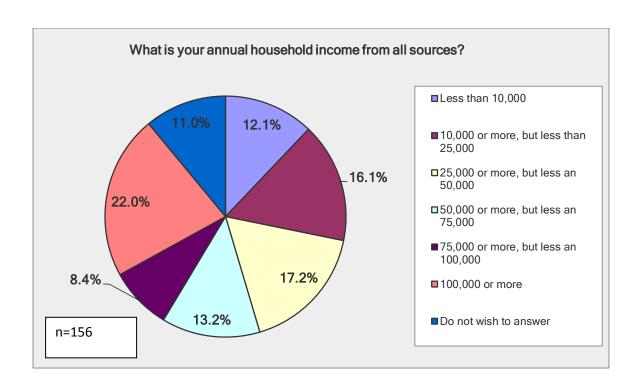


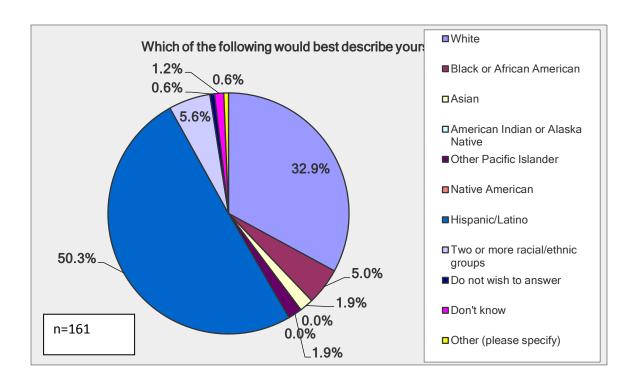
What is your zip code?	
Answer Options	Response Count
	163
answered question	163

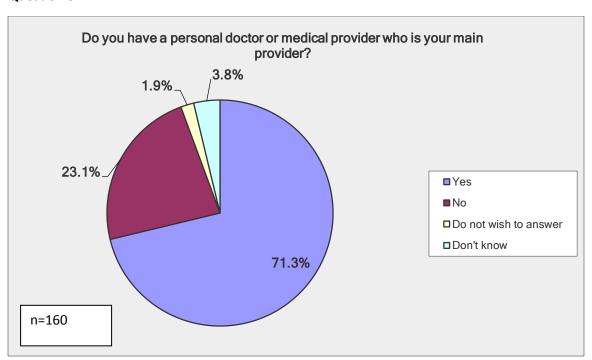


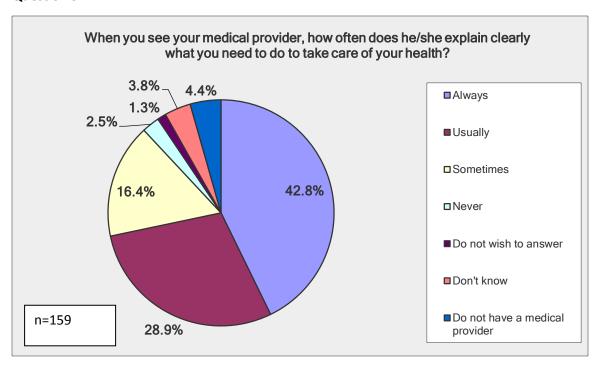


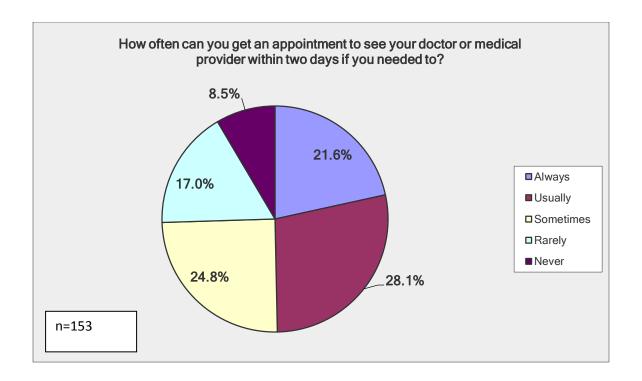


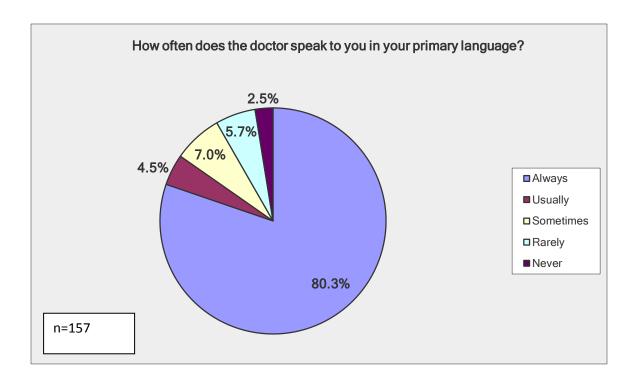


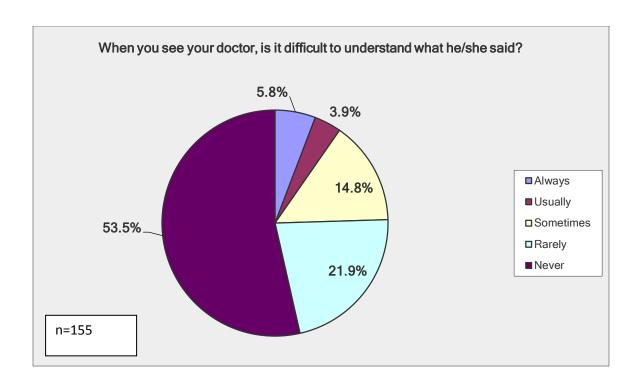


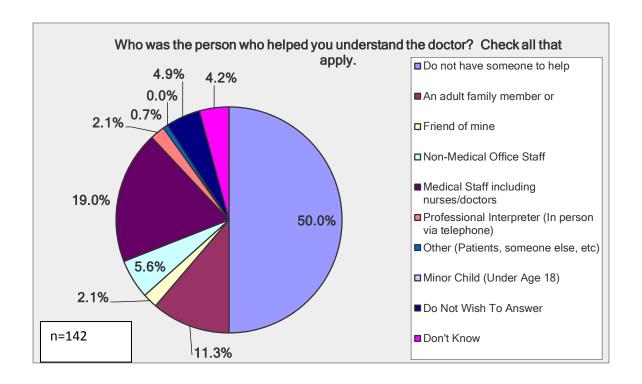


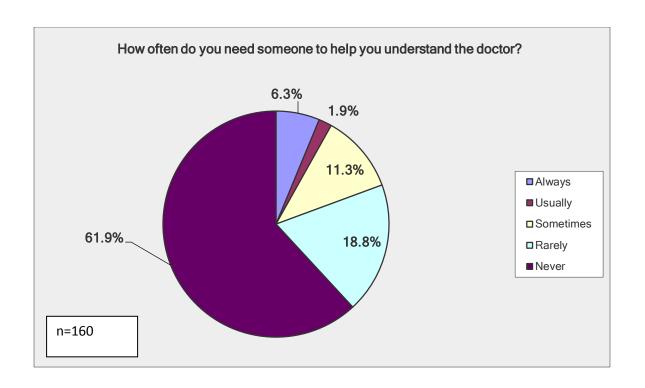


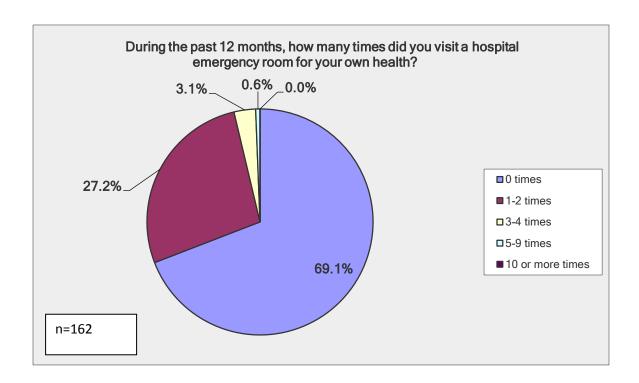


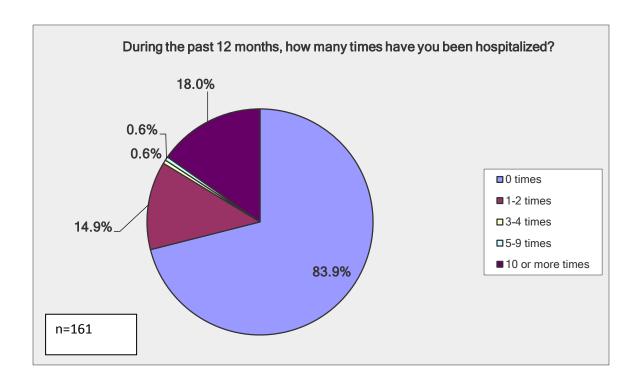


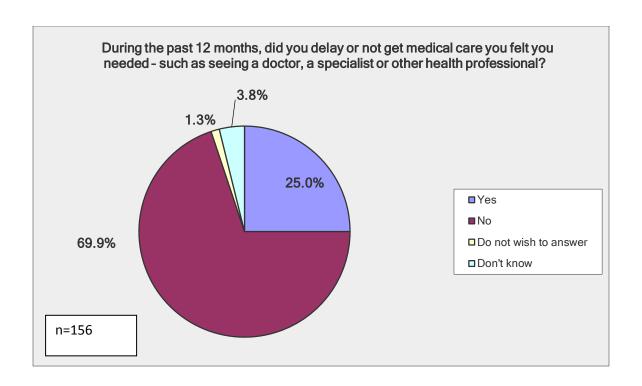


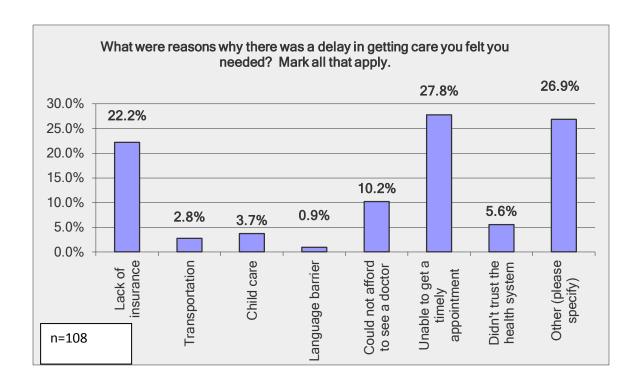


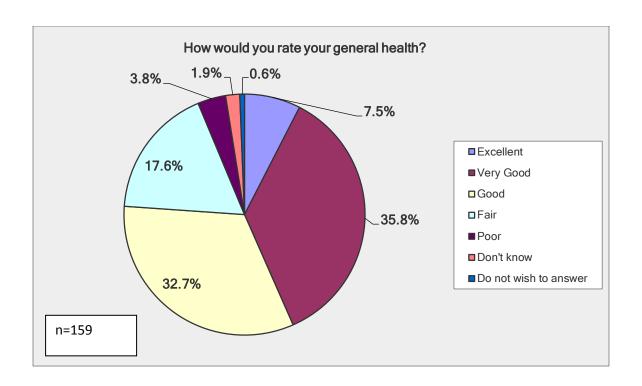


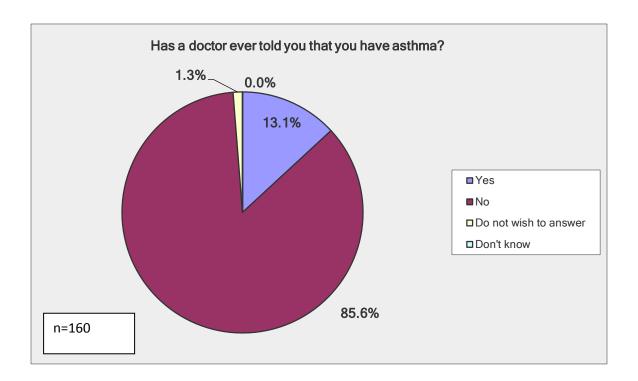


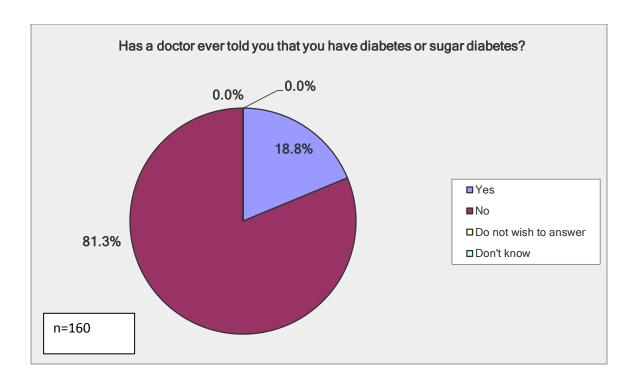


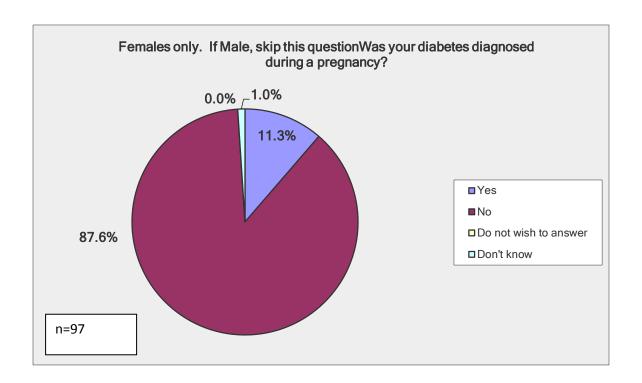


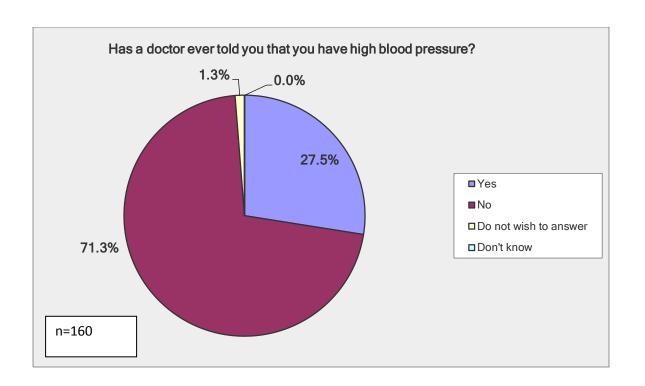


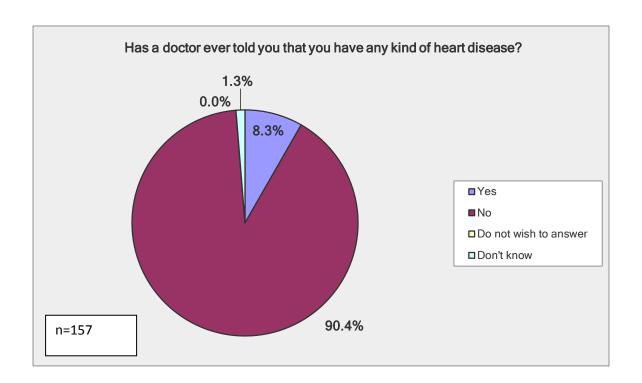


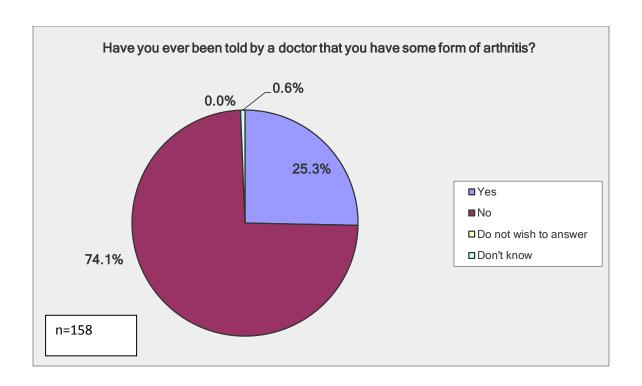




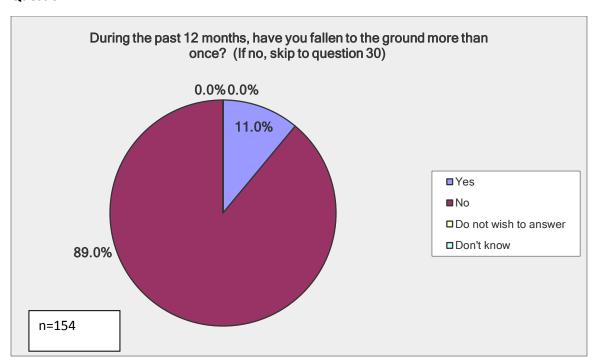


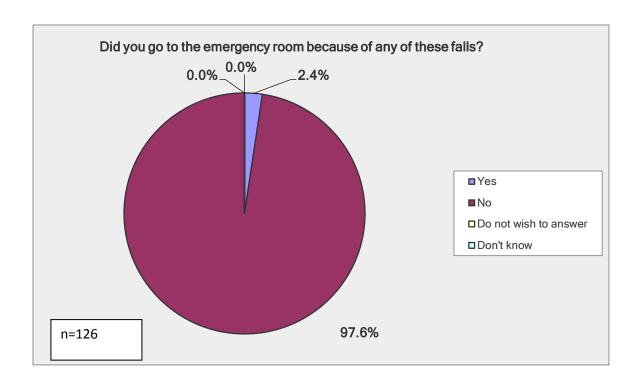


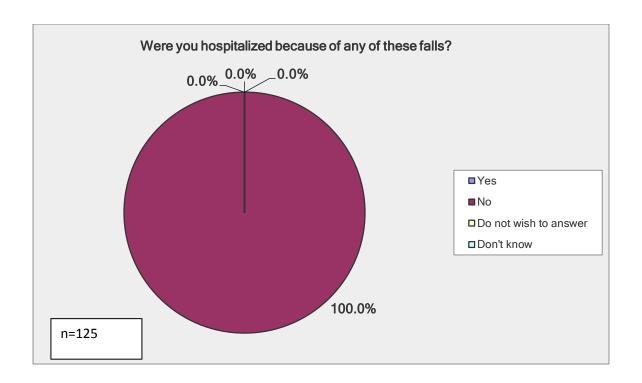


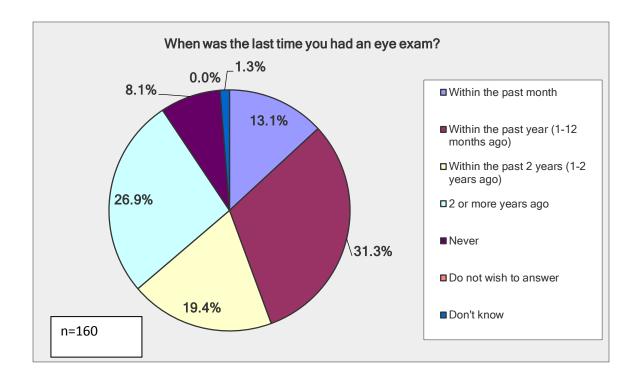


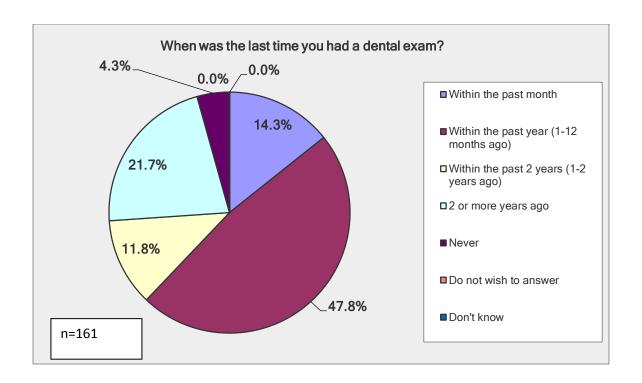


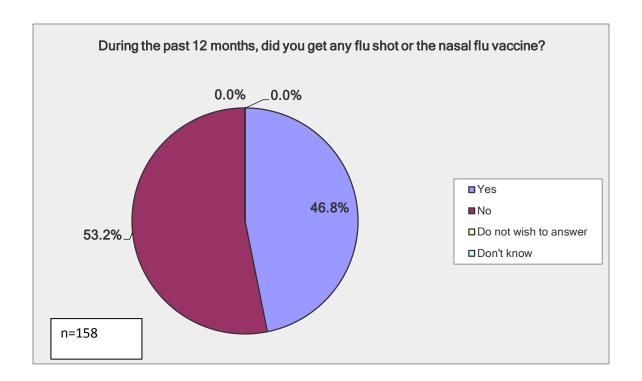


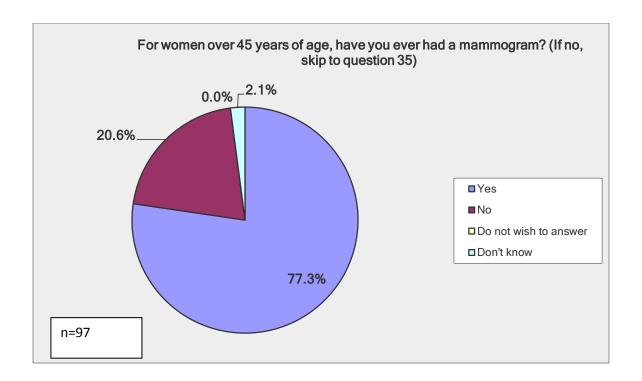






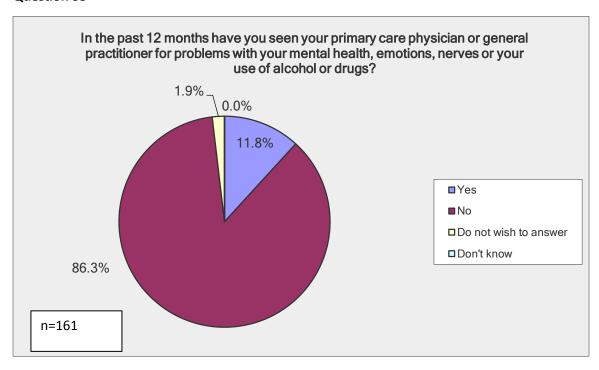


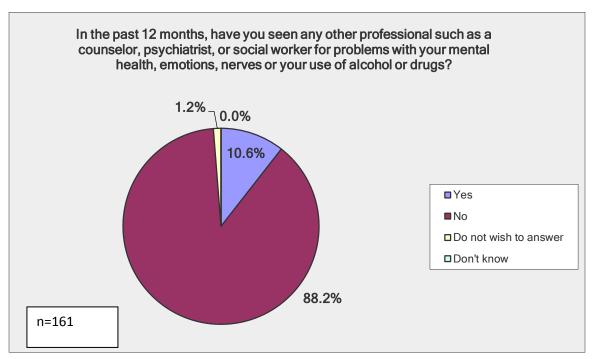




How long ago did you have your most recent mammogram?	
Answer Options	Response Count
	76
answered question	76

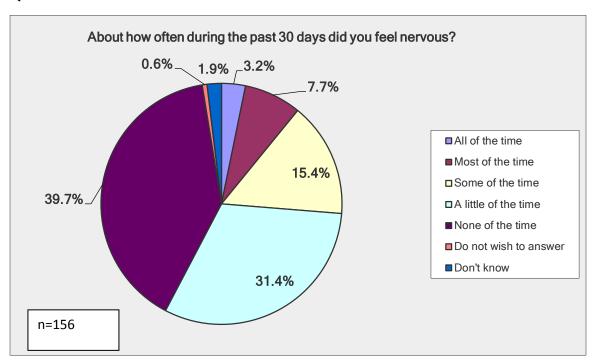
Question 35

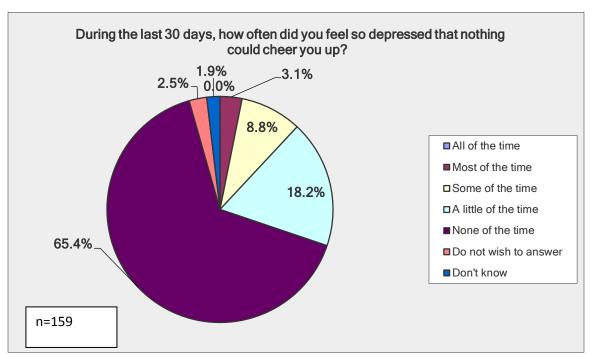


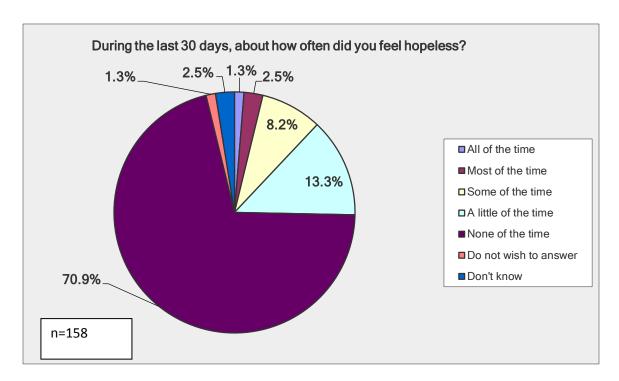


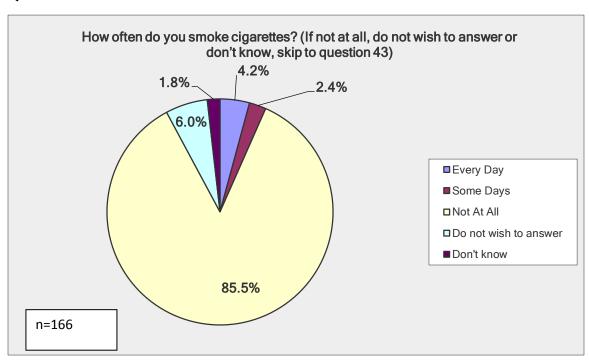
How many days out of the past 30 days were you unable to work or carry out your normal activities because of your feeling nervous, depressed or emotionally stressed?		
Answer Options Response Count		
108		
answered question 108		

Question 38









On average, how many cigarettes do you smoke a day?	
Answer Options	Response Count
	76
answered question 76	

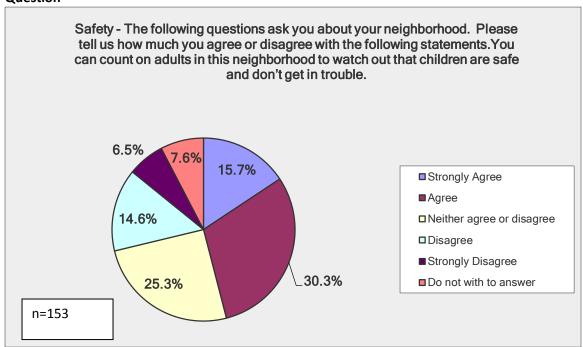
In the past 12 months, about how many times did you have 1 or 2 alcoholic drinks in a single day?	
Answer Options	Response Count
	142
answered question	142

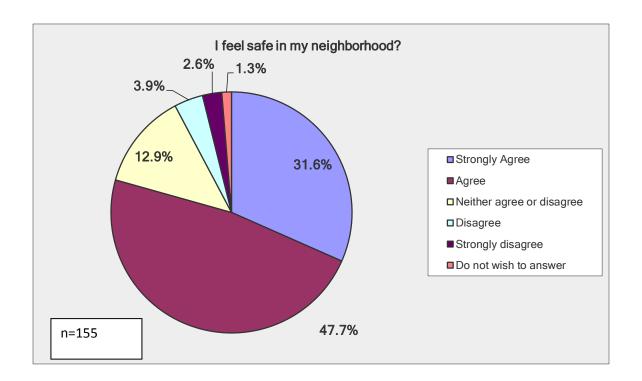
Question 44

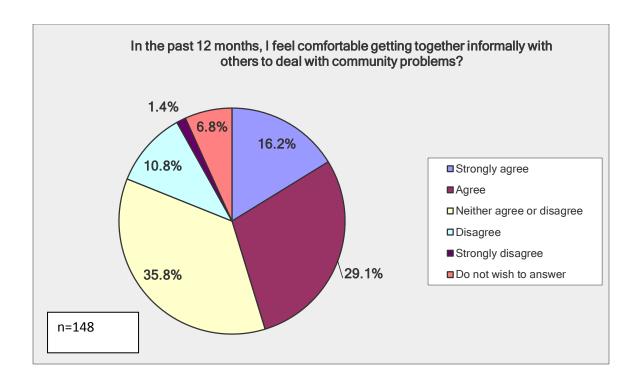
In the past 12 months, about how many times did you have 3 or 4 alcoholic drinks in a single day?		
Answer Options Response Count		
138		
answered question 138		

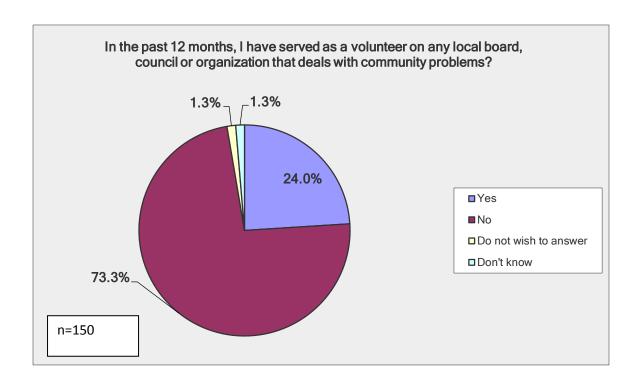
Question 45

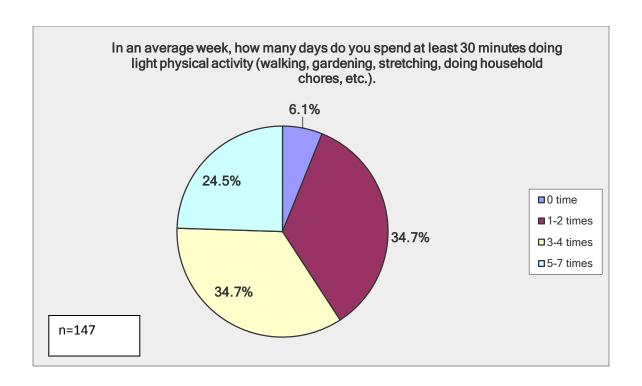
In the past 12 months, about how many times did you have 5 or more alcoholic drinks in a single day?	
Answer Options Response Count	
	136
answered question	136

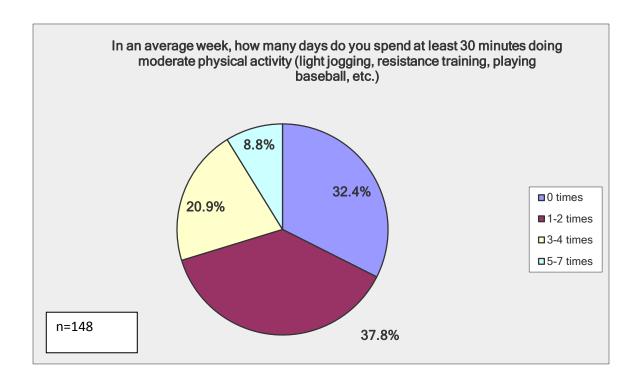


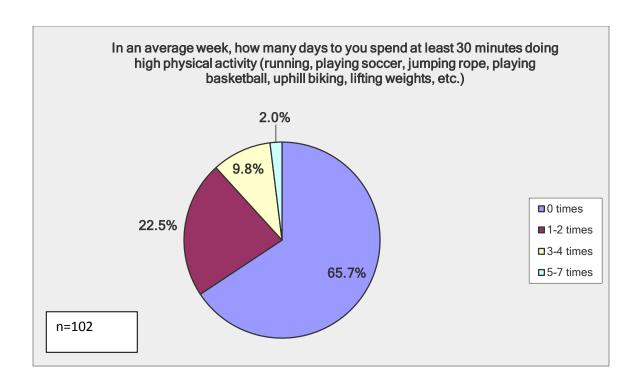












Montclair Hospital Top 25 Discharges by DRG, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	578
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	233
193/194/195	Simple pneumonia & Pleurisy	198
945/946	Rehabilitation	154
469/470	Major joint replacement/reattachment lower extremity	149
682/683/684	Renal failure	140
689/690	Urinary tract infections	139
602/603	Cellulitis	137
291/292/293	Heart failure & shock	136
190/191/192	Chronic obstructive pulmonary disease	121
885	Psychoses	115
736-743	Uterine & adnexa procedures	112
637/638/639	Diabetes	101
417/418/419	Laparoscopic cholecystectomy	96
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	94
377/378/379	G.I. hemorrhage	90
308/309/310	Cardiac arrhythmia & conduction disorders	82
313	Chest pain	81
338-343	Appendectomy	72
064/065/066	Intercranial hemorrhage or cerebral infarction	68
894-897	Alcohol/drug abuse or dependence	66
202/203	Bronchitis	60
189	Pulmonary edema & respiratory failure	54
811/812	Red blood cell disorders	49
246-251	Percutaneous cardiovascular procedures	48
TOTAL		3,173

Top DRG Discharges among Montclair Hospital Service Area by Race/Ethnicity, 2014

Montclair Hospital's Top DRG among Service Area Non-Hispanic White Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	6321
870/871/872	Septicemia	4451
469/470	Major joint replacement/reattachment lower extremity	2764
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	2109
291/292/293	Heart failure & shock	2003
193/194/195	Simple pneumonia & Pleurisy	1811
190/191/192	Chronic obstructive pulmonary disease	1650
945/946	Rehabilitation	1563
308/309/310	Cardiac arrhythmia & conduction disorders	1415
313	Chest pain	1408
602/603	Cellulitis	1302
682/683/684	Renal failure	1242
689/690	Urinary tract infections	1218

064/065/066	Intercranial hemorrhage or cerebral infarction	1214
894-897	Alcohol/drug abuse or dependence	1168
246-251	Percutaneous cardiovascular procedures	1154
736-743	Uterine & adnexa procedures	1025
377/378/379	G.I. hemorrhage	1025
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	956
637/638/639	Diabetes	851
417/418/419	Laparoscopic cholecystectomy	824
189	Pulmonary edema & respiratory failure	803
286/287	Circulatory disorders	651
456-460	Spinal fusion	649
100/101	Seizures	623
202/203	Bronchitis & asthma	565
338-343	Appendectomy	519
811/812	Red blood cell disorders	412
Total		41696

Montclair Hospital's Top DRG among Service Area Hispanic (Any Race) Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	4742
870/871/872	Septicemia	3054
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	1792
417/418/419	Laparoscopic cholecystectomy	1347
291/292/293	Heart failure & shock	1277
193/194/195	Simple pneumonia & Pleurisy	1189
338-343	Appendectomy	1076
202/203	Bronchitis & asthma	1067
313	Chest pain	1062
736-743	Uterine & adnexa procedures	1031
637/638/639	Diabetes	995
682/683/684	Renal failure	973
689/690	Urinary tract infections	910
469/470	Major joint replacement/reattachment lower extremity	891
602/603	Cellulitis	844
064/065/066	Intercranial hemorrhage or cerebral infarction	795
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	750
377/378/379	G.I. hemorrhage	677
894-897	Alcohol/drug abuse or dependence	598
308/309/310	Cardiac arrhythmia & conduction disorders	572
100/101	Seizures	559
246-251	Percutaneous cardiovascular procedures	548
811/812	Red blood cell disorders	507
286/287	Circulatory disorders	498
945/946	Rehabilitation	479
190/191/192	Chronic obstructive pulmonary disease	434
189	Pulmonary edema & respiratory failure	374

456-460	Spinal fusion	254
Total		29295

Montclair Hospital's Top DRG among Service Area Non-Hispanic Black Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	2658
870/871/872	Septicemia	926
291/292/293	Heart failure & shock	765
313	Chest pain	618
811/812	Red blood cell disorders	595
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	537
682/683/684	Renal failure	479
202/203	Bronchitis & asthma	426
193/194/195	Simple pneumonia & Pleurisy	384
469/470	Major joint replacement/reattachment lower extremity	346
190/191/192	Chronic obstructive pulmonary disease	346
064/065/066	Intercranial hemorrhage or cerebral infarction	335
637/638/639	Diabetes	324
736-743	Uterine & adnexa procedures	323
100/101	Seizures	255
689/690	Urinary tract infections	254
377/378/379	G.I. hemorrhage	254
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	248
308/309/310	Cardiac arrhythmia & conduction disorders	236
286/287	Circulatory disorders	214
189	Pulmonary edema & respiratory failure	211
602/603	Cellulitis	185
246-251	Percutaneous cardiovascular procedures	171
417/418/419	Laparoscopic cholecystectomy	161
945/946	Rehabilitation	148
894-897	Alcohol/drug abuse or dependence	138
456-460	Spinal fusion	93
338-343	Appendectomy	75
Total		11705

Montclair Hospital's Top DRG among Service Area Non-Hispanic Asian Residents, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	363
885	Psychoses	273
064/065/066	Intercranial hemorrhage or cerebral infarction	149
291/292/293	Heart failure & shock	143
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	142
736-743	Uterine & adnexa procedures	137
193/194/195	Simple pneumonia & Pleurisy	130
377/378/379	G.I. hemorrhage	126

640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	113
682/683/684	Renal failure	107
313	Chest pain	101
246-251	Percutaneous cardiovascular procedures	91
469/470	Major joint replacement/reattachment lower extremity	83
308/309/310	Cardiac arrhythmia & conduction disorders	81
811/812	Red blood cell disorders	75
689/690	Urinary tract infections	66
417/418/419	Laparoscopic cholecystectomy	65
637/638/639	Diabetes	65
286/287	Circulatory disorders	58
202/203	Bronchitis & asthma	53
338-343	Appendectomy	52
190/191/192	Chronic obstructive pulmonary disease	51
945/946	Rehabilitation	49
100/101	Seizures	44
189	Pulmonary edema & respiratory failure	41
602/603	Cellulitis	32
894-897	Alcohol/drug abuse or dependence	27
456-460	Spinal fusion	19
Total		2736

Montclair Hospital's Top DRG among Non-Hispanic Native-American Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	32
870/871/872	Septicemia	26
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	17
193/194/195	Simple pneumonia & Pleurisy	14
894-897	Alcohol/drug abuse or dependence	13
291/292/293	Heart failure & shock	12
469/470	Major joint replacement/reattachment lower extremity	11
736-743	Uterine & adnexa procedures	11
637/638/639	Diabetes	11
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	11
313	Chest pain	10
377/378/379	G.I. hemorrhage	10
689/690	Urinary tract infections	9
190/191/192	Chronic obstructive pulmonary disease	8
682/683/684	Renal failure	7
308/309/310	Cardiac arrhythmia & conduction disorders	7
286/287	Circulatory disorders	7
202/203	Bronchitis & asthma	6
417/418/419	Laparoscopic cholecystectomy	5
602/603	Cellulitis	5
246-251	Percutaneous cardiovascular procedures	5
338-343	Appendectomy	4

945/946	Rehabilitation	3
456-460	Spinal fusion	3
064/065/066	Intercranial hemorrhage or cerebral infarction	2
100/101	Seizures	2
189	Pulmonary edema & respiratory failure	1
811/812	Red blood cell disorders	0
Total		252

Montclair Hospital's Top DRG among Service Area Non-Hispanic Other/Unknown Race Residents, 2014

MSDRG	DRG Description	Discharges	
885	Psychoses	573	
870/871/872	Septicemia	409	
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	266	
246-251	Percutaneous cardiovascular procedures	182	
313	Chest pain	176	
291/292/293	Heart failure & shock	160	
417/418/419	Laparoscopic cholecystectomy	159	
064/065/066	Intercranial hemorrhage or cerebral infarction	148	
193/194/195	Simple pneumonia & Pleurisy	145	
469/470	Major joint replacement/reattachment lower extremity	136	
736-743	Uterine & adnexa procedures	118	
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	115	
689/690	Urinary tract infections		
202/203	Bronchitis & asthma		
682/683/684	Renal failure		
308/309/310	Cardiac arrhythmia & conduction disorders	104	
338-343	Appendectomy	96	
286/287	Circulatory disorders	92	
602/603	Cellulitis	90	
190/191/192	Chronic obstructive pulmonary disease	89	
894-897	Alcohol/drug abuse or dependence	83	
100/101	Seizures	83	
637/638/639	Diabetes	80	
377/378/379	G.I. hemorrhage	74	
811/812	Red blood cell disorders	64	
189	Pulmonary edema & respiratory failure	57	
945/946	Rehabilitation	39	
456-460	Spinal fusion	34	
Total		3898	

Top DRG Discharges among Montclair Hospital Service Area by Age Group, 2014

Montclair Hospital's Top DRG among Service Area Residents under 18 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	11463
870/871/872	Septicemia	3280

391/392	Esophagitis, gastroenteritis, misc. digestive disorders	2608
736-743	Uterine & adnexa procedures	2301
313	Chest pain	2126
417/418/419	Laparoscopic cholecystectomy	1873
894-897	Alcohol/drug abuse or dependence	1720
637/638/639	Diabetes	1417
291/292/293	Heart failure & shock	1374
602/603	Cellulitis	1347
469/470	Major joint replacement/reattachment lower extremity	1104
682/683/684	Renal failure	1089
193/194/195	Simple pneumonia & Pleurisy	1069
338-343	Appendectomy	977
689/690	Urinary tract infections	933
811/812	Red blood cell disorders	873
190/191/192	Chronic obstructive pulmonary disease	844
246-251	Percutaneous cardiovascular procedures	796
064/065/066	Intercranial hemorrhage or cerebral infarction	795
377/378/379	G.I. hemorrhage	768
100/101	Seizures	755
308/309/310	Cardiac arrhythmia & conduction disorders	738
286/287	Circulatory disorders	700
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	692
202/203	Bronchitis & asthma	549
945/946	Rehabilitation	541
456-460	Spinal fusion	490
189	Pulmonary edema & respiratory failure	481
Total		43703

Montclair Hospital's Top DRG among Service Area Residents 18-59 Years, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	5784
469/470	Major joint replacement/reattachment lower extremity	3120
291/292/293	Heart failure & shock	2972
193/194/195	Simple pneumonia & Pleurisy	1942
064/065/066	Intercranial hemorrhage or cerebral infarction	1840
682/683/684	Renal failure	1793
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	1726
190/191/192	Chronic obstructive pulmonary disease	1721
945/946	Rehabilitation	1719
308/309/310	Cardiac arrhythmia & conduction disorders	1650
377/378/379	G.I. hemorrhage	1360
689/690	Urinary tract infections	1358
246-251	Percutaneous cardiovascular procedures	1332

313	Chest pain	1232
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	1169
885	Psychoses	1022
189	Pulmonary edema & respiratory failure	964
602/603	Cellulitis	889
286/287	Circulatory disorders	807
417/418/419	Laparoscopic cholecystectomy	625
637/638/639	Diabetes	625
811/812	Red blood cell disorders	622
456-460	Spinal fusion	486
100/101	Seizures	346
736-743	Uterine & adnexa procedures	309
894-897	Alcohol/drug abuse or dependence	285
202/203	Bronchitis & asthma	220
338-343	Appendectomy	153
Total		38071

Montclair Hospital's Top DRG among Service Area Residents 60 plus Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	2114
202/203	Bronchitis & asthma	1457
338-343	Appendectomy	692
193/194/195	Simple pneumonia & Pleurisy	662
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	529
100/101	Seizures	465
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	332
637/638/639	Diabetes	284
689/690	Urinary tract infections	277
602/603	Cellulitis	222
870/871/872	Septicemia	165
811/812	Red blood cell disorders	158
456-460	Spinal fusion	76
417/418/419	Laparoscopic cholecystectomy	63
189	Pulmonary edema & respiratory failure	42
377/378/379	G.I. hemorrhage	38
736-743	Uterine & adnexa procedures	35
682/683/684	Renal failure	32
308/309/310	Cardiac arrhythmia & conduction disorders	27
246-251	Percutaneous cardiovascular procedures	23
894-897	Alcohol/drug abuse or dependence	22
945/946	Rehabilitation	21
313	Chest pain	17
291/292/293	Heart failure & shock	14

190/191/192	Chronic obstructive pulmonary disease	13
286/287	Circulatory disorders	13
064/065/066	Intercranial hemorrhage or cerebral infarction	8
469/470	Major joint replacement/reattachment lower extremity	7
Total		7808

Montclair Hospital Focus Group Analysis

Question #1 – How long have you lived in the Inland Empire? If you are new to the area, what brought you here?

Data for question 1 was analyzed individually for each focus group and as an aggregate. A mean and range was calculated for each focus group and a mean, median and range was calculated for the aggregate data. Among all participants, 4.3% stated they lived in the Inland Empire their entire life. This information was not incorporated in the analysis as the number of years living in the Inland Empire was not identified for these participants. Among all participants, the highest frequency of individual years living in the Inland Empire was six and eight years; 8.7% for each.

A. Montclair

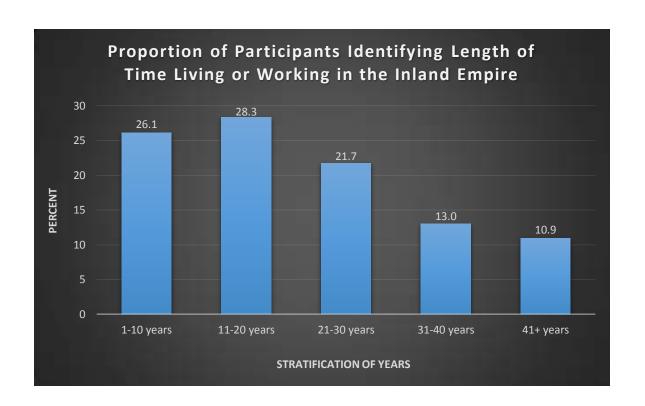
- a. Mean 15 years
- b. Range (1-28 years)

Overall Participating Hospitals (Aggregate)

Mean - 21.8 years

Median – 19 years

Range – 1-56 years



Question #2 – What if anything is different about your community now that was not the case five years ago?

- Neighborhoods are less attractive/built environmental has changed
 graffiti, streets unkempt, trash, yards unkempt
 increase homeless population and lack of resources available for them
- 2. Increase in undocumented population and increase in Asian population
- 3. Families living in financial stress- families living together perhaps impacting increase in alcohol consumption
- 4. More people insured because of Obamacare

Question #3 – What kind of projects, if any, have people in your community worked on together in the past five years? (Note: Participants stated they were members of organizations who assist with services)

- 1. Health services programs where community members can receive flu shots, low cost preventative services, immunization services, non-emergent services, physicals, for instance County Fair Jamboree provides blood pressure screening, Fire Department provides flu information, Promatora program (Por la Vida) provides health education, and programs inviting people to walk
- 2. Food programs Fruit Park Community Gardens, programs that food baskets, the availability of farmer's market, and programs that participate in food distribution
- Students anti-bullying programs, program that allow students to attend local colleges for free if have certain GPA, however they must participate in community service

Question #4 – Think about your community over the next five years, what changes would you make or not make and why?

- Medical services for population and access to lower level of care services, programs
 that provide coordination of services for clients, increase resources for mental
 health services and make them available for patients with their primary care
 physician on weekends and week nights, access to primary care physician after
 hours
- Transportation programs that enable student and seniors to access services, programs that enable patients to return home after accessing medical services, transportation services for patients to commute to primary care physician form their work/office
- 3. Access to healthy food that is affordable

Question #5 – If you knew someone was thinking about moving to your community, what would you tell them or her about the area to convince them to move or not to move?

I – Positive

- 1. Access to physical activity resources, walkability
- 2. Job opportunities with high wages
- 3. Good healthcare services
- 4. Education
- 5. Affordable housing

- 6. Close-knit community feel
- 7. Low crime
- 8. Extensive senior programs

Question #6 – Describe how your community could be improved.

- Medical services for population and access to lower level of care services, programs
 that provide coordination of services for clients, increase resources for mental
 health services and make them available for patients with their primary care
 physician on weekends and week nights, access to primary care physician after
 hours
- 2. Transportation programs that enable student and seniors to access services, programs that enable patients to return home after accessing medical services, transportation services for patients to commute to primary care physician form their work/office
- 3. Access to healthy food that is affordable

Question #7 – What makes your community a healthy community?

- 1. The community's commitment to physical activity. The community has programs; such as Healthy Living, Active Living Resolution, and weight loss programs
- 2. Programs that integrate the well-being of the whole person
- 3. Case management services
- 4. A center for Civic Partnership

Question #8 – What makes your community unhealthy?

- 1. The community's infrastructure. There Is a lack of street lights in neighborhoods and lack of sidewalks
- Violence/gangs
- 3. The air quality

Question #9 – Describe barriers that may pose challenges to achieving positive community health.

- 1. The lack of awareness of medical services available in the community. This is due to language barriers, cultural limitations, and people not having access to social media
- 2. Transportation
- 3. Community is too small for grant funding
- 4. Many physicians do not accept the insurance that an individual has, such as Medicaid and Medicare. Also if a person has insurance through the Affordable Care Act they do not have access to vision and dental services

Question #10 – From what health problems do people in your community suffer?

- 1. Chronic diseases diabetes, kidney failure, HTN, asthma, obesity
- 2. Mental health

Question #11 – Where do people in your community go to receive health care?

1. Emergency room, community clinics, federally qualified health center

Question #12 – What, if any, environmental health concerns do you face in your community?

- 1. Air pollution and air quality
- 2. Lack of environmentally safe transportation

Question #13 – Think about the issues we have talked about today. What issues do you think are the most important for your community to address? Why?

- 1. Employment with high paying jobs so students don't have to move from community to find jobs
- 2. Affordable housing

Question #14 – Think about the strengths in your community we have talked about today. What do you think is the community's greatest asset?

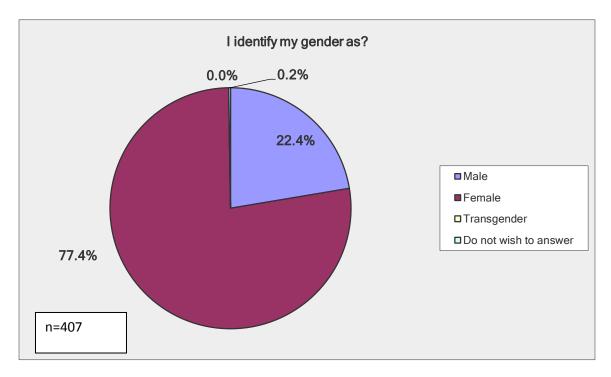
1. A lot of collaboration between agencies that provide resources and services, outdoors activities, its people, volunteerism, city supportive of hospitals, strong business community, social service programs, ESL classes, police department, fire department, community pulls together during emergencies

Question #15 – Is there anything else we have not asked about that is important for us to know about in your community?

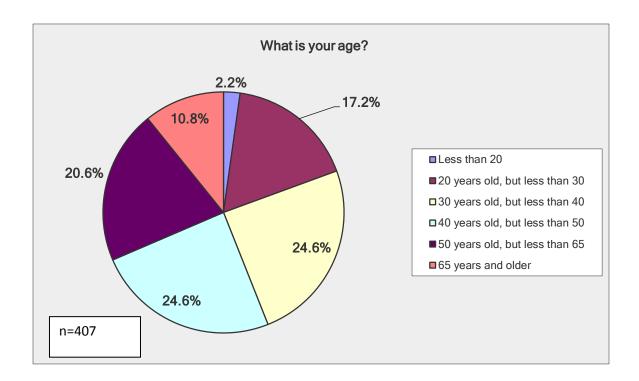
Participants had nothing to add.

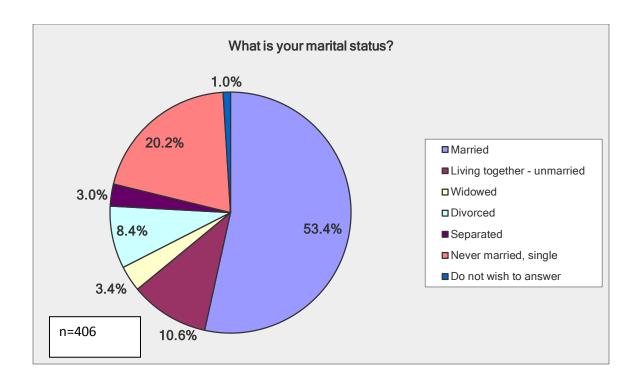
Montclair QOLS Service Area Analysis

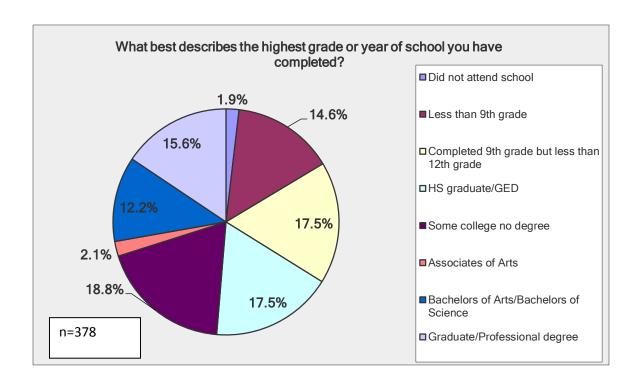
Question 1

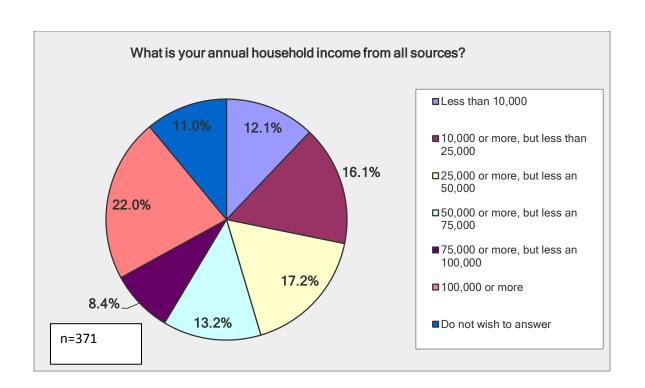


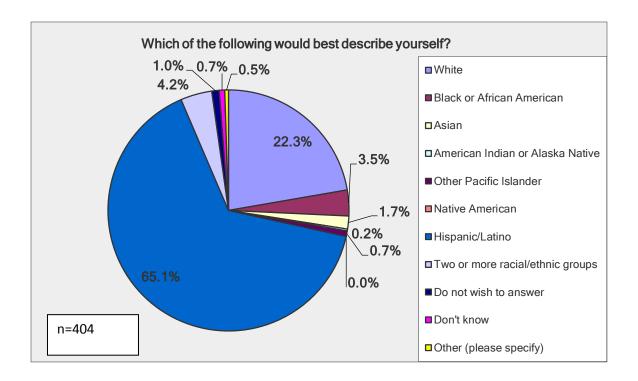
What is your zip code?	
Answer Options	Response Count
	411
answered question	411

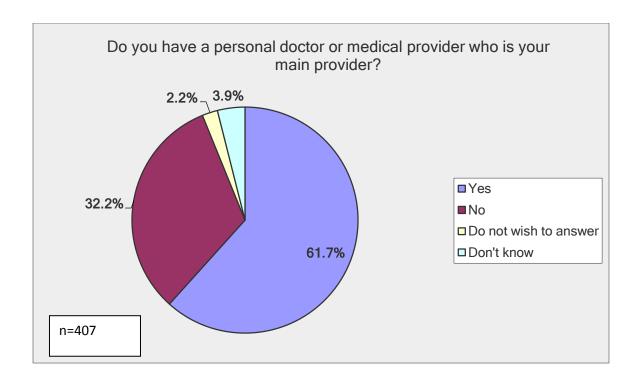


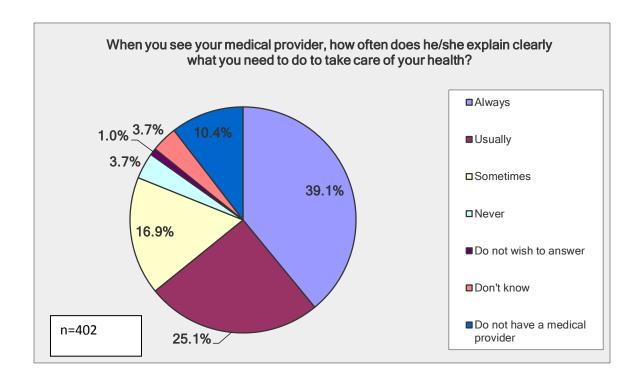


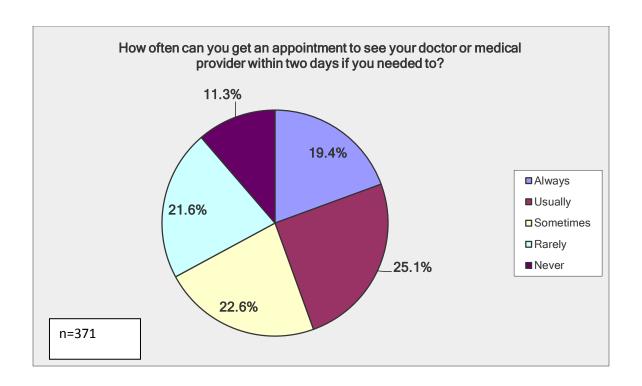


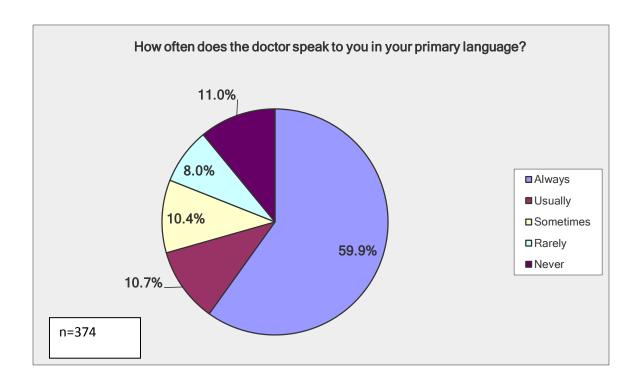


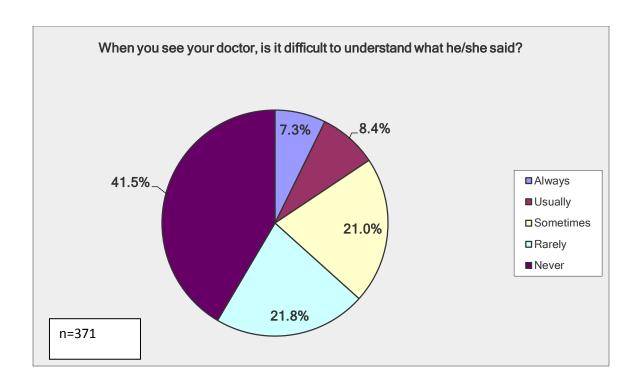


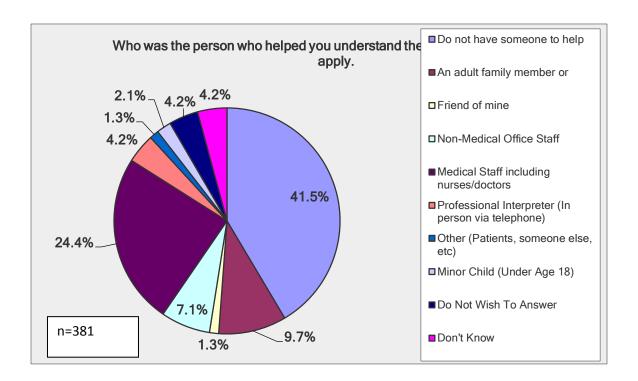


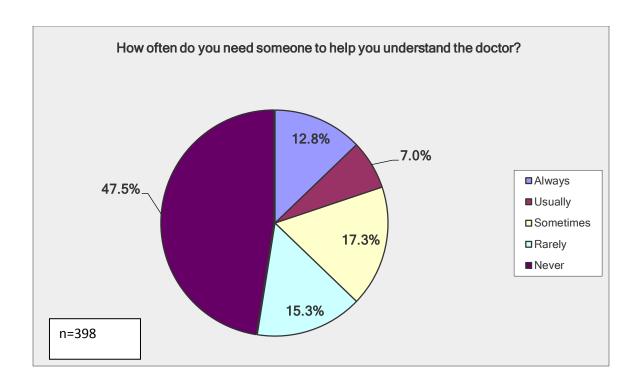


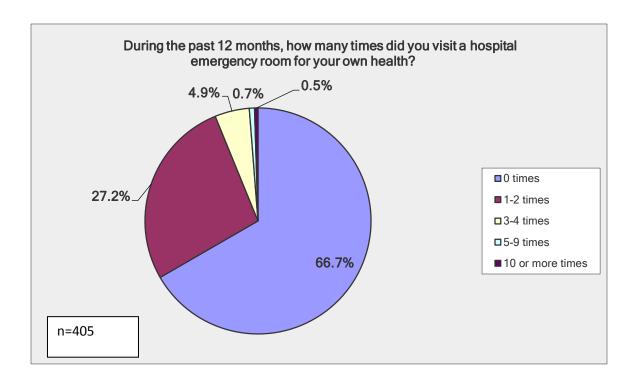


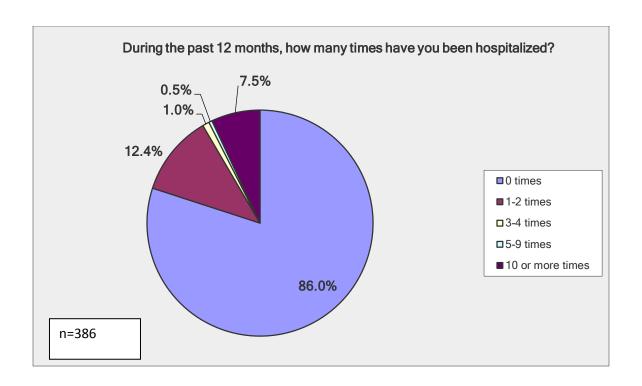


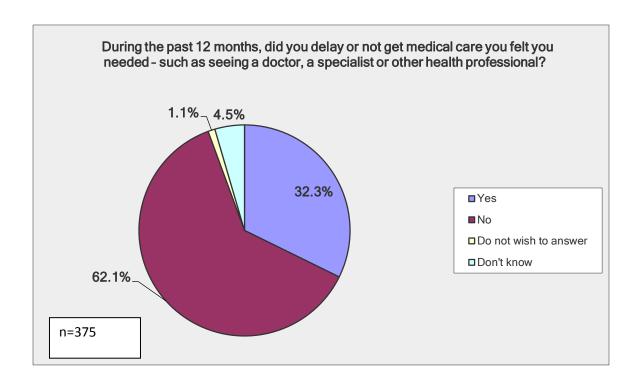


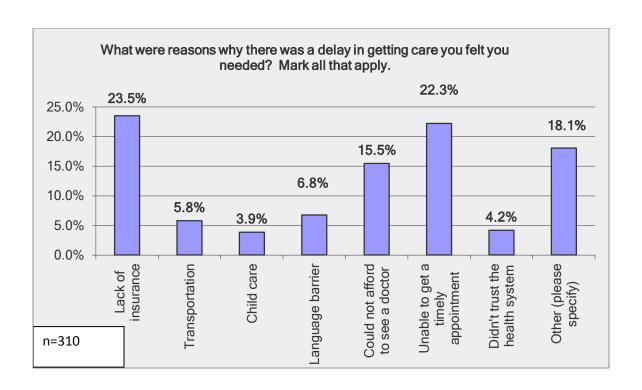


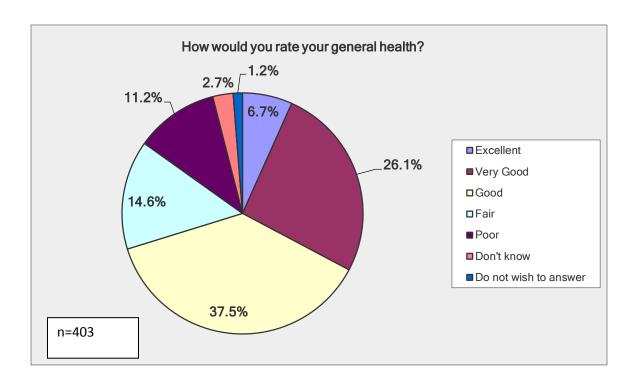


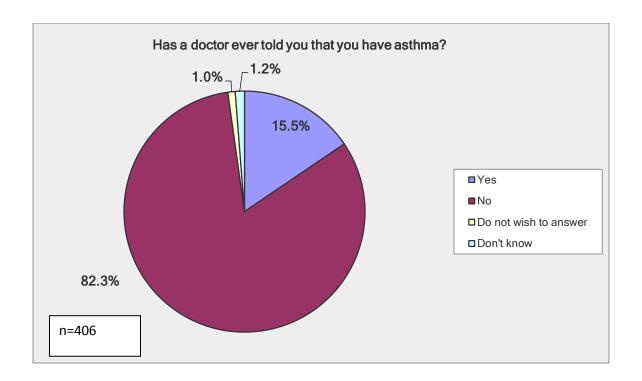


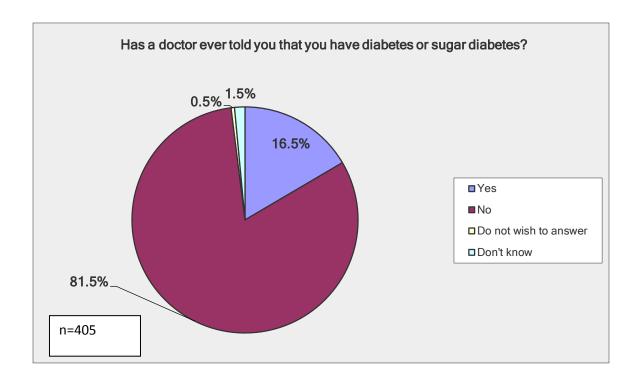


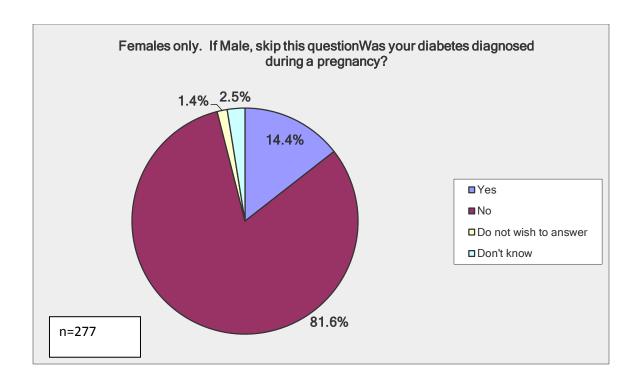


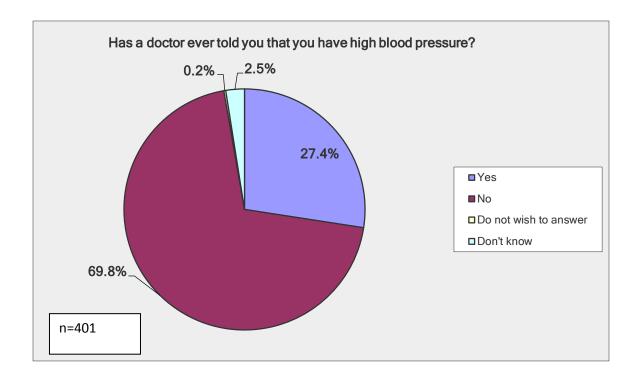


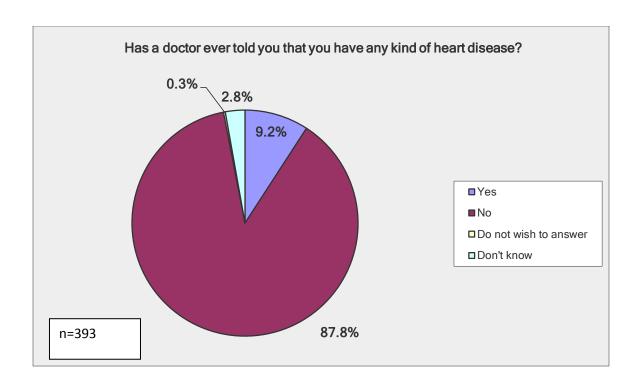


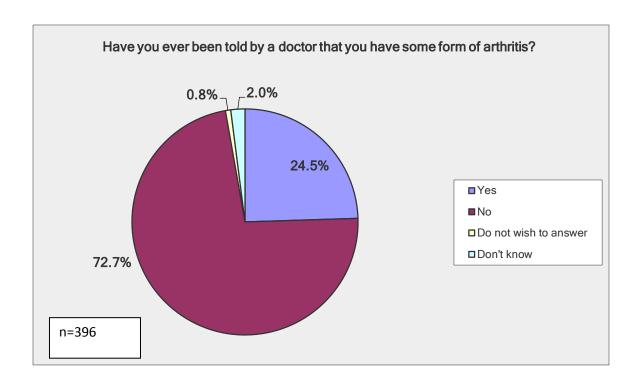


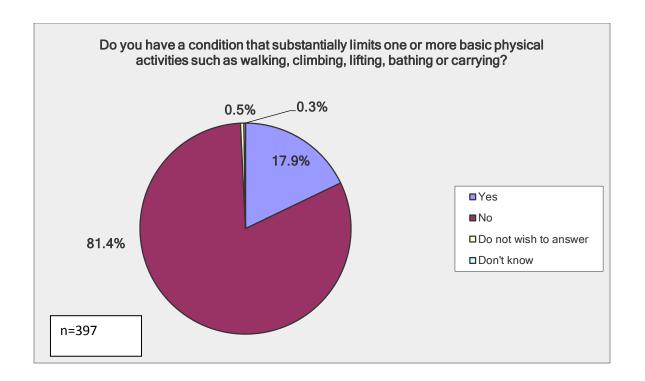


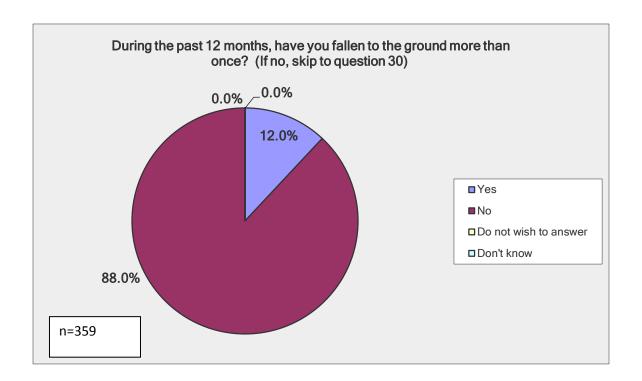


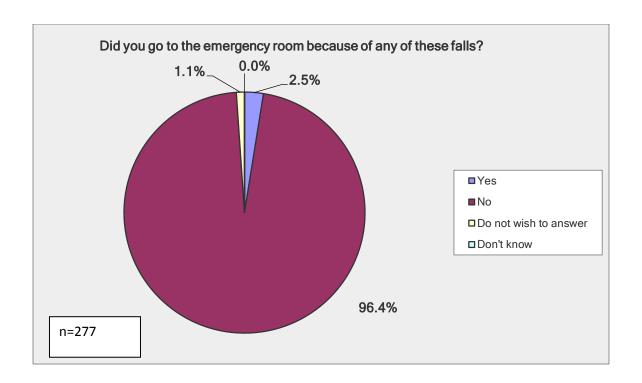


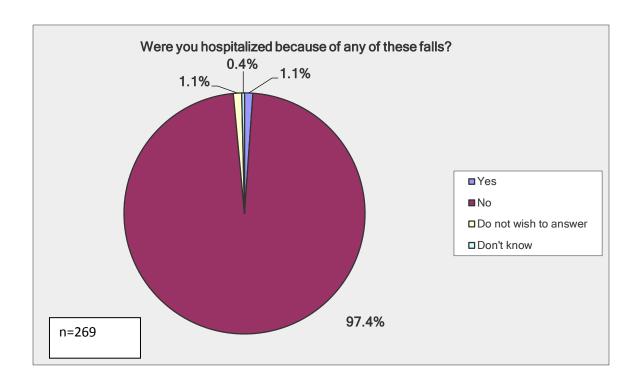


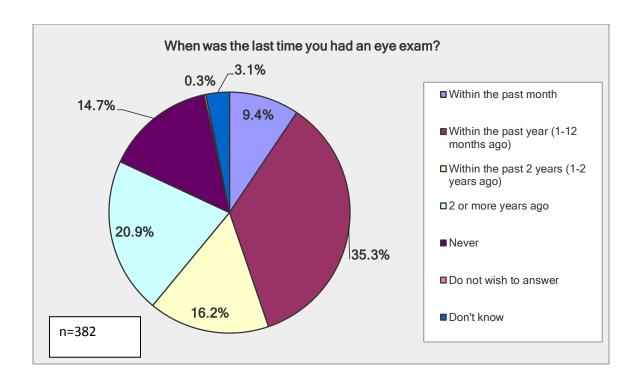


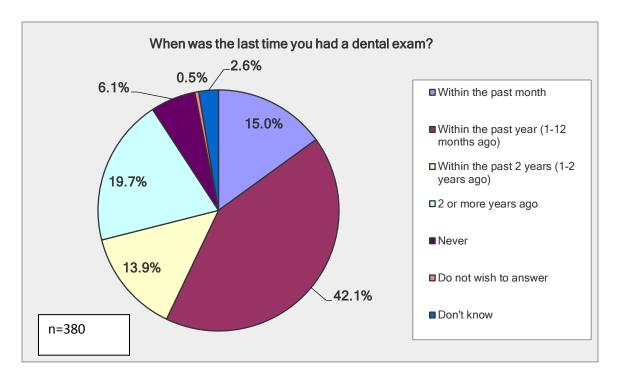




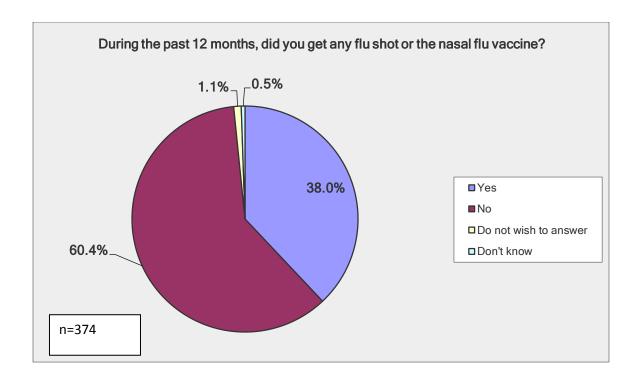


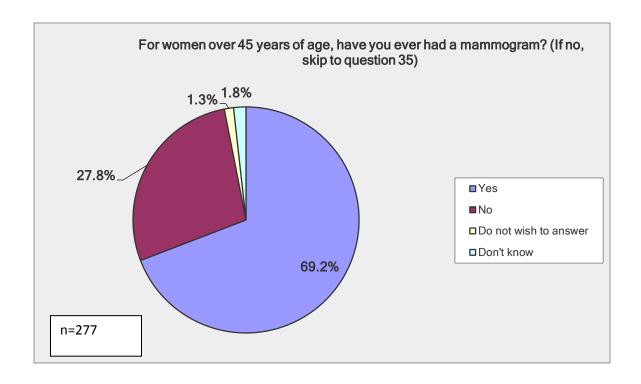






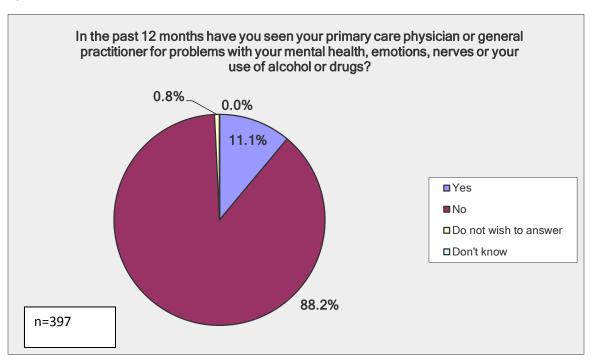
Question 32

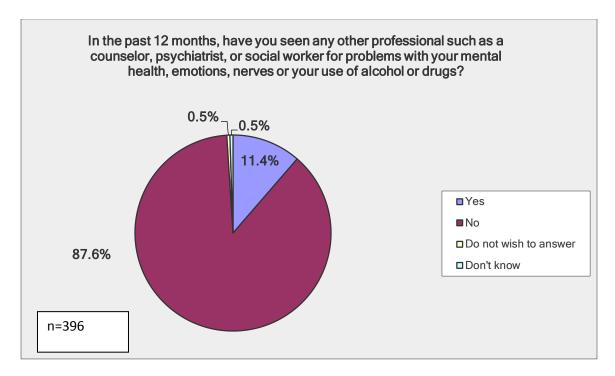




Question 34

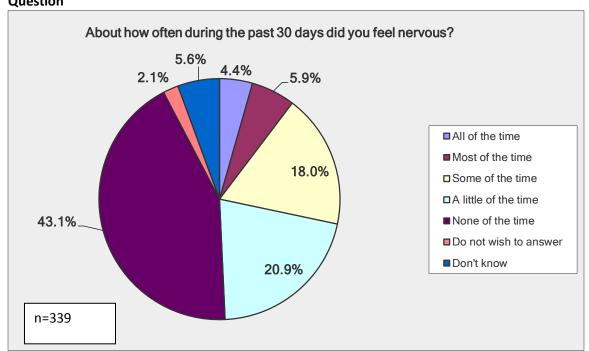
How long ago did you have your most recent mammogram?	
Answer Options	Response Count
	171
answered question	171

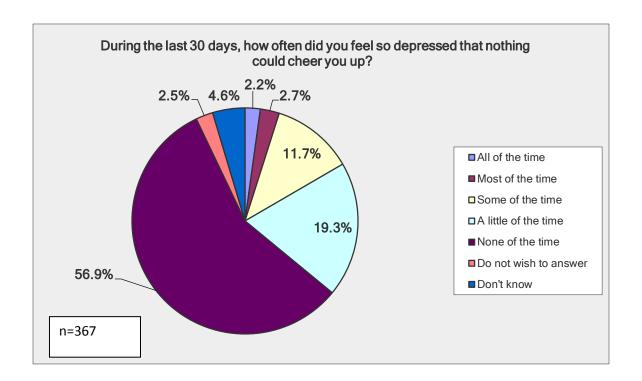


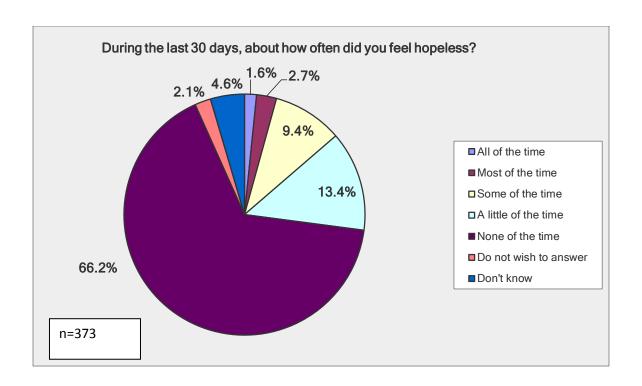


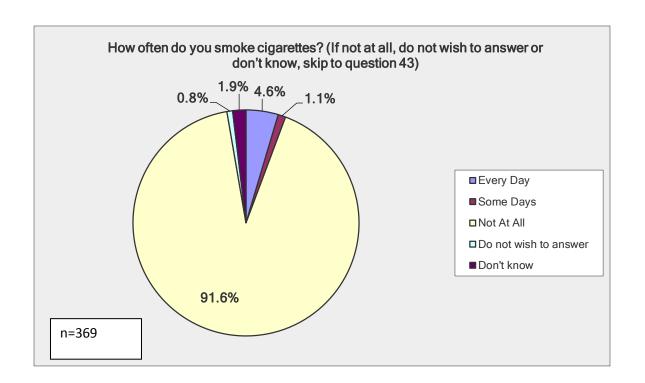
Question 37

How many days out of the past 30 days were you unable to work or carry out your normal activities because of your feeling nervous, depressed or emotionally stressed?	
Answer Options	Response Count
	262
answered question	262









On average, how many cigarettes do you smoke a day?		
Answer Options	Response Count	
	194	
answered question 194		

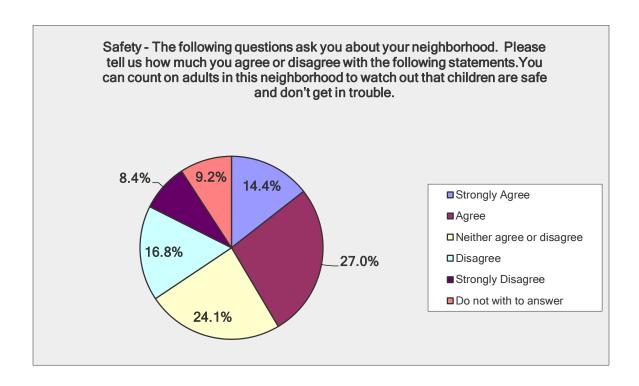
Question 43

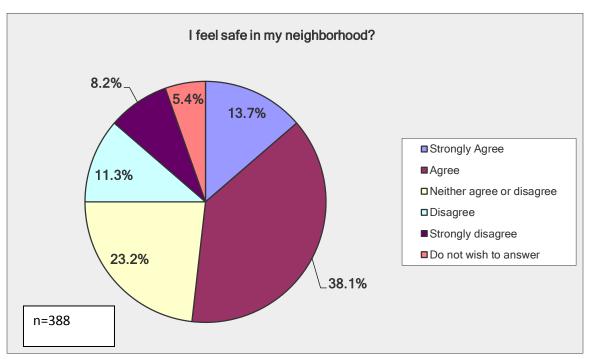
In the past 12 months, about how many times did you have 1 or 2 alcoholic drinks in a single day?		
Answer Options	Response Count	
	345	
answered question	345	

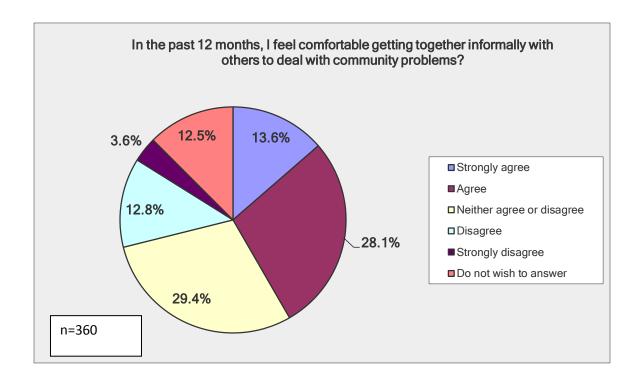
In the past 12 months, about how many times did you have 3 or 4 alcoholic drinks in a single day?		
Answer Options	Response Count	
	330	
answered question	330	

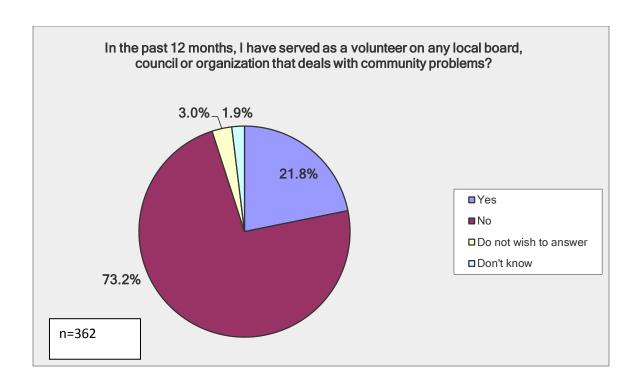
In the past 12 months, about how many times did you have 5 or more alcoholic drinks in a single day?		
Answer Options	Response Count	
	334	
answered question	334	

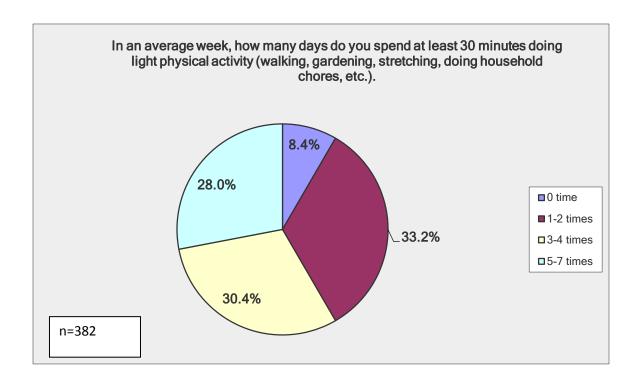
Question 46

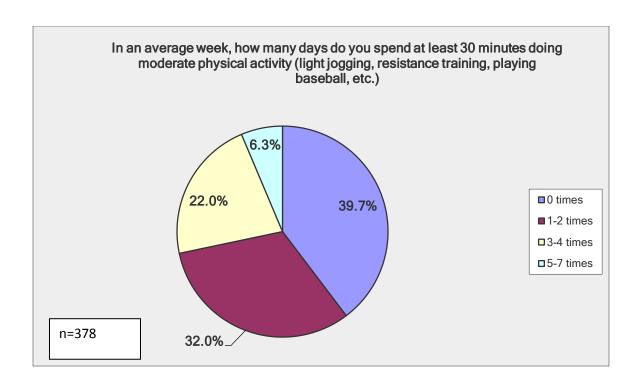


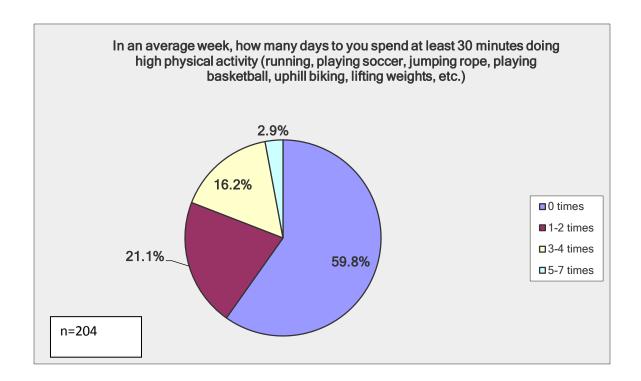












Parkview Community Hospital Top 25 Discharges by DRG, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	4,815
870/871/872	Septicemia	3,902
469/470	Major joint replacement/reattachment lower extremity	2,017
291/292/293	Heart failure & shock	1,739
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	1,710
193/194/195	Simple pneumonia & Pleurisy	1,367
682/683/684	Renal failure	1,230
313	Chest pain	1,131
417/418/419	Laparoscopic cholecystectomy	1,107
736-743	Uterine & adnexa procedures	1,106
064/065/066	Intercranial hemorrhage or cerebral infarction	1,065
689/690	Urinary tract infections	1,001
308/309/310	Cardiac arrhythmia & conduction disorders	966
377/378/379	G.I. hemorrhage	938
338-343	Appendectomy	917
602/603	Cellulitis	916
190/191/192	Chronic obstructive pulmonary disease	912
894-897	Alcohol/drug abuse or dependence	909
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	894
637/638/639	Diabetes	862
246-251	Percutaneous cardiovascular procedures	853
811/812	Red blood cell disorders	802
100/101	Seizures	671
202/203	Bronchitis & asthma	652
286/287	Circulatory disorders	511
TOTAL		32,993

Top DRG Discharges Among Parkview Community Hospital Service Area by Race/Ethnicity, 2014

Parkview Community Hospital's Top DRG Among Service Area Non-Hispanic White Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	2102
870/871/872	Septicemia	1775
469/470	Major joint replacement/reattachment lower extremity	1235
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	706
291/292/293	Heart failure & shock	676
193/194/195	Simple pneumonia & Pleurisy	587
894-897	Alcohol/drug abuse or dependence	538
190/191/192	Chronic obstructive pulmonary disease	522
308/309/310	Cardiac arrhythmia & conduction disorders	520
064/065/066	Intercranial hemorrhage or cerebral infarction	483

602/603	Cellulitis	452
689/690	Urinary tract infections	446
313	Chest pain	436
246-251	Percutaneous cardiovascular procedures	436
682/683/684	Renal failure	415
736-743	Uterine & adnexa procedures	406
377/378/379	G.I. hemorrhage	376
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	346
417/418/419	Laparoscopic cholecystectomy	325
637/638/639	Diabetes	295
338-343	Appendectomy	255
100/101	Seizures	253
456-460	Spinal fusion	250
189	Pulmonary edema & respiratory failure	212
811/812	Red blood cell disorders	209
286/287	Circulatory disorders	205
945/946	Rehabilitation	191
202/203	Bronchitis & asthma	158
Total		14810

Parkview Community Hospital's Top DRG Among Service Area Hispanic (Any Race) Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	1467
870/871/872	Septicemia	1364
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	660
417/418/419	Laparoscopic cholecystectomy	653
291/292/293	Heart failure & shock	574
338-343	Appendectomy	568
193/194/195	Simple pneumonia & Pleurisy	531
682/683/684	Renal failure	470
469/470	Major joint replacement/reattachment lower	
	extremity	457
736-743	Uterine & adnexa procedures	454
313	Chest pain	408
689/690	Urinary tract infections	395
640/641	Misc. disorders of nutrition, metabolism,	
	fluids/electrolytes	351
637/638/639	Diabetes	351
064/065/066	Intercranial hemorrhage or cerebral infarction	350
602/603	Cellulitis	346
377/378/379	G.I. hemorrhage	343
202/203	Bronchitis & asthma	322
308/309/310	Cardiac arrhythmia & conduction disorders	279
811/812	Red blood cell disorders	264

100/101	Seizures	258
894-897	Alcohol/drug abuse or dependence	239
246-251	Percutaneous cardiovascular procedures	215
190/191/192	Chronic obstructive pulmonary disease	188
286/287	Circulatory disorders	155
189	Pulmonary edema & respiratory failure	118
456-460	Spinal fusion	112
945/946	Rehabilitation	90
Total		11982

Parkview Community Hospital's Top DRG Among Service Area Non-Hispanic Black Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	866
870/871/872	Septicemia	429
291/292/293	Heart failure & shock	335
811/812	Red blood cell disorders	270
682/683/684	Renal failure	244
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	226
313	Chest pain	192
469/470	Major joint replacement/reattachment lower extremity	179
637/638/639	Diabetes	160
190/191/192	Chronic obstructive pulmonary disease	155
193/194/195	Simple pneumonia & Pleurisy	132
064/065/066	Intercranial hemorrhage or cerebral infarction	128
736-743	Uterine & adnexa procedures	123
377/378/379	G.I. hemorrhage	121
202/203	Bronchitis & asthma	118
100/101	Seizures	112
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	104
894-897	Alcohol/drug abuse or dependence	94
689/690	Urinary tract infections	91
308/309/310	Cardiac arrhythmia & conduction disorders	85
286/287	Circulatory disorders	76
246-251	Percutaneous cardiovascular procedures	64
417/418/419	Laparoscopic cholecystectomy	55
602/603	Cellulitis	55
189	Pulmonary edema & respiratory failure	54
456-460	Spinal fusion	37
945/946	Rehabilitation	36
338-343	Appendectomy	32
Total		4573

Parkview Community Hospital's Top DRG Among Service Area Non-Hispanic Asian Residents, 2014

MSDRG	DRG Description	Discharges
	21.0 2001. 2001	Diodilai 500

870/871/872	Septicemia	166
885	Psychoses	138
469/470	Major joint replacement/reattachment lower extremity	74
682/683/684	Renal failure	61
640/641	Misc. disorders of nutrition, metabolism,	
	fluids/electrolytes	59
736-743	Uterine & adnexa procedures	54
291/292/293	Heart failure & shock	53
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	48
193/194/195	Simple pneumonia & Pleurisy	48
377/378/379	G.I. hemorrhage	44
064/065/066	Intercranial hemorrhage or cerebral infarction	43
246-251	Percutaneous cardiovascular procedures	42
308/309/310	Cardiac arrhythmia & conduction disorders	40
313	Chest pain	37
811/812	Red blood cell disorders	33
417/418/419	Laparoscopic cholecystectomy	31
338-343	Appendectomy	31
689/690	Urinary tract infections	30
202/203	Bronchitis & asthma	25
602/603	Cellulitis	23
286/287	Circulatory disorders	21
100/101	Seizures	19
637/638/639	Diabetes	18
190/191/192	Chronic obstructive pulmonary disease	17
189	Pulmonary edema & respiratory failure	16
456-460	Spinal fusion	13
945/946	Rehabilitation	13
894-897	Alcohol/drug abuse or dependence	5
Total		1202

Parkview Community Hospital's Top DRG Among Service Area Non-Hispanic Native-American Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	16
870/871/872	Septicemia	7
469/470	Major joint replacement/reattachment lower extremity	5
193/194/195	Simple pneumonia & Pleurisy	5
291/292/293	Heart failure & shock	4
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	4
689/690	Urinary tract infections	3
190/191/192	Chronic obstructive pulmonary disease	3
894-897	Alcohol/drug abuse or dependence	3
640/641	Misc. disorders of nutrition, metabolism,	
	fluids/electrolytes	3

637/638/639	Diabetes	3
736-743	Uterine & adnexa procedures	2
377/378/379	G.I. hemorrhage	2
602/603	Cellulitis	2
682/683/684	Renal failure	1
313	Chest pain	1
417/418/419	Laparoscopic cholecystectomy	1
064/065/066	Intercranial hemorrhage or cerebral infarction	1
308/309/310	Cardiac arrhythmia & conduction disorders	1
338-343	Appendectomy	1
246-251	Percutaneous cardiovascular procedures	1
811/812	Red blood cell disorders	1
202/203	Bronchitis & asthma	1
286/287	Circulatory disorders	1
189	Pulmonary edema & respiratory failure	1
100/101	Seizures	0
456-460	Spinal fusion	0
945/946	Rehabilitation	0
Total		73

Parkview Community Hospital's Top DRG Among Service Area Non-Hispanic Other/Unknown Race Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	226
870/871/872	Septicemia	167
291/292/293	Heart failure & shock	98
246-251	Percutaneous cardiovascular procedures	95
469/470	Major joint replacement/reattachment lower extremity	70
736-743	Uterine & adnexa procedures	68
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	67
193/194/195	Simple pneumonia & Pleurisy	67
313	Chest pain	60
064/065/066	Intercranial hemorrhage or cerebral infarction	60
377/378/379	G.I. hemorrhage	54
286/287	Circulatory disorders	53
417/418/419	Laparoscopic cholecystectomy	44
308/309/310	Cardiac arrhythmia & conduction disorders	43
602/603	Cellulitis	43
682/683/684	Renal failure	41
689/690	Urinary tract infections	38
637/638/639	Diabetes	35
894-897	Alcohol/drug abuse or dependence	33
640/641	Misc. disorders of nutrition, metabolism,	
	fluids/electrolytes	33
338-343	Appendectomy	31

190/191/192	Chronic obstructive pulmonary disease	31
100/101	Seizures	31
202/203	Bronchitis & asthma	29
811/812	Red blood cell disorders	25
189	Pulmonary edema & respiratory failure	21
456-460	Spinal fusion	18
945/946	Rehabilitation	13
Total		1594

Top DRG Discharges Among Parkview Community Hospital Service Area by Age Group, 2014

Parkview Community Hospital's Top DRG Among Service Area Residents Under 18 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	3622
870/871/872	Septicemia	1462
736-743	Uterine & adnexa procedures	960
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	940
417/418/419	Laparoscopic cholecystectomy	850
894-897	Alcohol/drug abuse or dependence	791
313	Chest pain	634
291/292/293	Heart failure & shock	562
469/470	Major joint replacement/reattachment lower extremity	557
637/638/639	Diabetes	537
602/603	Cellulitis	517
338-343	Appendectomy	490
682/683/684	Renal failure	474
811/812	Red blood cell disorders	430
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	385
064/065/066	Intercranial hemorrhage or cerebral infarction	328
246-251	Percutaneous cardiovascular procedures	325
377/378/379	G.I. hemorrhage	320
689/690	Urinary tract infections	315
308/309/310	Cardiac arrhythmia & conduction disorders	313
100/101	Seizures	304
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	287
190/191/192	Chronic obstructive pulmonary disease	255
286/287	Circulatory disorders	235
456-460	Spinal fusion	230
202/203	Bronchitis & asthma	179
945/946	Rehabilitation	158
189	Pulmonary edema & respiratory failure	147
Total		16607

Parkview Community Hospital's Top DRG Among Service Area Residents 18-59 Years, 2014

MSDRG	DRG Description	Discharges
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870/871/872	Septicemia	2383
469/470	Major joint replacement/reattachment lower extremity	1462
291/292/293	Heart failure & shock	1175
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	750
682/683/684	Renal failure	749
064/065/066	Intercranial hemorrhage or cerebral infarction	733
190/191/192	Chronic obstructive pulmonary disease	655
308/309/310	Cardiac arrhythmia & conduction disorders	639
689/690	Urinary tract infections	600
377/378/379	G.I. hemorrhage	590
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	583
246-251	Percutaneous cardiovascular procedures	518
313	Chest pain	496
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	483
885	Psychoses	446
602/603	Cellulitis	323
811/812	Red blood cell disorders	318
286/287	Circulatory disorders	267
189	Pulmonary edema & respiratory failure	260
417/418/419	Laparoscopic cholecystectomy	240
637/638/639	Diabetes	234
945/946	Rehabilitation	176
456-460	Spinal fusion	169
100/101	Seizures	136
736-743	Uterine & adnexa procedures	134
894-897	Alcohol/drug abuse or dependence	104
202/203	Bronchitis & asthma	83
338-343	Appendectomy	52
Total		14758

Parkview Community Hospital's Top DRG Among Service Area Residents 60 Plus Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	747
202/203	Bronchitis & asthma	391
338-343	Appendectomy	376
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	235
100/101	Seizures	233
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	188
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	126
637/638/639	Diabetes	91
689/690	Urinary tract infections	88
602/603	Cellulitis	81
870/871/872	Septicemia	63
811/812	Red blood cell disorders	54
456-460	Spinal fusion	31
377/378/379	G.I. hemorrhage	30

417/418/419	Laparoscopic cholecystectomy	19
894-897	Alcohol/drug abuse or dependence	17
308/309/310	Cardiac arrhythmia & conduction disorders	16
189	Pulmonary edema & respiratory failure	15
736-743	Uterine & adnexa procedures	13
246-251	Percutaneous cardiovascular procedures	10
682/683/684	Renal failure	9
286/287	Circulatory disorders	9
945/946	Rehabilitation	9
190/191/192	Chronic obstructive pulmonary disease	6
313	Chest pain	4
064/065/066	Intercranial hemorrhage or cerebral infarction	4
291/292/293	Heart failure & shock	3
469/470	Major joint replacement/reattachment lower extremity	1
Total		2869

Parkview Community Hospital Focus Group Analysis

Question #1 – How long have you lived in the Inland Empire? If you are new to the area, what brought you here?

Data for question 1 was analyzed individually for each focus group and as an aggregate. A mean and range was calculated for each focus group and a mean, median and range was calculated for the aggregate data. Among all participants, 4.3% stated they lived in the Inland Empire their entire life. This information was not incorporated in the analysis as the number of years living in the Inland Empire was not identified for these participants. Among all participants, the highest frequency of individual years living in the Inland Empire was six and eight years; 8.7% for each.

A. Parkview

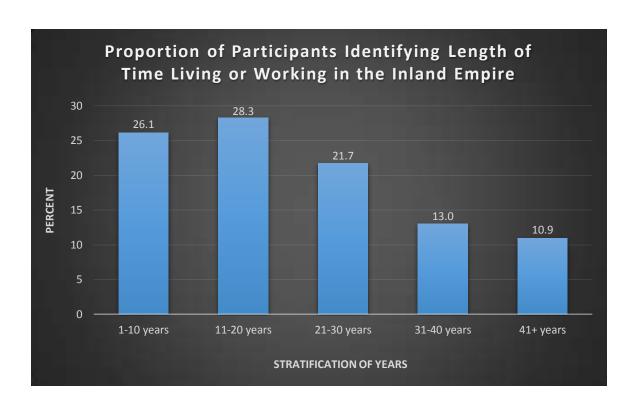
- a. Mean 30.4 years
- b. Range (25-40 years)

Overall Participating Hospitals (Aggregate)

Mean - 21.8 years

Median – 19 years

Range – 1-56 years



Question #2 – What if anything is different about your community now that was not the case five years ago?

- 1. Low income population increasing seeing increase in homeless population and people without jobs, increasing unemployment rates and individuals with no health insurance
- 2. Increase in diversity with Hispanics and Asians
- 3. Global warming days are much hotter, no water or rain
- 4. Traffic, congestion and road construction

Question #3 – What kind of projects, if any, have people in your community worked on together in the past five years? (Note: Participants stated they were members of organizations who assist with services)

- 1. Built environment The Grow Riverside program and programs/projects addressing growth issues in underdeveloped areas
- 2. Health involved with helping to start University of California, Riverside Medical School, the program First Walk

Question #4 – Think about your community over the next five years, what changes would you make or not make and why?

- 1. Healthcare need to increase number of physicians in community, increase health care services provided in community that are needed by community, increase of healthcare services that reflect the community's needs, increase collaboration with healthcare community for services that are needed
- 2. Government/leadership change leadership of city council, city council needs to change its focus, city council should allow for community to share their ideas, leadership of city makes us look bad
- 3. Programs that provide resources for better jobs that pay better and are professional. Other training services for employment preparation, increase hourly rate for jobs
- 4. Funding resources that bring money to community

Question #5 – If you knew someone was thinking about moving to your community, what would you tell them or her about the area to convince them to move or not to move?

I – Positive

- 1. Access to activities that are affordable and culturally rich
- 2. Centrally located resources
- 3. Strong school district
- 4. Affordable housing
- 5. Strong Chamber of Commerce for business

II – Negative

- 1. Traffic
- 2. Cultural division

Question #6 – Describe how your community could be improved.

- 1. Realtors need to do a better job at showcasing resources and beauty of our community
- 2. Look at resources in terms of time and not distance and communicate this
- 3. Convince people we are centrally located
- 4. Legislators work for constituents in community and not for their own interests
- 5. Change people's perception of our community
- 6. Increase the promotion of health and access to physical activity programs/resources for younger generation

Question #7 – What makes your community a healthy community?

- 1. An environment that has access to recreational activities, such as walking and biking paths, parks, low-cost youth sports, programs like the Start Right. It's a weight loss program that promotes exercising. Also, low-income population has access to sliding scale gym memberships.
- 2. The weather
- 3. The air quality

Question #8 – What makes your community unhealthy?

- 1. Issues pertaining to healthy eating. For instance, the abundance of fast food restaurants and unaffordable healthy foods
- 2. Traffic
- 3. Parents who are not engaged in their children's health

Question #9 – Describe barriers that may pose challenges to achieving positive community health.

- 1. Lack of certain resources and programs to promote healthy eating. There are not enough markets with healthy foods in the community. There is a cultural barrier to eating healthy. The community does not engage children in eating healthy at an early age
- 2. Not enough veteran support yet we are seeing an increase in homeless veterans in our community
- 3. Lack of physicians in the community

Question #10 – From what health problems do people in your community suffer?

- 1. Chronic disease diabetes, asthma, heart disease, stress
- 2. Diseases caused by the environment and pollution
- 3. Mental health
- 4. Substance abuse
- 5. Social factors impacting health

Question #11 – Where do people in your community go to receive health care?

1. Clinics, emergency rooms, county hospitals, healthcare facility in the community they work

Question #12 – What, if any, environmental health concerns do you face in your community?

- 1. Air pollution and quality due to increased traffic from cars, buses, trains
- 2. Allergies due to the environment
- 3. Water shortage
- 4. Overcrowding in housing

Question #13 – Think about the issues we have talked about today. What issues do you think are the most important for your community to address? Why?

- 1. Lack of jobs
- 2. The homeless problem
- 3. Access to healthcare
- 4. Transportation

Question #14 – Think about the strengths in your community we have talked about today. What do you think is the community's greatest asset?

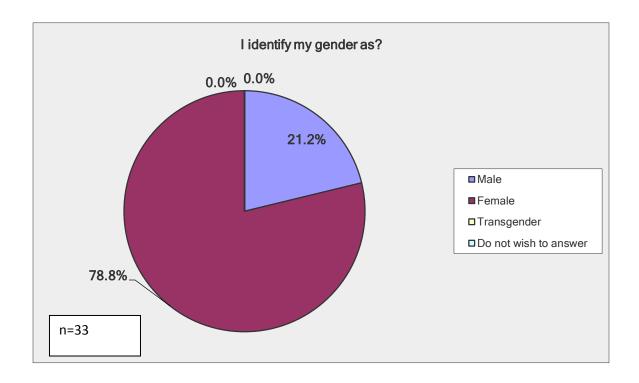
1. Its people (sense of community), its diversity, it's a college town (many colleges), there is a feeling of a big city but small town feel

Question #15 – Is there anything else we have not asked about that is important for us to know about in your community?

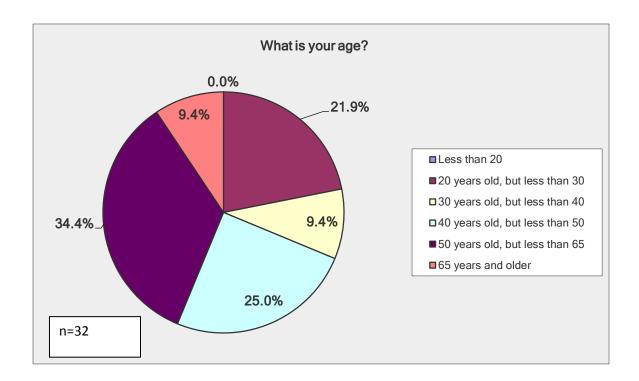
Need more bike lanes, electronic cigarettes everywhere so it seem like smoking is healthy

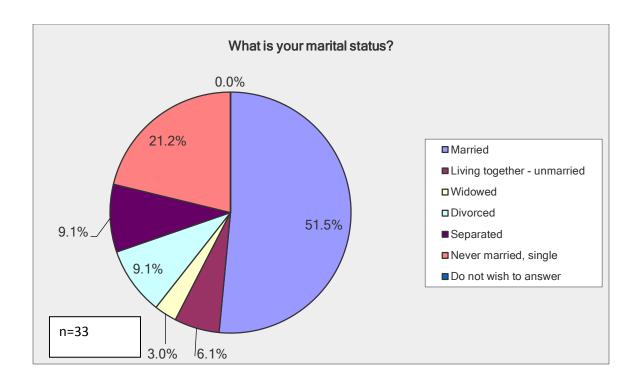
Parkview QOLS Service Area Analysis

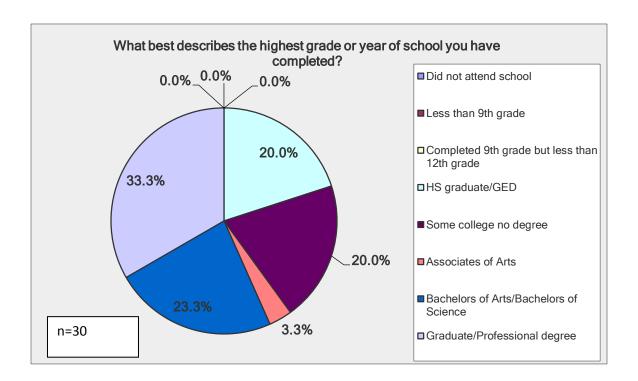
Question 1

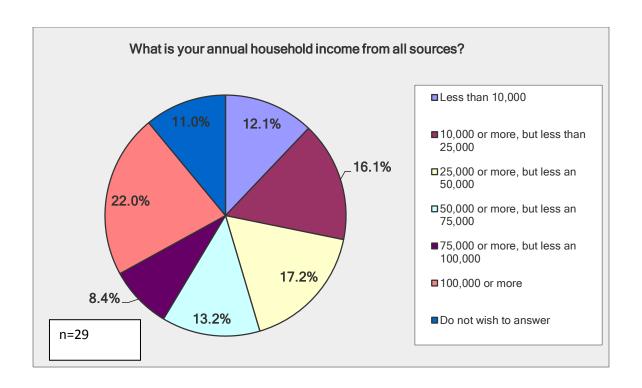


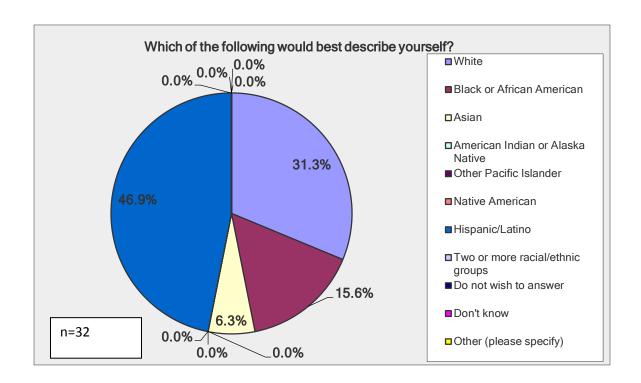
What is your zip code?	
Answer Options	Response Count
	33
answered question	33

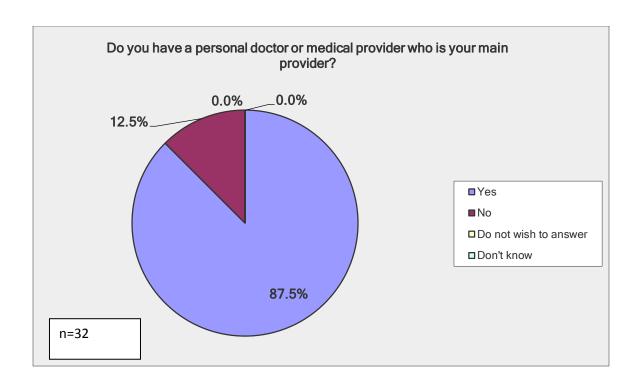


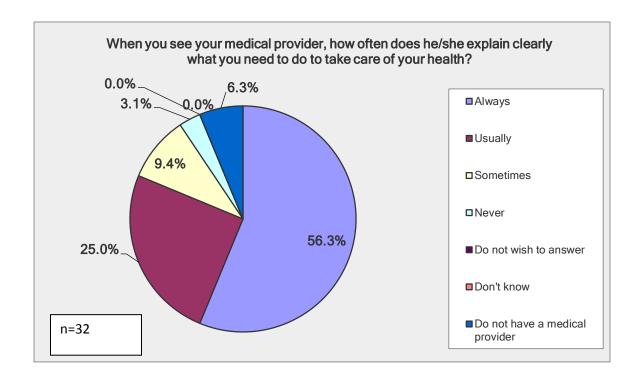


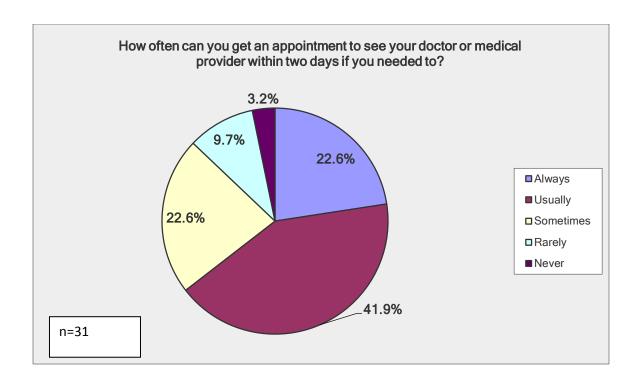


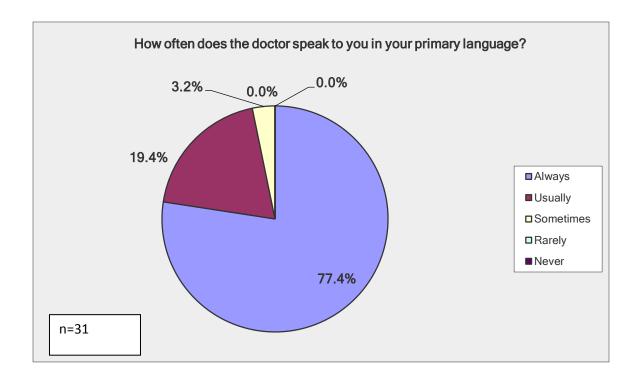


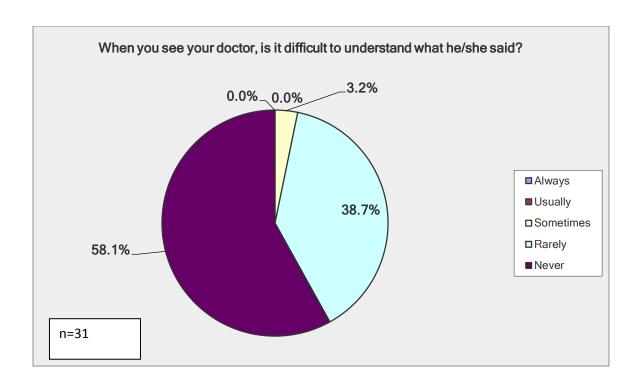


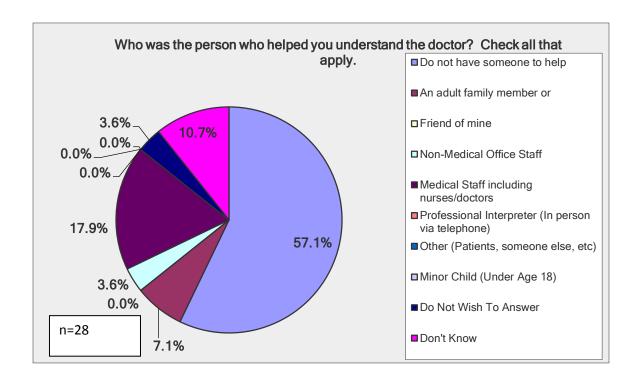


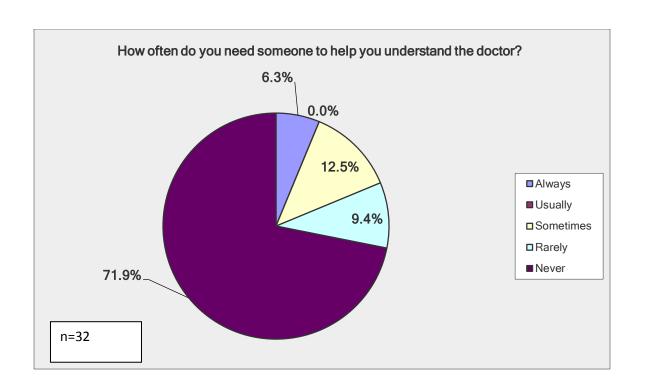


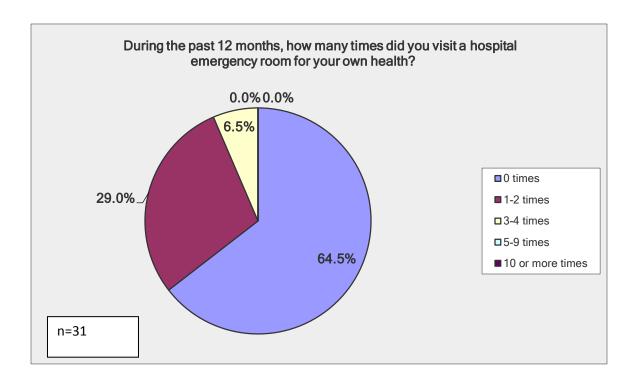


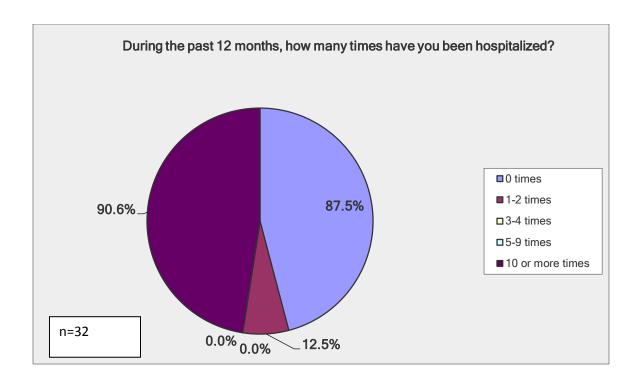


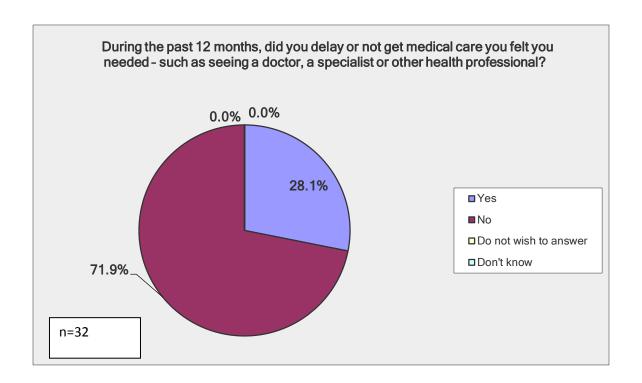


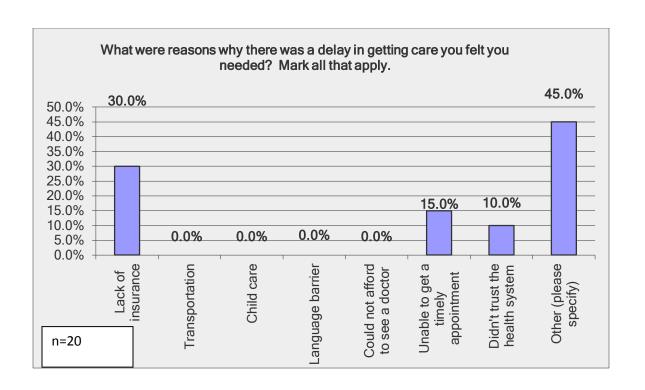


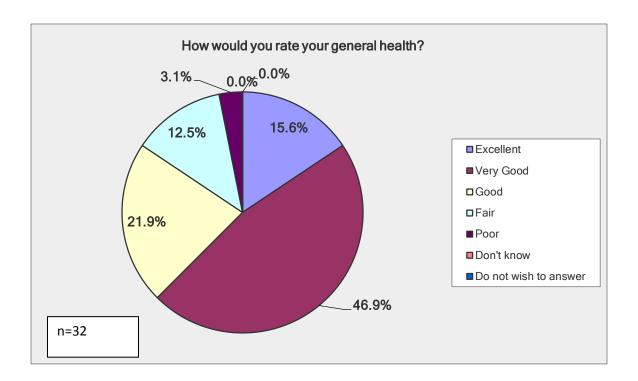


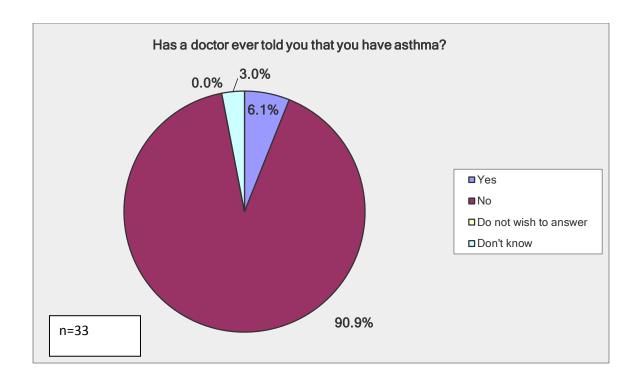


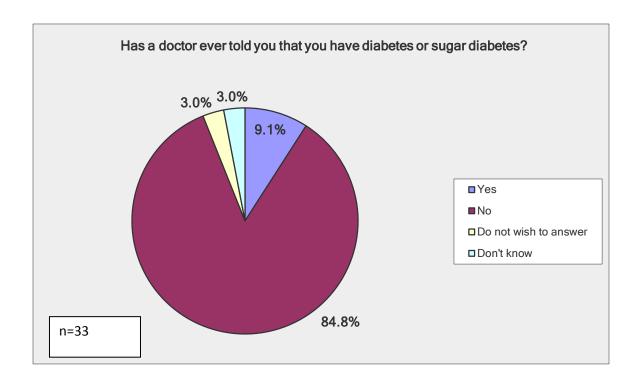


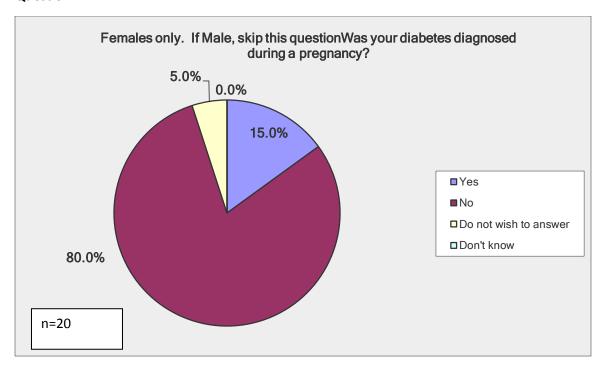


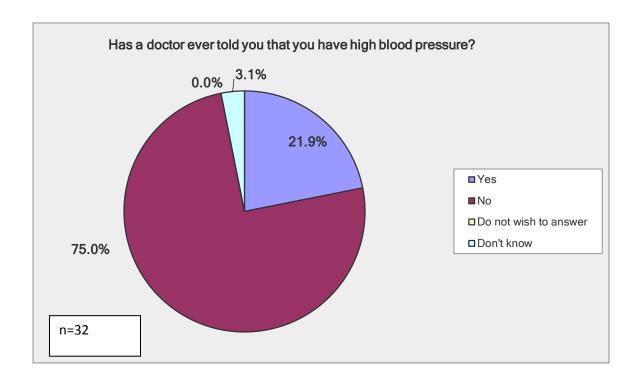


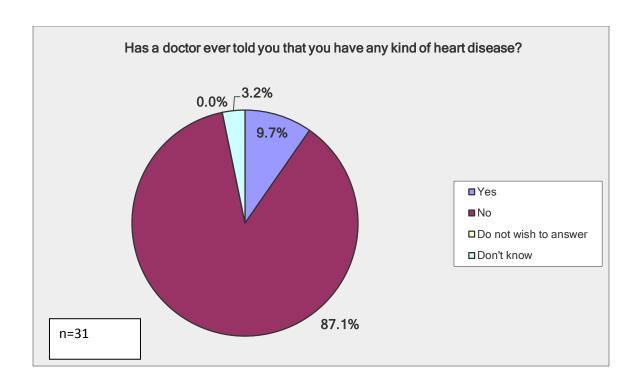


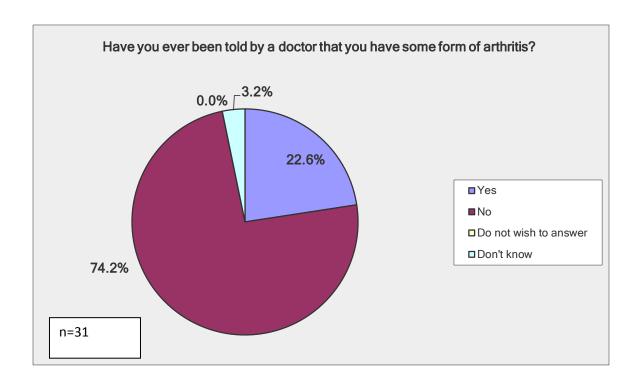


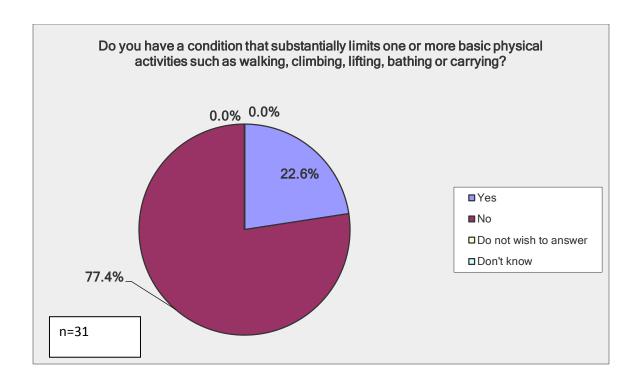


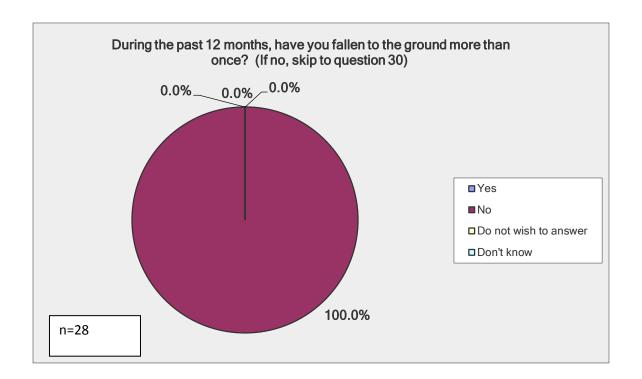


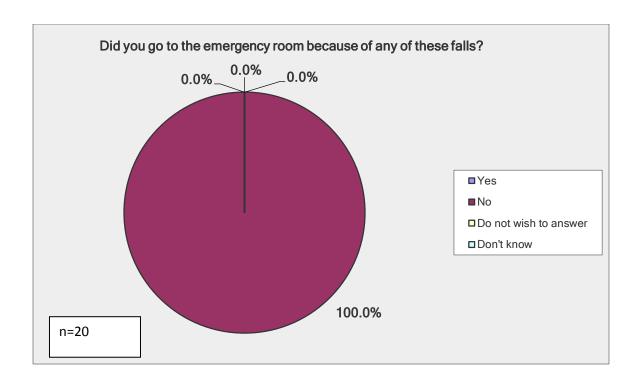


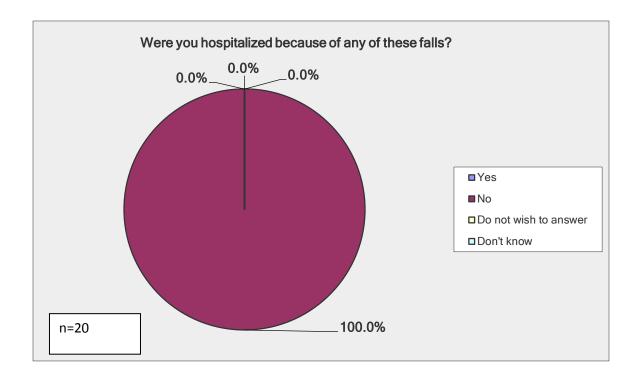


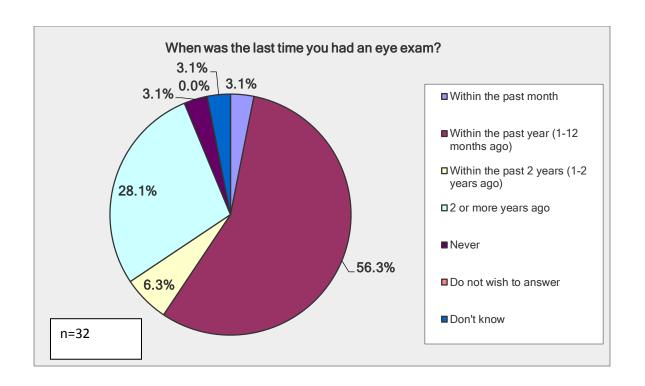


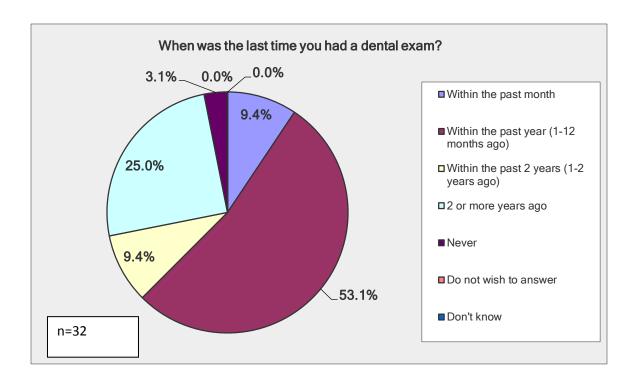


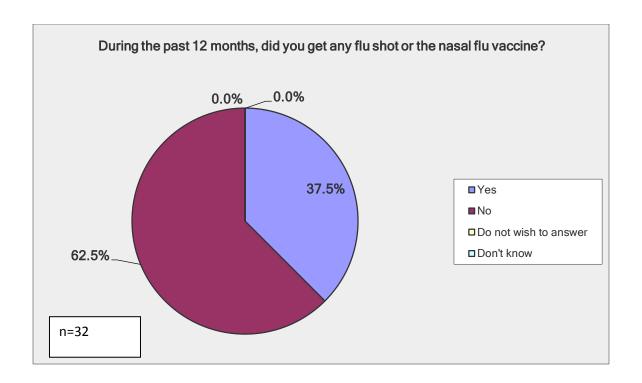


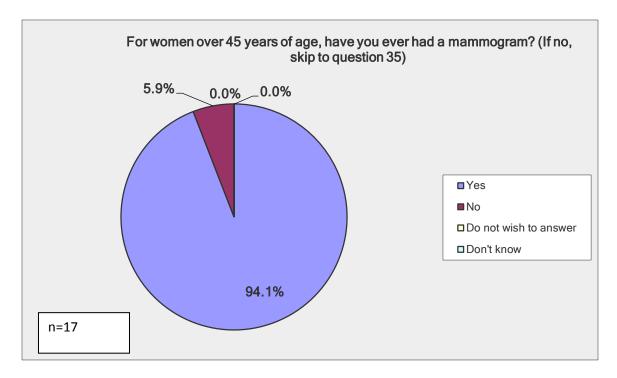






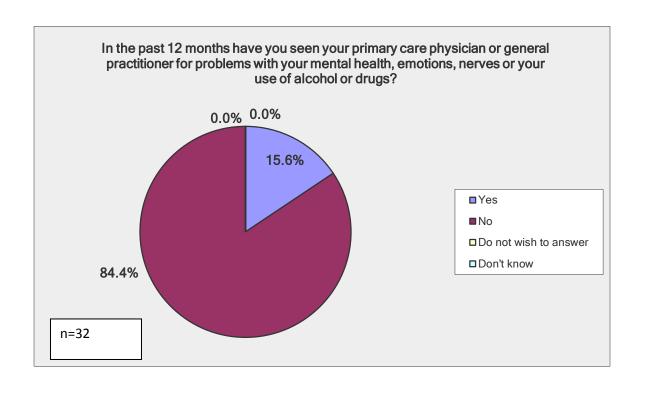


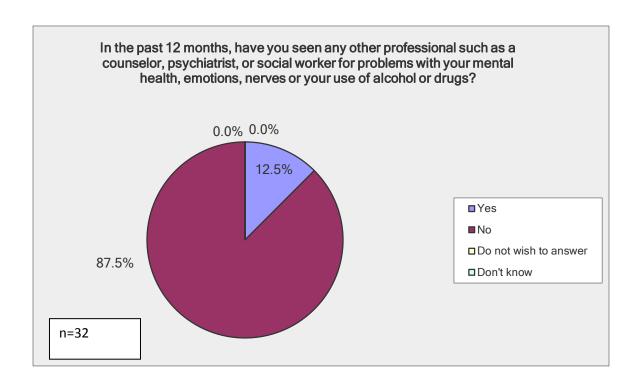




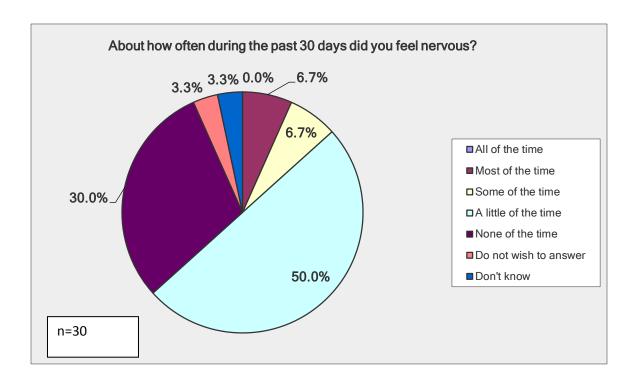
Question 34

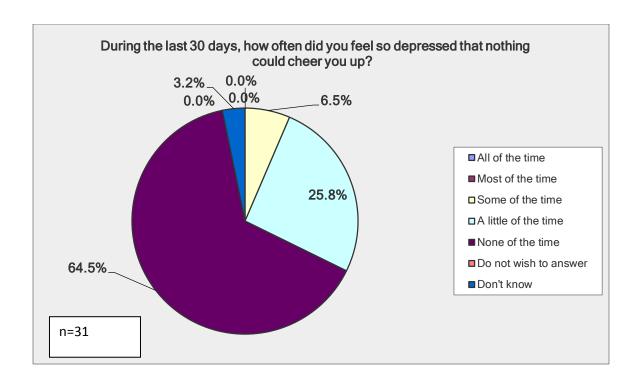
How long ago did you have your most recent mammogram?		
Answer Options	Response Count	
	15	
answered question	15	

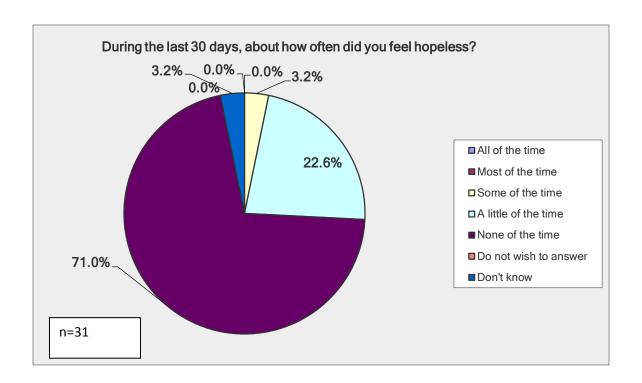


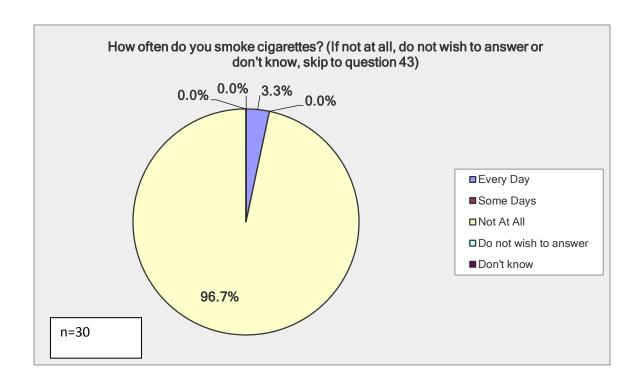


How many days out of the past 30 days were you unable to work or carry out your normal activities because of your feeling nervous, depressed or emotionally stressed?	
Answer Options	Response Count
	25
answered question	28









On average, how many cigarettes do you smoke a day?	
Answer Options	Response Count
	14
answered question	14

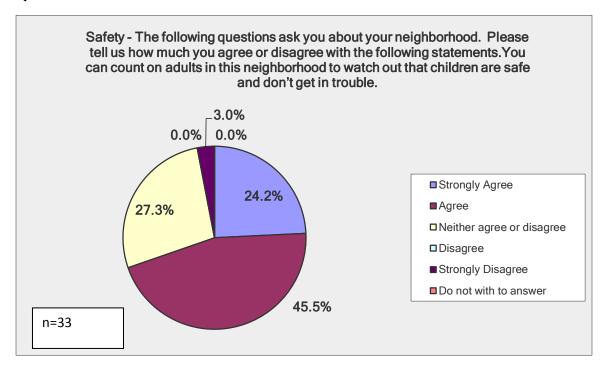
Question 43

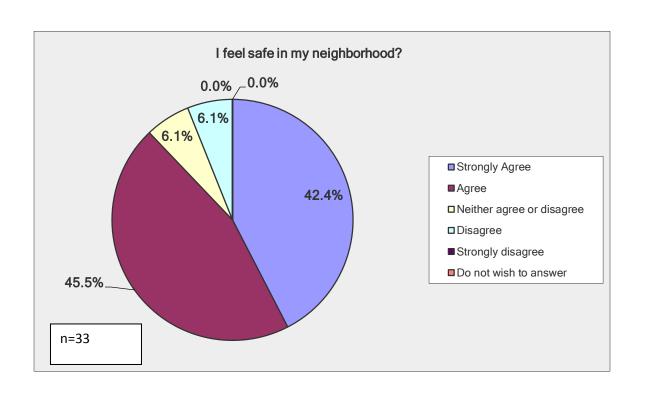
alcoholic drinks in a single day?		
Answer Options	Response Count	
	32	
answered question	32	

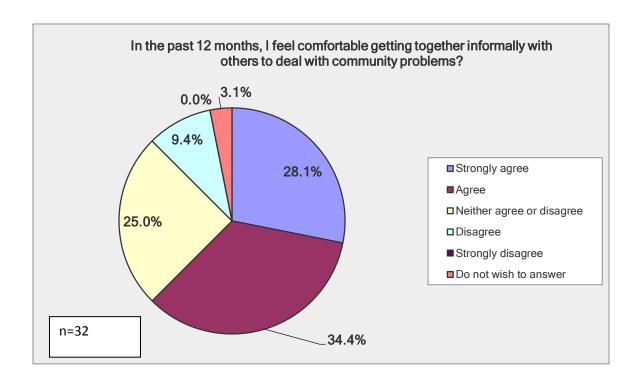
In the past 12 months, about how many times did you have 3 or 4 alcoholic drinks in a single day?	
Answer Options	Response Count
	32
answered question	32

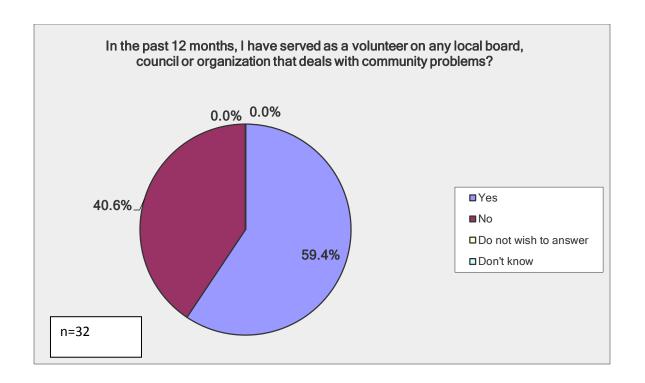
In the past 12 months, about how many times did you have 5 or more alcoholic drinks in a single day?		
Answer Options	Response Count	
	32	
answered question	32	

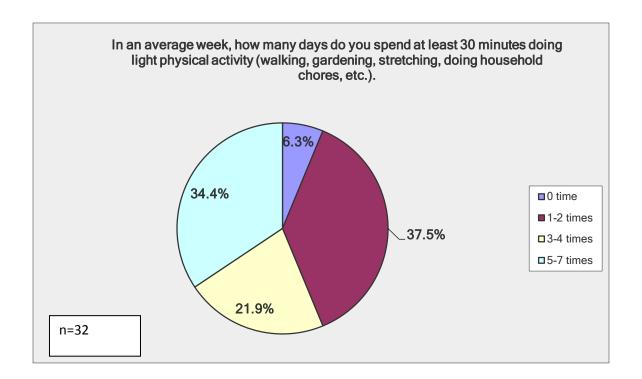
Question 46

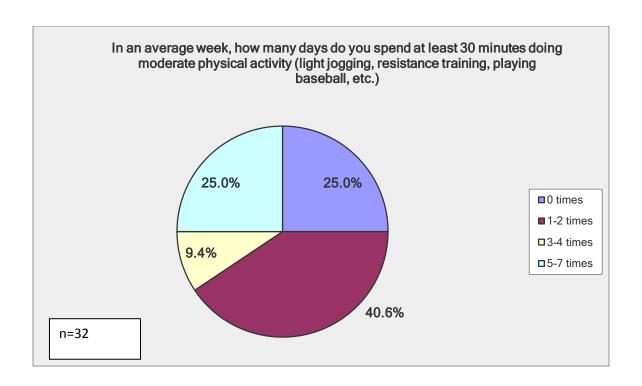


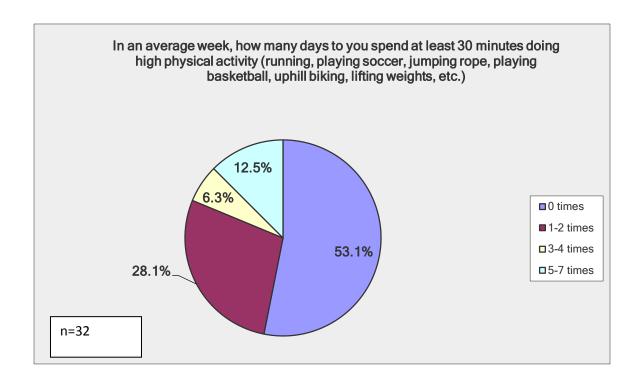












Redlands Hospital Top 25 Discharges by DRG, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	7,491
870/871/872	Septicemia	3,764
469/470	Major joint replacement/reattachment lower extremity	1,975
291/292/293	Heart failure & shock	1,600
193/194/195	Simple pneumonia & Pleurisy	1,456
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	1,344
682/683/684	Renal failure	1,131
064/065/066	Intercranial hemorrhage or cerebral infarction	1,080
945/946	Rehabilitation	986
308/309/310	Cardiac arrhythmia & conduction disorders	956
313	Chest pain	956
202/203	Bronchitis & asthma	955
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	926
602/603	Cellulitis	913
417/418/419	Laparoscopic cholecystectomy	882
736-743	Uterine & adnexa procedures	881
637/638/639	Diabetes	874
689/690	Urinary tract infections	871
377/378/379	G.I. hemorrhage	853
190/191/192	Chronic obstructive pulmonary disease	837
246-251	Percutaneous cardiovascular procedures	770
894-897	Alcohol/drug abuse or dependence	763
338-343	Appendectomy	702
811/812	Red blood cell disorders	702
189	Pulmonary edema & respiratory failure	552
TOTAL		34,220

Top DRG Discharges Among Redlands Hospital Service Area by Race/Ethnicity, 2014

Redland Hospital's Top DRG Among Service Area Non-Hispanic White Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	3347
870/871/872	Septicemia	1870
469/470	Major joint replacement/reattachment lower extremity	1350
291/292/293	Heart failure & shock	709
193/194/195	Simple pneumonia & Pleurisy	673
945/946	Rehabilitation	665
308/309/310	Cardiac arrhythmia & conduction disorders	592
190/191/192	Chronic obstructive pulmonary disease	518
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	513
064/065/066	Intercranial hemorrhage or cerebral infarction	510
682/683/684	Renal failure	495
602/603	Cellulitis	457
894-897	Alcohol/drug abuse or dependence	455

246-251	Percutaneous cardiovascular procedures	410
377/378/379	G.I. hemorrhage	404
689/690	Urinary tract infections	372
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	367
736-743	Uterine & adnexa procedures	311
189	Pulmonary edema & respiratory failure	289
313	Chest pain	279
637/638/639	Diabetes	272
456-460	Spinal fusion	261
417/418/419	Laparoscopic cholecystectomy	255
286/287	Circulatory disorders	222
338-343	Appendectomy	190
100/101	Seizures	185
811/812	Red blood cell disorders	180
202/203	Bronchitis & asthma	175
Total		16326

Redland Hospital's Top DRG Among Service Area Hispanic (Any Race) Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	2367
870/871/872	Septicemia	1277
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	596
202/203	Bronchitis & asthma	552
193/194/195	Simple pneumonia & Pleurisy	548
417/418/419	Laparoscopic cholecystectomy	543
291/292/293	Heart failure & shock	528
338-343	Appendectomy	453
637/638/639	Diabetes	440
313	Chest pain	411
682/683/684	Renal failure	406
736-743	Uterine & adnexa procedures	405
469/470	Major joint replacement/reattachment lower extremity	397
689/690	Urinary tract infections	375
602/603	Cellulitis	367
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	355
064/065/066	Intercranial hemorrhage or cerebral infarction	347
377/378/379	G.I. hemorrhage	296
246-251	Percutaneous cardiovascular procedures	242
100/101	Seizures	242
308/309/310	Cardiac arrhythmia & conduction disorders	228
945/946	Rehabilitation	223
811/812	Red blood cell disorders	217
894-897	Alcohol/drug abuse or dependence	209
286/287	Circulatory disorders	190
190/191/192	Chronic obstructive pulmonary disease	163
189	Pulmonary edema & respiratory failure	147

456-460	Spinal fusion	104
Total		12628

Redland Hospital's Top DRG Among Service Area Non-Hispanic Black Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	1479
870/871/872	Septicemia	403
291/292/293	Heart failure & shock	277
811/812	Red blood cell disorders	260
313	Chest pain	217
202/203	Bronchitis & asthma	182
682/683/684	Renal failure	166
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	165
193/194/195	Simple pneumonia & Pleurisy	160
469/470	Major joint replacement/reattachment lower extremity	158
190/191/192	Chronic obstructive pulmonary disease	126
637/638/639	Diabetes	125
064/065/066	Intercranial hemorrhage or cerebral infarction	124
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	119
736-743	Uterine & adnexa procedures	110
377/378/379	G.I. hemorrhage	102
308/309/310	Cardiac arrhythmia & conduction disorders	88
689/690	Urinary tract infections	88
189	Pulmonary edema & respiratory failure	88
100/101	Seizures	83
286/287	Circulatory disorders	83
894-897	Alcohol/drug abuse or dependence	65
945/946	Rehabilitation	60
602/603	Cellulitis	60
246-251	Percutaneous cardiovascular procedures	58
417/418/419	Laparoscopic cholecystectomy	49
456-460	Spinal fusion	34
338-343	Appendectomy	29
Total		4958

Redland Hospital's Top DRG Among Service Area Non-Hispanic Asian Residents, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	131
885	Psychoses	109
291/292/293	Heart failure & shock	60
064/065/066	Intercranial hemorrhage or cerebral infarction	56
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	53
193/194/195	Simple pneumonia & Pleurisy	44
682/683/684	Renal failure	43
469/470	Major joint replacement/reattachment lower extremity	38

736-743	Uterine & adnexa procedures	38
377/378/379	G.I. hemorrhage	35
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	32
811/812	Red blood cell disorders	32
313	Chest pain	31
308/309/310	Cardiac arrhythmia & conduction disorders	28
246-251	Percutaneous cardiovascular procedures	28
945/946	Rehabilitation	24
637/638/639	Diabetes	23
689/690	Urinary tract infections	21
202/203	Bronchitis & asthma	17
190/191/192	Chronic obstructive pulmonary disease	17
286/287	Circulatory disorders	16
417/418/419	Laparoscopic cholecystectomy	15
189	Pulmonary edema & respiratory failure	13
100/101	Seizures	13
338-343	Appendectomy	11
602/603	Cellulitis	10
894-897	Alcohol/drug abuse or dependence	9
456-460	Spinal fusion	8
Total		955

Redland Hospital's Top DRG Among Service Area Non-Hispanic Native American Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	23
870/871/872	Septicemia	20
469/470	Major joint replacement/reattachment lower extremity	4
291/292/293	Heart failure & shock	9
193/194/195	Simple pneumonia & Pleurisy	3
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	9
682/683/684	Renal failure	4
064/065/066	Intercranial hemorrhage or cerebral infarction	1
945/946	Rehabilitation	0
313	Chest pain	3
308/309/310	Cardiac arrhythmia & conduction disorders	3
202/203	Bronchitis & asthma	1
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	8
602/603	Cellulitis	2
417/418/419	Laparoscopic cholecystectomy	1
736-743	Uterine & adnexa procedures	3
637/638/639	Diabetes	7
689/690	Urinary tract infections	7
377/378/379	G.I. hemorrhage	3
190/191/192	Chronic obstructive pulmonary disease	2
246-251	Percutaneous cardiovascular procedures	3
894-897	Alcohol/drug abuse or dependence	11

338-343	Appendectomy	3
811/812	Red blood cell disorders	2
189	Pulmonary edema & respiratory failure	2
100/101	Seizures	4
286/287	Circulatory disorders	4
456-460	Spinal fusion	0
Total		142

Redland Hospital's Top DRG Among Service Area Non-Hispanic Other/Unknown Race Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	253
870/871/872	Septicemia	68
064/065/066	Intercranial hemorrhage or cerebral infarction	42
469/470	Major joint replacement/reattachment lower extremity	35
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	30
193/194/195	Simple pneumonia & Pleurisy	29
246-251	Percutaneous cardiovascular procedures	29
202/203	Bronchitis & asthma	28
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	24
286/287	Circulatory disorders	22
417/418/419	Laparoscopic cholecystectomy	20
291/292/293	Heart failure & shock	18
682/683/684	Renal failure	18
313	Chest pain	18
308/309/310	Cardiac arrhythmia & conduction disorders	18
602/603	Cellulitis	18
338-343	Appendectomy	17
945/946	Rehabilitation	16
894-897	Alcohol/drug abuse or dependence	16
736-743	Uterine & adnexa procedures	14
377/378/379	G.I. hemorrhage	14
190/191/192	Chronic obstructive pulmonary disease	13
189	Pulmonary edema & respiratory failure	13
456-460	Spinal fusion	12
637/638/639	Diabetes	11
811/812	Red blood cell disorders	11
100/101	Seizures	10
689/690	Urinary tract infections	9
Total		826

Top DRG Discharges Among Redlands Hospital Service Area by Age Group, 2014

Redland Hospital's Top DRG Among Service Area Residents Under 18 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	830
202/203	Bronchitis & asthma	706
193/194/195	Simple pneumonia & Pleurisy	285
338-343	Appendectomy	275
100/101	Seizures	223
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	205
640/641	Misc. disorders of nutrition, metabolism,	146
	fluids/electrolytes	
689/690	Urinary tract infections	115
602/603	Cellulitis	102
637/638/639	Diabetes	101
811/812	Red blood cell disorders	73
870/871/872	Septicemia	63
456-460	Spinal fusion	27
417/418/419	Laparoscopic cholecystectomy	23
736-743	Uterine & adnexa procedures	21
189	Pulmonary edema & respiratory failure	20
377/378/379	G.I. hemorrhage	16
308/309/310	Cardiac arrhythmia & conduction disorders	14
894-897	Alcohol/drug abuse or dependence	13
682/683/684	Renal failure	12
313	Chest pain	8
945/946	Rehabilitation	6
246-251	Percutaneous cardiovascular procedures	6
064/065/066	Intercranial hemorrhage or cerebral infarction	5
286/287	Circulatory disorders	5
291/292/293	Heart failure & shock	4
469/470	Major joint replacement/reattachment lower extremity	3
190/191/192	Chronic obstructive pulmonary disease	3
Total		3310

Redland Hospital's Top DRG Among Service Area Residents 18-59 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	6222
870/871/872	Septicemia	1345
736-743	Uterine & adnexa procedures	734
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	662
417/418/419	Laparoscopic cholecystectomy	649
894-897	Alcohol/drug abuse or dependence	625
637/638/639	Diabetes	563
313	Chest pain	549
291/292/293	Heart failure & shock	503
602/603	Cellulitis	488

469/470	Major joint replacement/reattachment lower extremity	463
682/683/684	Renal failure	423
193/194/195	Simple pneumonia & Pleurisy	369
338-343	Appendectomy	360
811/812	Red blood cell disorders	359
064/065/066	Intercranial hemorrhage or cerebral infarction	313
377/378/379	G.I. hemorrhage	304
689/690	Urinary tract infections	294
246-251	Percutaneous cardiovascular procedures	287
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	275
308/309/310	Cardiac arrhythmia & conduction disorders	254
190/191/192	Chronic obstructive pulmonary disease	252
945/946	Rehabilitation	234
286/287	Circulatory disorders	233
100/101	Seizures	202
456-460	Spinal fusion	194
189	Pulmonary edema & respiratory failure	186
202/203	Bronchitis & asthma	178
Total		17520

Redland Hospital's Top DRG Among Service Area Residents 60 Plus Years, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	2361
469/470	Major joint replacement/reattachment lower extremity	1516
291/292/293	Heart failure & shock	1094
193/194/195	Simple pneumonia & Pleurisy	803
064/065/066	Intercranial hemorrhage or cerebral infarction	762
945/946	Rehabilitation	748
682/683/684	Renal failure	697
308/309/310	Cardiac arrhythmia & conduction disorders	689
190/191/192	Chronic obstructive pulmonary disease	584
377/378/379	G.I. hemorrhage	534
885	Psychoses	526
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	505
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	478
246-251	Percutaneous cardiovascular procedures	477
689/690	Urinary tract infections	463
313	Chest pain	402
189	Pulmonary edema & respiratory failure	346
602/603	Cellulitis	324
286/287	Circulatory disorders	299
811/812	Red blood cell disorders	270
637/638/639	Diabetes	214
417/418/419	Laparoscopic cholecystectomy	211
456-460	Spinal fusion	198
894-897	Alcohol/drug abuse or dependence	127

736-743	Uterine & adnexa procedures	126
100/101	Seizures	112
202/203	Bronchitis & asthma	71
338-343	Appendectomy	68
Total		15005

Redlands Hospital Focus Group Analysis

Question #1 – How long have you lived in the Inland Empire? If you are new to the area, what brought you here?

Data for question 1 was analyzed individually for each focus group and as an aggregate. A mean and range was calculated for each focus group and a mean, median and range was calculated for the aggregate data. Among all participants, 4.3% stated they lived in the Inland Empire their entire life. This information was not incorporated in the analysis as the number of years living in the Inland Empire was not identified for these participants. Among all participants, the highest frequency of individual years living in the Inland Empire was six and eight years; 8.7% for each.

Redlands

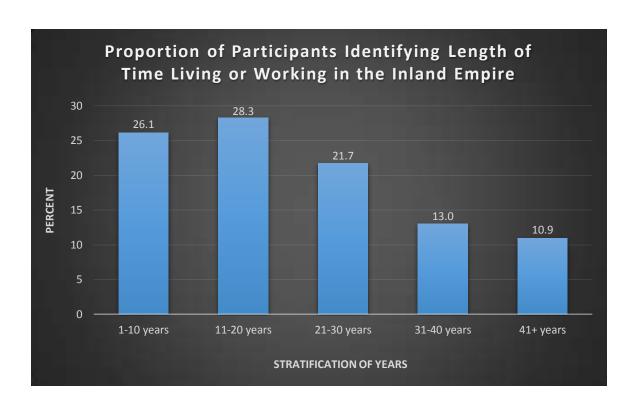
- a. Mean 32.8 years
- b. Range (6-50 years)

Overall Participating Hospitals (Aggregate)

Mean – 21.8 years

Median – 19 years

Range – 1-56 years



Question #2 – What if anything is different about your community now that was not the case five years ago?

Factors		ronmental	ment/Envi	Environn		Built	1.
accidents)	and	traffic	in	(increase	traffic	-	
(affordable)			ousing	ho		-	
crime						-	
drugs/gangs						_	

- increased industrial environment (warehouses) impacting citrus in area increase in chemical sprays
- 2. Increase in Senior community

Question #3 – What kind of projects, if any, have people in your community worked on together in the past five years? (Note: Participants stated they were members of organizations who assist with services)

- 1. Addressing the need for clothing and providing clothing for individuals and families
 - Salvation Army providing interview attire for men
 - Angels providing clothing for high school students
 - Kiwanis takes kids shopping
 Santa Claus Incorporated community donates and choose clothing for kids
- 2. Addressing homeless population youth and homeless count
- 3. Programs addressing new immigrant support with language services, and providing space for Narcotics Anonymous to meet churches and congregations pick up community duties and assist with rent reduction.

Question #4 – Think about your community over the next five years, what changes would you make or not make and why?

- 1. Transportation re-addressing issues regarding public transportation, this involves rail San Antonio
- Physical activity increase physical activity in schools, perhaps offering yoga, invest
 more in parks so people can be active, eliminate smoking in parks so people can be
 active, programs that allow kids to walk and bike to school, increase number of bike
 routes in community, increase programs for kids to be active, increase safe walking
 areas
- 2. Healthier food options decrease fast food restaurants in community and increase more healthier food options is schools, more community gardens that will allow people to participate

Question #5 – If you knew someone was thinking about moving to your community, what would you tell them or her about the area to convince them to move or not to move?

I – Positive

- 1. Physical beauty and close proximity to mountains, desert and ocean
- 2. Has own hospital, police and fire department
- Weather
- 4. Community involvement
- 5. Education

6. Rich history

II - Negative

1. Traffic congestion

Question #6 – Describe how your community could be improved.

- 1. Transportation re-addressing issues regarding public transportation, this involves rail system, access to transportation for seniors
- 2. Youth organizations for youth, programs to address childhood obesity, programs that teach students and parents about active nutrition and teach parents about healthier cooking habits for kids, also programs that encourage physical activity
- 3. Volunteering increase programs for senior and youth volunteering, increase community service
- 4. Access to community services get word out about community services available to community, i.e. free clinics

Question #7 – What makes your community a healthy community?

- The environment which offers access to recreational activities such as running, swimming, walking, basketball, horseback riding, hiking, biking, football, baseball, scouting, gardening
- 2. The weather
- 3. The existence of farmer's market

Question #8 – What makes your community unhealthy?

- 1. The abundance of crime
- 2. The Environment, specifically pollution, smog, and lack of water. With the lack of water there has been an increase in the amount that is paid for water, thus less money for other things
- 3. There is a lower level of education
- 4. The economics of the community. Economy is poor in the community and this impacts the number of jobs available for those living here. People do not have enough money to do extracurricular activities.
- 5. Lack of medical resources, such as primary care physicians, ER's, OB/GYNs, nurses, urgent care centers

Question #9 – Describe barriers that may pose challenges to achieving positive community health.

- 1. Low paying jobs as a result of the economy
- 2. Issues pertaining to advanced education. For instance, increased student loan debts, community colleges being overcrowded which prevents students from enrolling in the classes they need to takes so it takes longer for students to graduate so accrue larger student debt
- 3. An increased number of renters who are not invested in community because they are not home owners

4. Language barriers. For undocumented population they fear being deported or arrested so they do not access services

Question #10 – From what health problems do people in your community suffer?

- 1. Health problems impacting seniors
- 2. Chronic diseases diabetes, high blood pressure, lymphedema, asthma, COPD, depression, arthritis, pelvic pain, incontinence
- 3. Sedentary lifestyle

Question #11 – Where do people in your community go to receive health care?

- 1. Lymphedema program at Hospitals
- 2. Clinics

Question #12 – What, if any, environmental health concerns do you face in your community?

1. Lack of good urban planning and infrastructure with affordable housing for seniors (single story) and open area with parks

Question #13 – Think about the issues we have talked about today. What issues do you think are the most important for your community to address? Why?

- 1. Urban planning that addresses transportation, water conservation and its sustainability
- 2. Childhood obesity, lack of education among children regarding healthy lifestyles (eating and exercise)

Question #14 – Think about the strengths in your community we have talked about today. What do you think is the community's greatest asset?

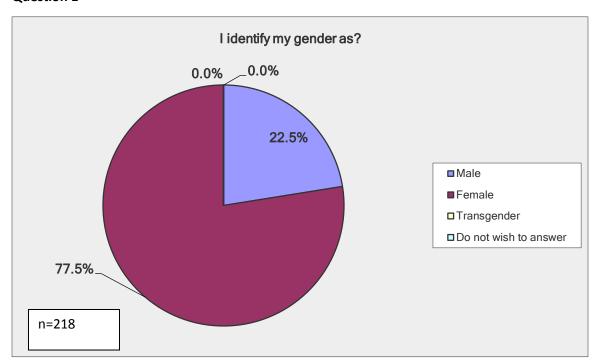
- 1. Environment that offers recreational activities such as running, swimming, walking, basketball, horseback riding, hiking, biking, football, baseball, scouting, gardening
- 2. Weather
- 3. Farmer's market
- 4. Physical Activities at parks, safe routes to school for children
- 5. Healthy living, free classes on nutrition and diabetes, healthy food in schools, community gardens

Question #15 – Is there anything else we have not asked about that is important for us to know about in your community?

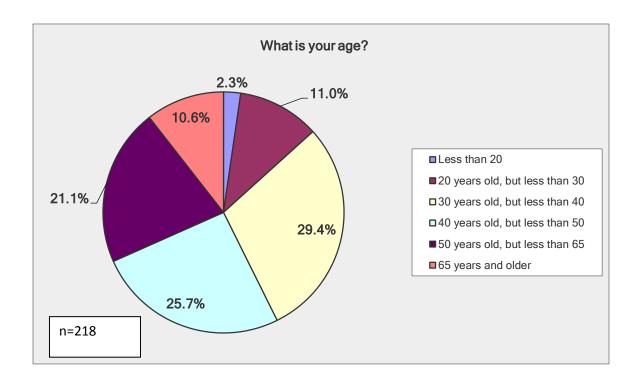
Participants had nothing to add.

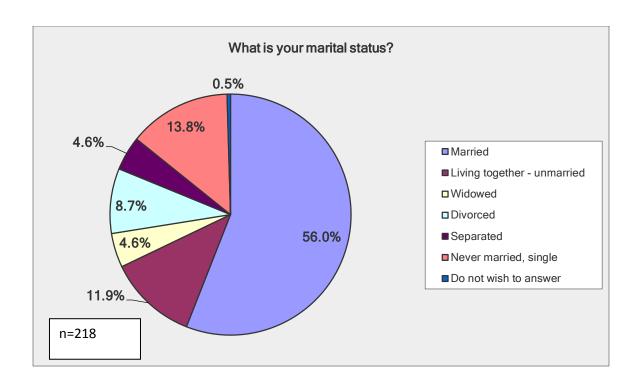
Redlands QOLS Service Area Analysis

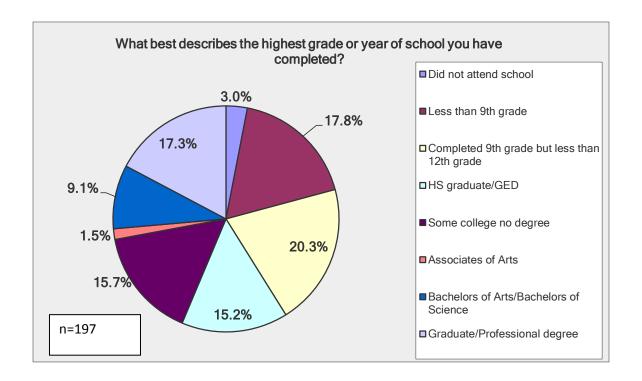
Question 1

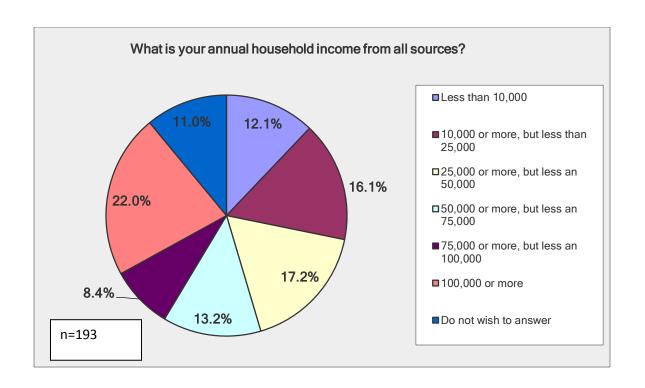


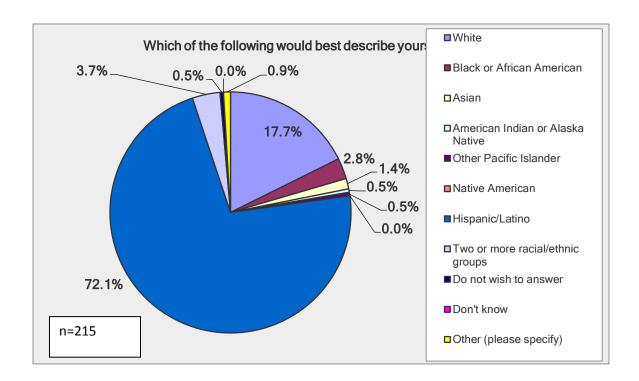
What is your zip code?	
Answer Options	Response Count
	222
answered question	222

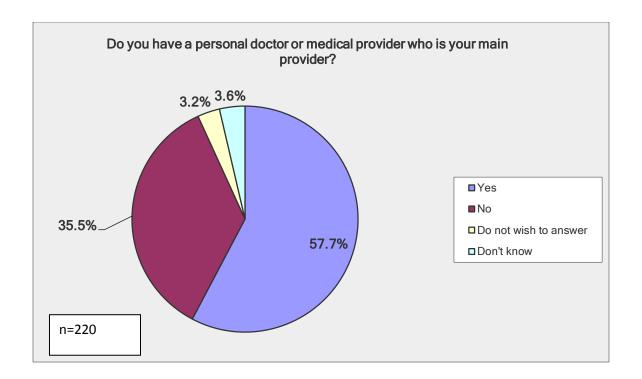


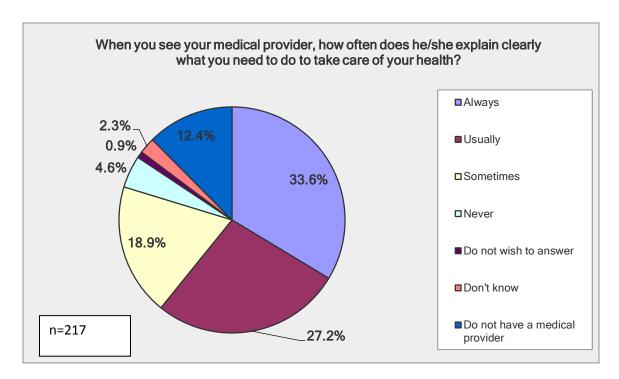




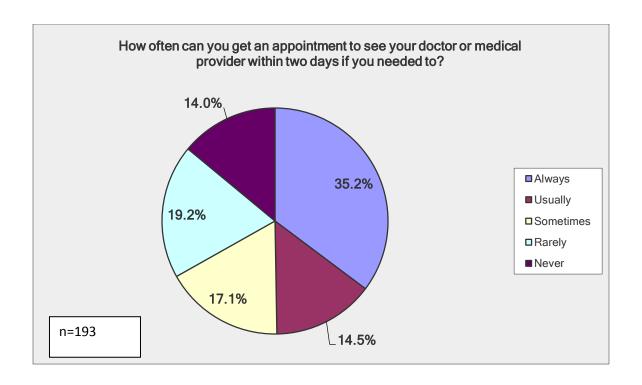


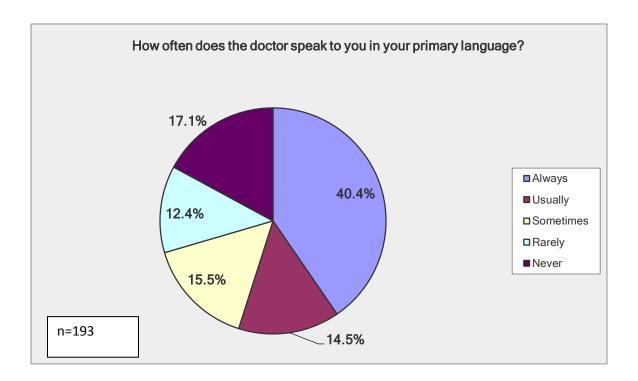


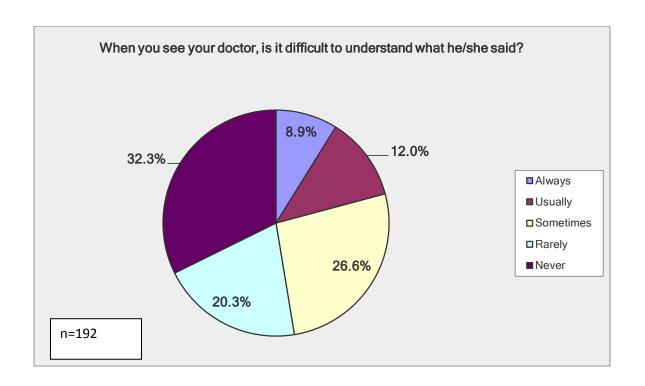


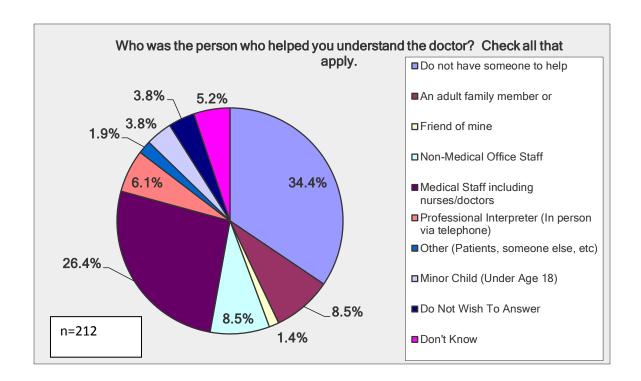


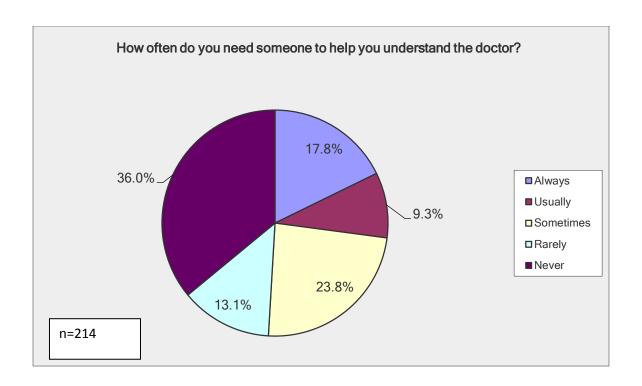
Question 10

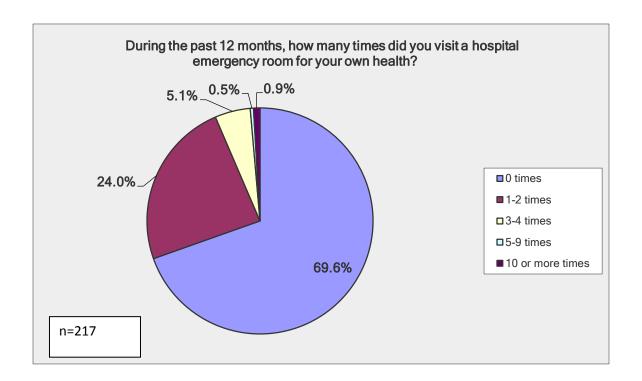


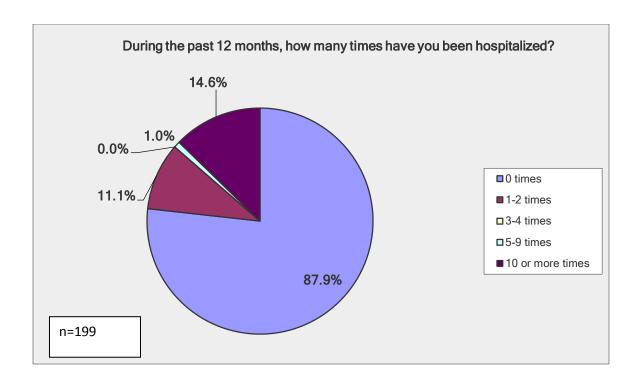


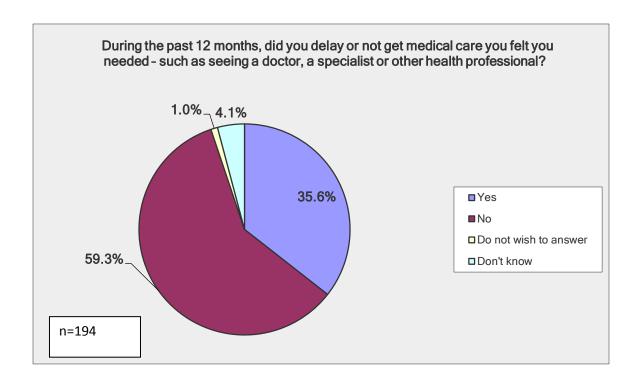


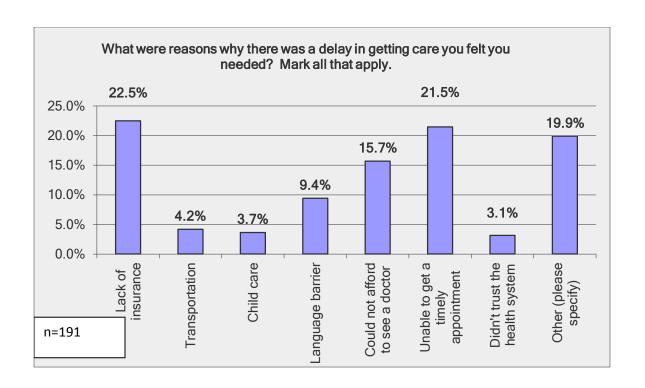


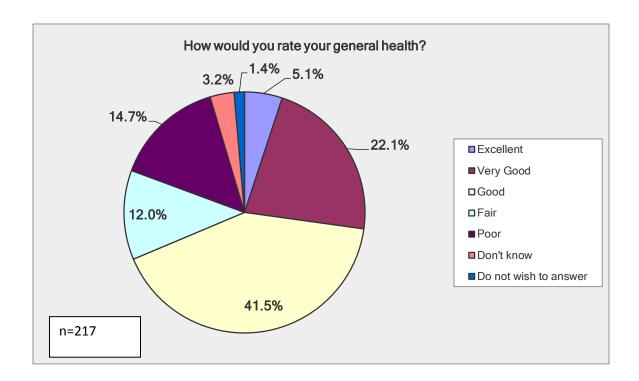


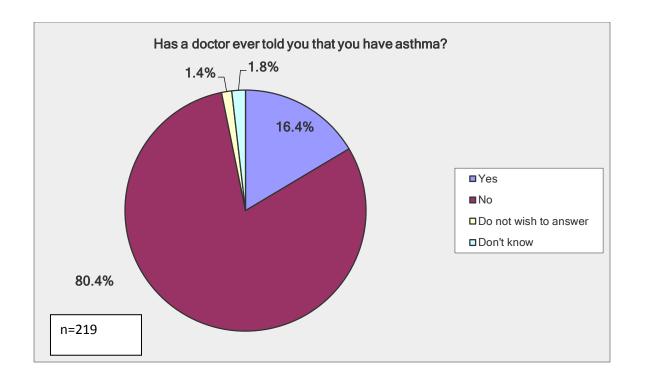


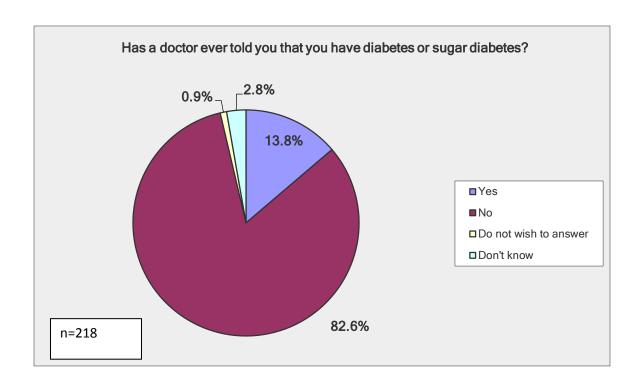


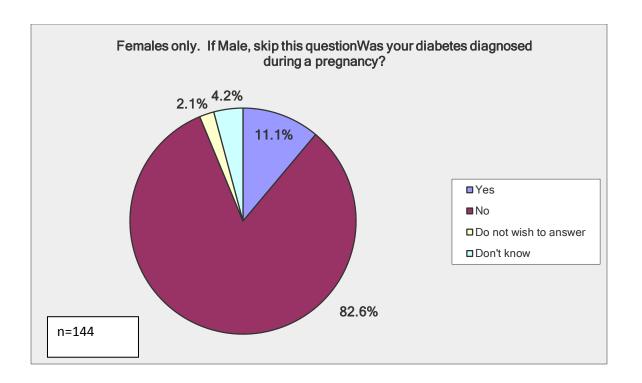


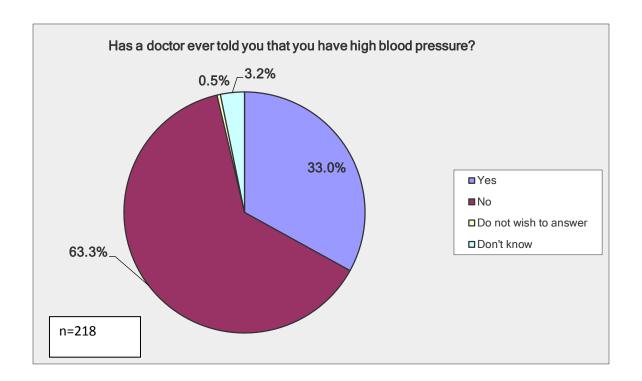


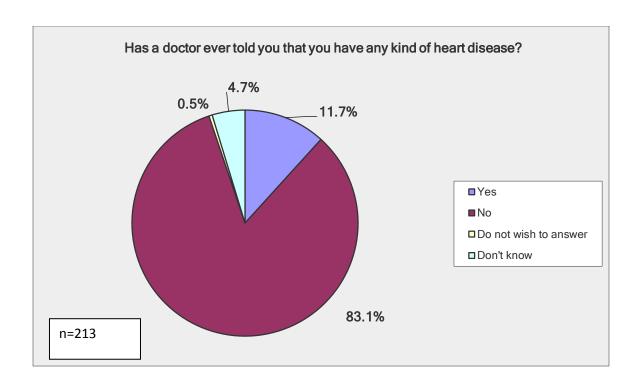


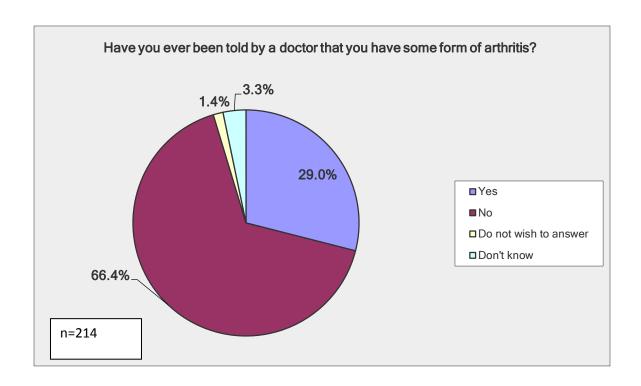


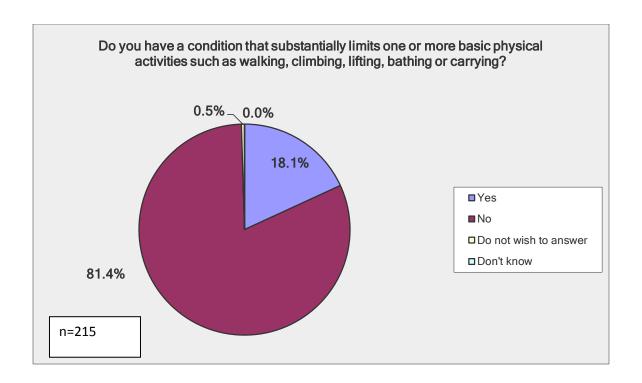


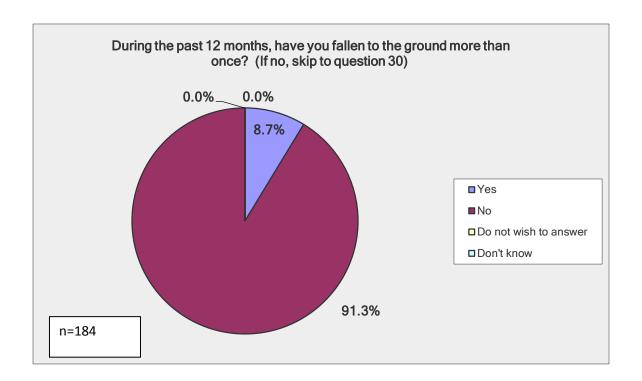


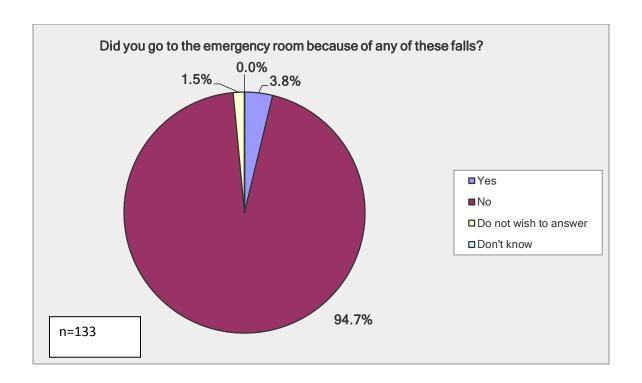


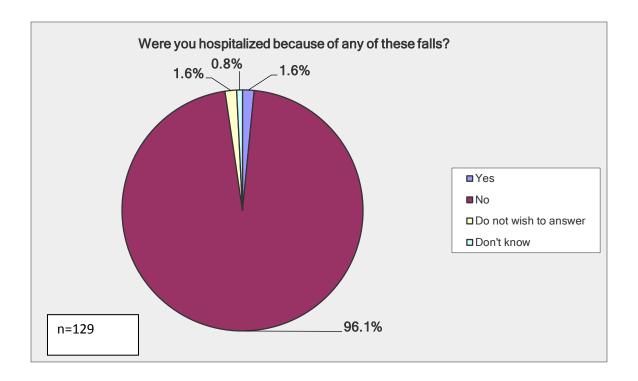


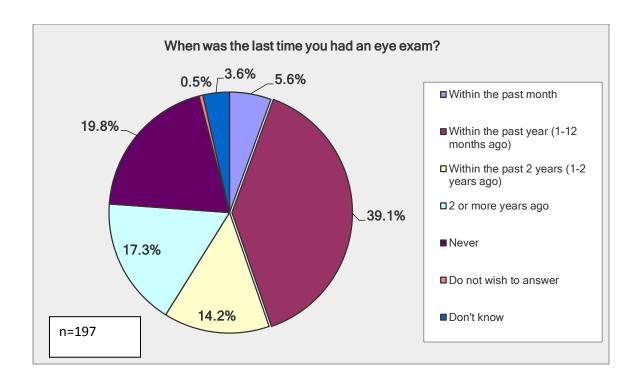


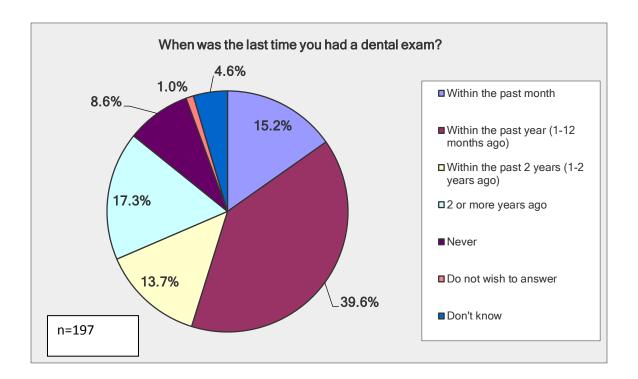


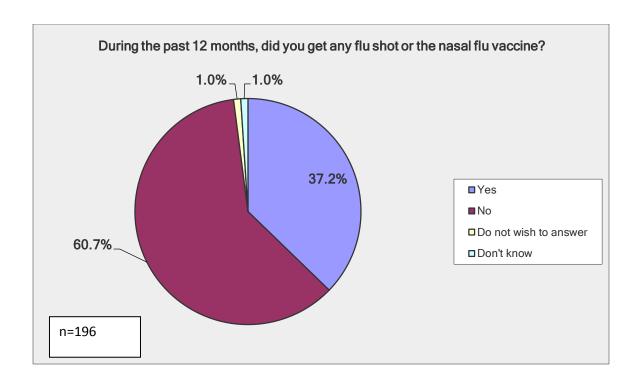


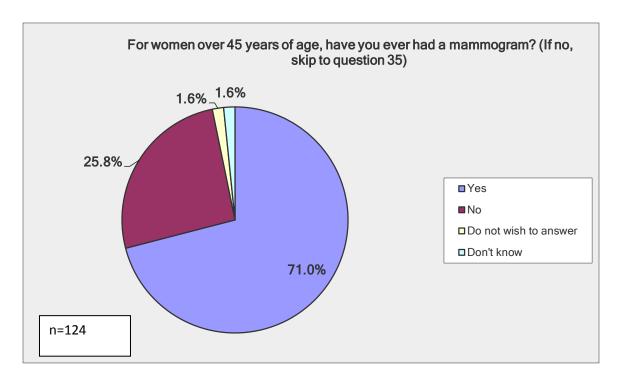








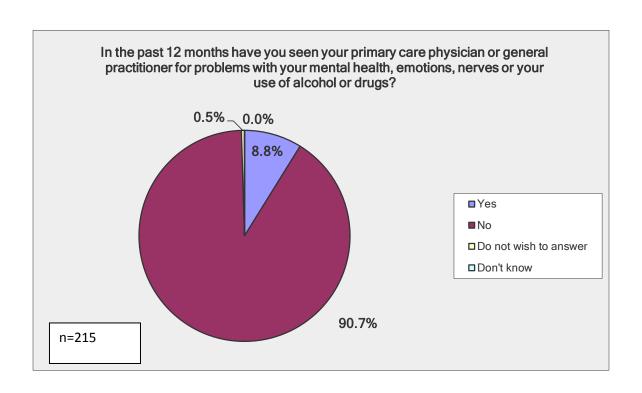


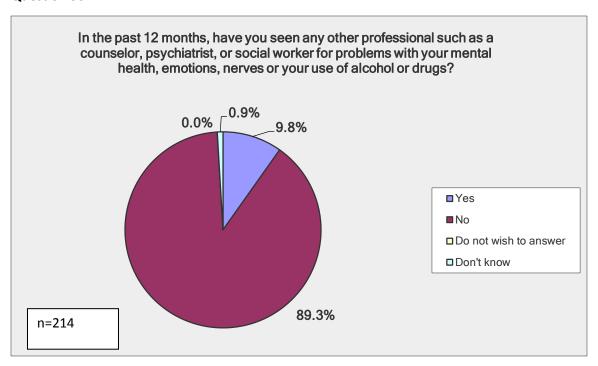


Question 34

How long ago did you have your most recent mammogram?	
Answer Options Response Count	
	97
answered question	97

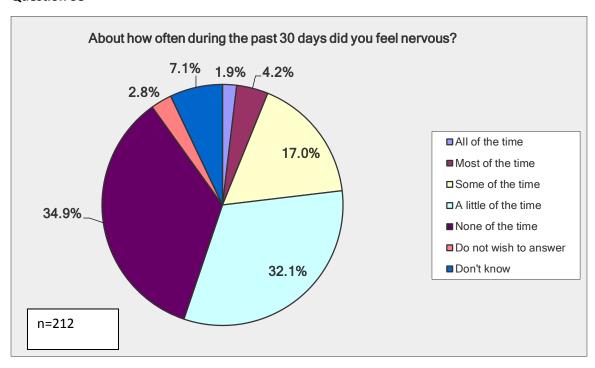
Question 35

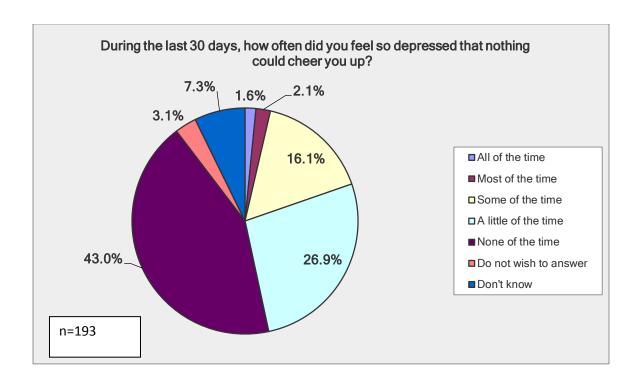


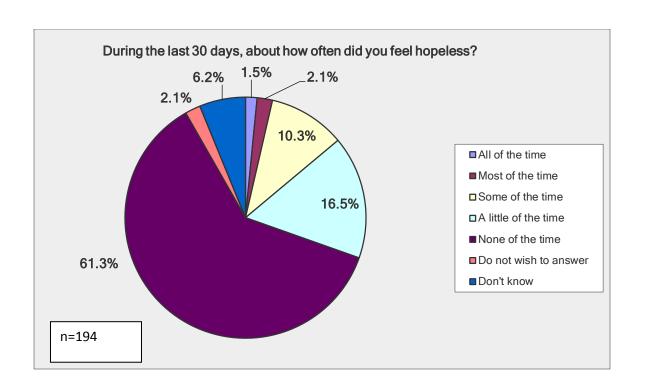


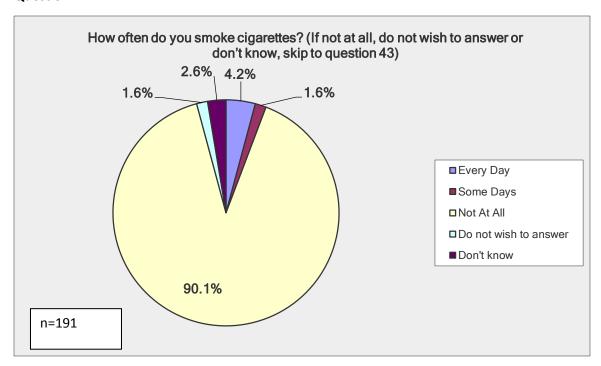
Question 37

How many days out of the past 30 days were you unable to work or carry out your normal activities because of your feeling nervous, depressed or emotionally stressed?		
Answer Options Response Count		
134		
answered question 134		









Question 42

On average, how many cigarettes do you smoke a day?		
Answer Options Response Count		
113		
answered question 113		

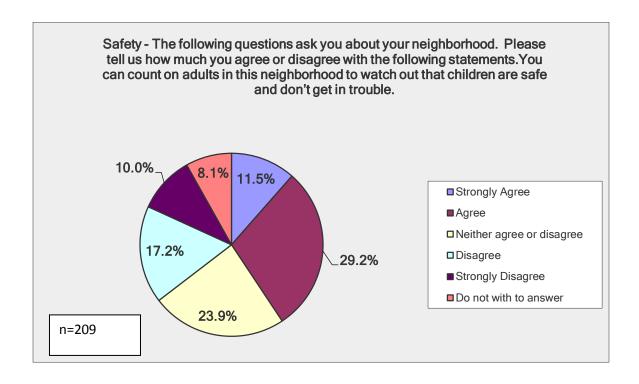
Question 43

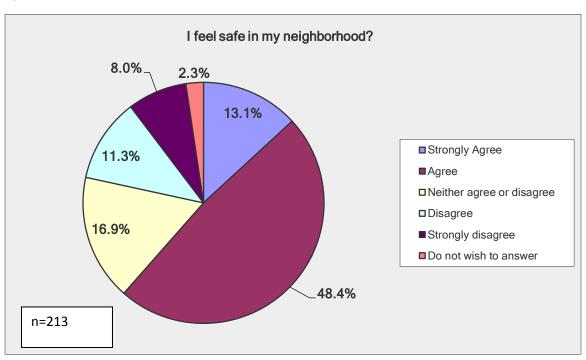
In the past 12 months, about how many times did you have 1 or 2 alcoholic drinks in a single day?		
Answer Options Response Count		
186		
answered question 186		

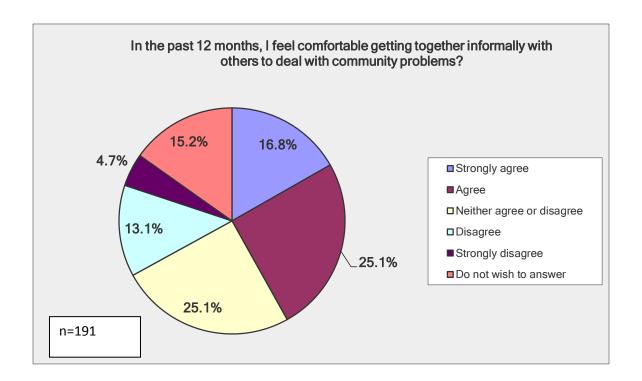
In the past 12 months, about how many times did you have 3 or 4 alcoholic drinks in a single day?		
Answer Options Response Count		
177		
answered question 177		

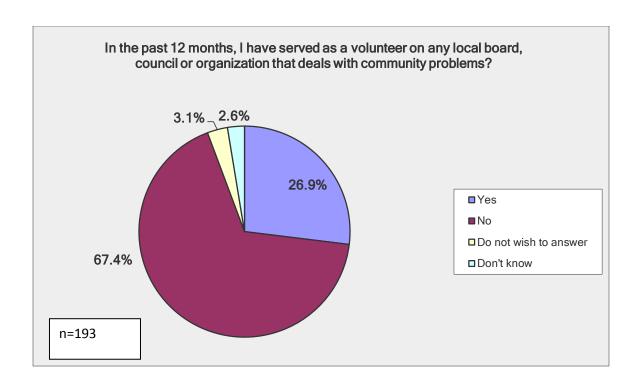
In the past 12 months, about how many times did you have 5 or more alcoholic drinks in a single day?		
Answer Options Response Count		
	181	
answered question	181	

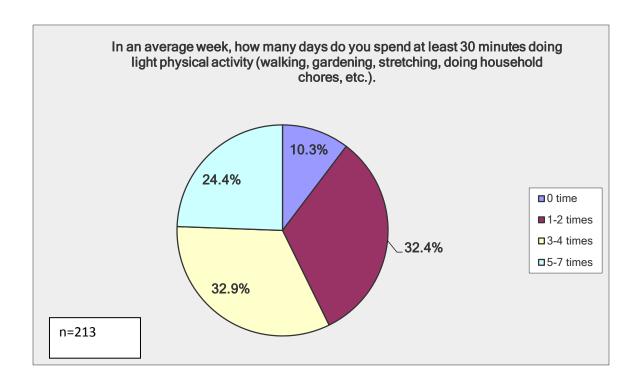
Question 46

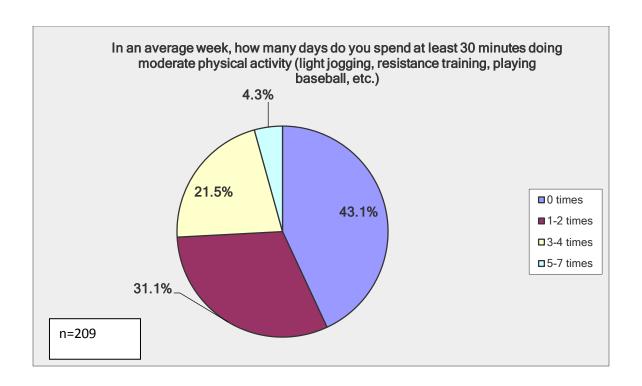


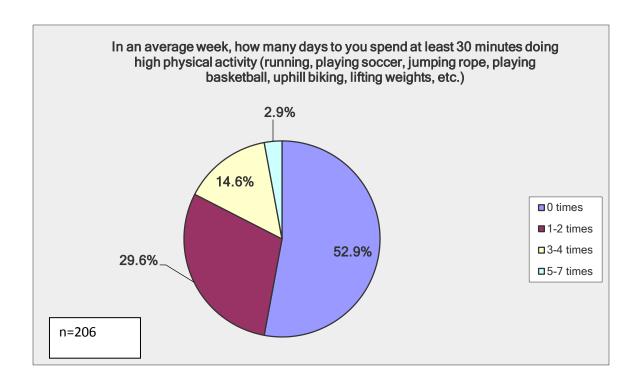












San Antonio Regional Hospital Top 25 Discharges by DRG, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	6,774
870/871/872	Septicemia	5,083
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	2,343
469/470	Major joint replacement/reattachment lower extremity	2,193
291/292/293	Heart failure & shock	1,937
193/194/195	Simple pneumonia & Pleurisy	1,612
736-743	Uterine & adnexa procedures	1,446
682/683/684	Renal failure	1,399
417/418/419	Laparoscopic cholecystectomy	1,379
064/065/066	Intercranial hemorrhage or cerebral infarction	1,276
689/690	Urinary tract infections	1,159
602/603	Cellulitis	1,131
338-343	Appendectomy	1,106
945/946	Rehabilitation	1,103
308/309/310	Cardiac arrhythmia & conduction disorders	1,071
377/378/379	G.I. hemorrhage	1,057
313	Chest pain	1,054
637/638/639	Diabetes	1,043
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	1,027
246-251	Percutaneous cardiovascular procedures	1,023
894-897	Alcohol/drug abuse or dependence	1,014
202/203	Bronchitis & asthma	962
811/812	Red blood cell disorders	833
190/191/192	Chronic obstructive pulmonary disease	818
189	Pulmonary edema & respiratory failure	738
TOTAL		40,581

Top DRG Discharges Among San Antonio Regional Hospital Service Area by Race/Ethnicity, 2014

San Antonio Regional Hospital's Top DRG Among Service Area Non-Hispanic White Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	2499
870/871/872	Septicemia	2041
469/470	Major joint replacement/reattachment lower extremity	1277
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	823
291/292/293	Heart failure & shock	751
945/946	Rehabilitation	686
193/194/195	Simple pneumonia & Pleurisy	672
308/309/310	Cardiac arrhythmia & conduction disorders	539
064/065/066	Intercranial hemorrhage or cerebral infarction	502
894-897	Alcohol/drug abuse or dependence	491
602/603	Cellulitis	475
736-743	Uterine & adnexa procedures	463

689/690	Urinary tract infections	444
682/683/684	Renal failure	440
246-251	Percutaneous cardiovascular procedures	435
190/191/192	Chronic obstructive pulmonary disease	422
377/378/379	G.I. hemorrhage	389
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	362
189	Pulmonary edema & respiratory failure	356
417/418/419	Laparoscopic cholecystectomy	336
313	Chest pain	306
637/638/639	Diabetes	302
456-460	Spinal fusion	258
338-343	Appendectomy	243
100/101	Seizures	234
286/287	Circulatory disorders	216
202/203	Bronchitis & asthma	202
811/812	Red blood cell disorders	179
Total		16343

San Antonio Regional Hospital's Top DRG Among Service Area Hispanic (Any Race) Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	2732
870/871/872	Septicemia	2057
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	1140
417/418/419	Laparoscopic cholecystectomy	867
338-343	Appendectomy	735
291/292/293	Heart failure & shock	710
193/194/195	Simple pneumonia & Pleurisy	643
736-743	Uterine & adnexa procedures	630
682/683/684	Renal failure	621
469/470	Major joint replacement/reattachment lower extremity	554
689/690	Urinary tract infections	549
637/638/639	Diabetes	534
202/203	Bronchitis & asthma	532
602/603	Cellulitis	502
064/065/066	Intercranial hemorrhage or cerebral infarction	452
313	Chest pain	449
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	449
377/378/379	G.I. hemorrhage	401
894-897	Alcohol/drug abuse or dependence	381
246-251	Percutaneous cardiovascular procedures	321
308/309/310	Cardiac arrhythmia & conduction disorders	319
100/101	Seizures	312
811/812	Red blood cell disorders	297
945/946	Rehabilitation	290
286/287	Circulatory disorders	247
190/191/192	Chronic obstructive pulmonary disease	220

189	Pulmonary edema & respiratory failure	220
456-460	Spinal fusion	153
Total		17317

San Antonio Regional Hospital's Top DRG Among Service Area Non-Hispanic Black Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	1057
870/871/872	Septicemia	500
291/292/293	Heart failure & shock	288
811/812	Red blood cell disorders	262
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	202
682/683/684	Renal failure	201
469/470	Major joint replacement/reattachment lower extremity	191
313	Chest pain	182
736-743	Uterine & adnexa procedures	163
064/065/066	Intercranial hemorrhage or cerebral infarction	152
637/638/639	Diabetes	140
193/194/195	Simple pneumonia & Pleurisy	137
202/203	Bronchitis & asthma	132
377/378/379	G.I. hemorrhage	129
190/191/192	Chronic obstructive pulmonary disease	102
246-251	Percutaneous cardiovascular procedures	98
100/101	Seizures	96
308/309/310	Cardiac arrhythmia & conduction disorders	94
189	Pulmonary edema & respiratory failure	91
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	87
689/690	Urinary tract infections	83
945/946	Rehabilitation	83
286/287	Circulatory disorders	83
602/603	Cellulitis	78
894-897	Alcohol/drug abuse or dependence	73
417/418/419	Laparoscopic cholecystectomy	69
456-460	Spinal fusion	38
338-343	Appendectomy	37
Total		4848

San Antonio Regional Hospital's Top DRG Among Service Area Non-Hispanic Asian Residents, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	303
885	Psychoses	182
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	109
736-743	Uterine & adnexa procedures	108
377/378/379	G.I. hemorrhage	99
064/065/066	Intercranial hemorrhage or cerebral infarction	97
291/292/293	Heart failure & shock	93

193/194/195	Simple pneumonia & Pleurisy	87
682/683/684	Renal failure	85
308/309/310	Cardiac arrhythmia & conduction disorders	76
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	75
469/470	Major joint replacement/reattachment lower extremity	72
246-251	Percutaneous cardiovascular procedures	71
313	Chest pain	65
417/418/419	Laparoscopic cholecystectomy	54
811/812	Red blood cell disorders	51
286/287	Circulatory disorders	47
338-343	Appendectomy	45
689/690	Urinary tract infections	42
637/638/639	Diabetes	42
190/191/192	Chronic obstructive pulmonary disease	36
100/101	Seizures	36
189	Pulmonary edema & respiratory failure	35
202/203	Bronchitis & asthma	34
602/603	Cellulitis	33
945/946	Rehabilitation	23
894-897	Alcohol/drug abuse or dependence	23
456-460	Spinal fusion	16
Total		2039

San Antonio Regional Hospital's Top DRG Among Service Area Non-Hispanic Native American Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	11
870/871/872	Septicemia	7
736-743	Uterine & adnexa procedures	6
291/292/293	Heart failure & shock	5
377/378/379	G.I. hemorrhage	5
894-897	Alcohol/drug abuse or dependence	5
	Major joint replacement/reattachment lower	
469/470	extremity	3
313	Chest pain	3
	Misc. disorders of nutrition, metabolism,	
640/641	fluids/electrolytes	3
190/191/192	Chronic obstructive pulmonary disease	3
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	2
193/194/195	Simple pneumonia & Pleurisy	2
682/683/684	Renal failure	2
602/603	Cellulitis	2
308/309/310	Cardiac arrhythmia & conduction disorders	2
637/638/639	Diabetes	2
246-251	Percutaneous cardiovascular procedures	2
064/065/066	Intercranial hemorrhage or cerebral infarction	1
689/690	Urinary tract infections	1

338-343	Appendectomy	1
202/203	Bronchitis & asthma	1
811/812	Red blood cell disorders	1
189	Pulmonary edema & respiratory failure	1
100/101	Seizures	1
286/287	Circulatory disorders	1
417/418/419	Laparoscopic cholecystectomy	0
945/946	Rehabilitation	0
456-460	Spinal fusion	0
Total		73

San Antonio Regional Hospital's Top DRG Among Service Area Non-Hispanic Other/Unknown Race Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	293
870/871/872	Septicemia	183
246-251	Percutaneous cardiovascular procedures	106
469/470	Major joint replacement/reattachment lower extremity	100
291/292/293	Heart failure & shock	95
193/194/195	Simple pneumonia & Pleurisy	82
064/065/066	Intercranial hemorrhage or cerebral infarction	80
736-743	Uterine & adnexa procedures	78
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	76
202/203	Bronchitis & asthma	63
417/418/419	Laparoscopic cholecystectomy	55
682/683/684	Renal failure	54
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	54
308/309/310	Cardiac arrhythmia & conduction disorders	53
313	Chest pain	51
338-343	Appendectomy	48
602/603	Cellulitis	45
894-897	Alcohol/drug abuse or dependence	43
811/812	Red blood cell disorders	43
286/287	Circulatory disorders	43
689/690	Urinary tract infections	42
377/378/379	G.I. hemorrhage	37
190/191/192	Chronic obstructive pulmonary disease	37
189	Pulmonary edema & respiratory failure	37
100/101	Seizures	29
456-460	Spinal fusion	29
637/638/639	Diabetes	27
945/946	Rehabilitation	21
Total		1904

Top DRG Discharges Among San Antonio Regional Hospital Service Area by Age Group, 2014

San Antonio Regional Hospital's Top DRG Among Service Area Residents Under 18 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	1093
202/203	Bronchitis & asthma	619
338-343	Appendectomy	422
193/194/195	Simple pneumonia & Pleurisy	333
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	268
100/101	Seizures	253
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	171
689/690	Urinary tract infections	142
637/638/639	Diabetes	137
602/603	Cellulitis	128
870/871/872	Septicemia	94
811/812	Red blood cell disorders	73
417/418/419	Laparoscopic cholecystectomy	40
456-460	Spinal fusion	38
736-743	Uterine & adnexa procedures	23
682/683/684	Renal failure	17
377/378/379	G.I. hemorrhage	17
189	Pulmonary edema & respiratory failure	16
894-897	Alcohol/drug abuse or dependence	15
945/946	Rehabilitation	10
308/309/310	Cardiac arrhythmia & conduction disorders	9
190/191/192	Chronic obstructive pulmonary disease	9
291/292/293	Heart failure & shock	8
246-251	Percutaneous cardiovascular procedures	8
064/065/066	Intercranial hemorrhage or cerebral infarction	7
313	Chest pain	5
469/470	Major joint replacement/reattachment lower extremity	4
286/287	Circulatory disorders	4
Total		3963

San Antonio Regional Hospital's Top DRG Among Service Residents 18-59 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	5025
870/871/872	Septicemia	1779
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	1290
736-743	Uterine & adnexa procedures	1270
417/418/419	Laparoscopic cholecystectomy	1004
894-897	Alcohol/drug abuse or dependence	875
313	Chest pain	672
637/638/639	Diabetes	641

602/603	Cellulitis	601
338-343	Appendectomy	596
291/292/293	Heart failure & shock	591
469/470	Major joint replacement/reattachment lower extremity	574
682/683/684	Renal failure	496
811/812	Red blood cell disorders	439
193/194/195	Simple pneumonia & Pleurisy	423
246-251	Percutaneous cardiovascular procedures	404
689/690	Urinary tract infections	388
064/065/066	Intercranial hemorrhage or cerebral infarction	376
377/378/379	G.I. hemorrhage	359
308/309/310	Cardiac arrhythmia & conduction disorders	336
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	324
100/101	Seizures	313
286/287	Circulatory disorders	279
202/203	Bronchitis & asthma	240
456-460	Spinal fusion	237
945/946	Rehabilitation	235
190/191/192	Chronic obstructive pulmonary disease	232
189	Pulmonary edema & respiratory failure	212
Total		20211

San Antonio Regional Hospital's Top DRG Among Service Area Residents 60 Plus Years, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	3218
469/470	Major joint replacement/reattachment lower extremity	1619
291/292/293	Heart failure & shock	1343
064/065/066	Intercranial hemorrhage or cerebral infarction	901
682/683/684	Renal failure	890
193/194/195	Simple pneumonia & Pleurisy	867
945/946	Rehabilitation	858
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	794
308/309/310	Cardiac arrhythmia & conduction disorders	738
377/378/379	G.I. hemorrhage	684
885	Psychoses	656
689/690	Urinary tract infections	631
246-251	Percutaneous cardiovascular procedures	621
190/191/192	Chronic obstructive pulmonary disease	579
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	535
189	Pulmonary edema & respiratory failure	512
602/603	Cellulitis	406
313	Chest pain	379
286/287	Circulatory disorders	354
417/418/419	Laparoscopic cholecystectomy	337
811/812	Red blood cell disorders	321
637/638/639	Diabetes	269

456-460	Spinal fusion	219
736-743	Uterine & adnexa procedures	155
100/101	Seizures	142
894-897	Alcohol/drug abuse or dependence	126
202/203	Bronchitis & asthma	105
338-343	Appendectomy	91
Total		18350

San Antonio Regional Hospital Focus Group Analysis

Question #1 – How long have you lived in the Inland Empire? If you are new to the area, what brought you here?

Data for question 1 was analyzed individually for each focus group and as an aggregate. A mean and range was calculated for each focus group and a mean, median and range was calculated for the aggregate data. Among all participants, 4.3% stated they lived in the Inland Empire their entire life. This information was not incorporated in the analysis as the number of years living in the Inland Empire was not identified for these participants. Among all participants, the highest frequency of individual years living in the Inland Empire was six and eight years; 8.7% for each.

A. San Antonio

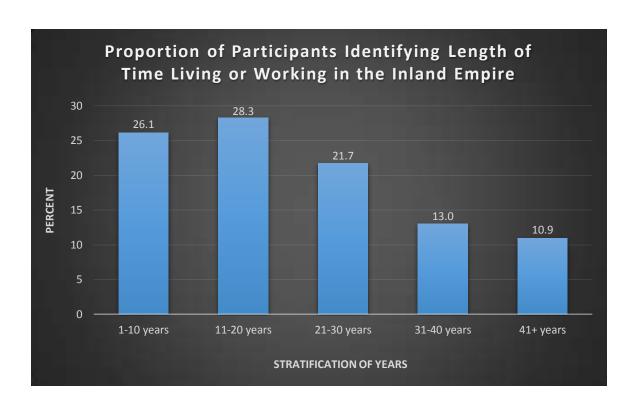
- a. Mean 12.3 years
- b. Range (6-26 years)

Overall Participating Hospitals (Aggregate)

Mean – 21.8 years

Median – 19 years

Range – 1-56 years



Question #2 – What if anything is different about your community now that was not the case five years ago?

1. Physical Activity

- parks with recreation areas being maintained, offer Zumba classes, safe routes to school for children

2. Healthy living

free classes on nutrition, diabetes
 healthy food in schools

- community gardens

Question #3 – What kind of projects, if any, have people in your community worked on together in the past five years? (Note: Participants stated they were members of organizations who assist with services)

- 1. Nutrition Del Sol provides lectures on nutrition and diabetes (and mental health issues). Healson promotes healthy lifestyle through nutrition and exercise
- 2. Momish provides service for women who have experienced domestic violence and depression
- 3. Niño's por la Musica A program that concentrates on children involved in music

Question #4 – Think about your community over the next five years, what changes would you make or not make and why?

- 1. Physical activity increase physical activity in schools, perhaps offering yoga, invest more in parks so people can be active, eliminate smoking in parks so people can be active, programs that allow kids to walk and bike to school, increase number of bike routes in community, increase programs for kids to be active, increase safe walking areas
- 2. Healthier food options decrease fast food restaurants in community and increase more healthier food options is schools, more community gardens that will allow people to participate

Question #5 – If you knew someone was thinking about moving to your community, what would you tell them or her about the area to convince them to move or not to move?

I – Positive

- 1. Good education
- 2. Housing affordable and beautiful
- 3. Safe and tranquil

II - Negative

- 1. Grocery stores are expensive
- 2. Lack of diverse/ethnic supermarkets

Question #6 – Describe how your community could be improved.

1. Physical activity – increase physical activity in schools, perhaps offering yoga, invest more in parks so people can be active, eliminate smoking in parks so people can be active, programs that allow kids to walk and bike to school, increase number of bike

- routes in community, increase programs for kids to be active, increase safe walking areas
- 2. Healthier food options decrease fast food restaurants in community and increase more healthier food options is schools, more community gardens that will allow people to participate

Question #7 – What makes your community a healthy community?

- 1. Programs focusing on being healthy and eating healthy, specifically school programs that promote children to eat healthier
- 2. The culture

Question #8 – What makes your community unhealthy?

- 1. Issues pertaining to good nutrition, for instance there is an abundance of fast food restaurants. Parents not being involved in their children's eating habits
- 2. Lack of culture

Question #9 – Describe barriers that may pose challenges to achieving positive community health.

- 1. The medical arena. They want to keep people unhealthy to stay in business. Hospitals are not supportive and make you feel bad about your lifestyle and the choices you make about your health.
- 2. Language barriers

Question #10 – From what health problems do people in your community suffer?

- 1. Chronic diseases diabetes, high blood pressure
- 2. Influenza
- 3. Low birth weight
- 4. Unhealthy eating
- 5. Sedentary lifestyle

Question #11 – Where do people in your community go to receive health care?

1. Emergence room, Mexico (Tijuana), internet, medics from other countries (people get results, medicine, vaccines cheaper), spirit healers (Sabadora)

Question #12 – What, if any, environmental health concerns do you face in your community?

1. Pesticides in the environment

Question #13 – Think about the issues we have talked about today. What issues do you think are the most important for your community to address? Why?

1. Preventative health focusing on nutrition and exercise

Question #14 – Think about the strengths in your community we have talked about today. What do you think is the community's greatest asset?

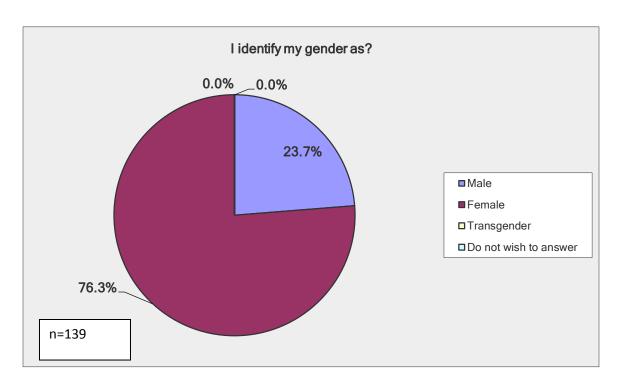
1. Security, cleanliness of community, education

Question #15 – Is there anything else we have not asked about that is important for us to know about in your community?

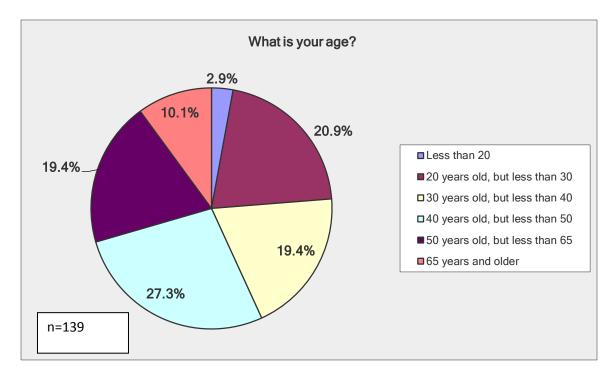
People's willingness to be part of the community, there needs to be better coordination and communication of information to community, need more parent involvement

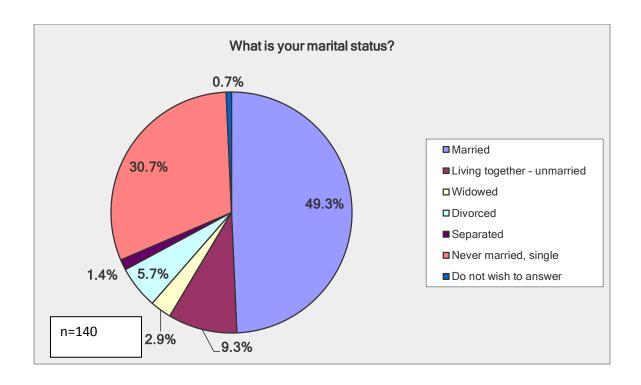
San Antonio QOLS Service Area Analysis

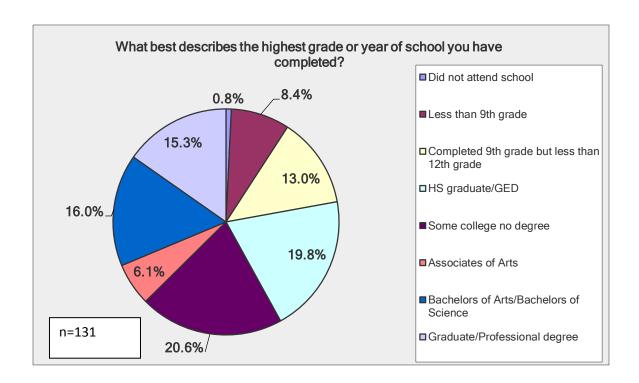
Question 1

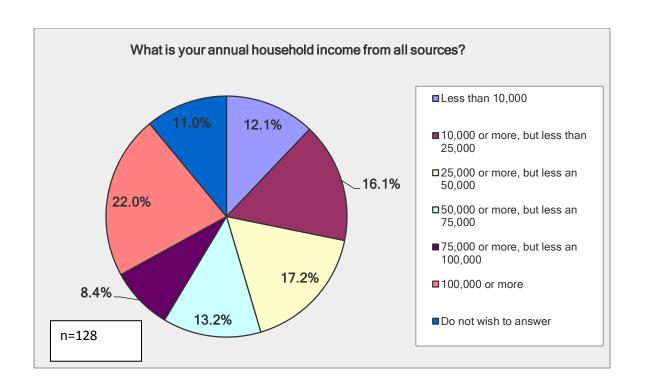


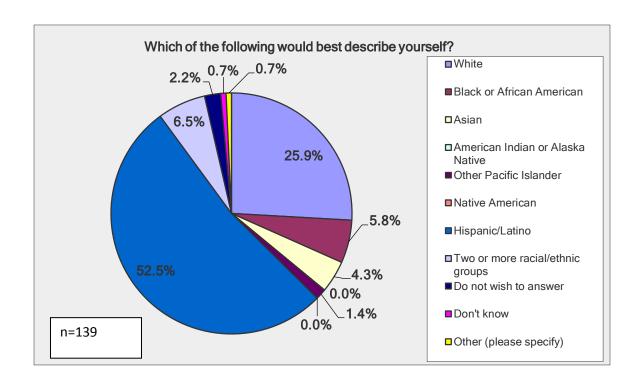
What is your zip code?	
Answer Options	Response Count
	140
answered question	140

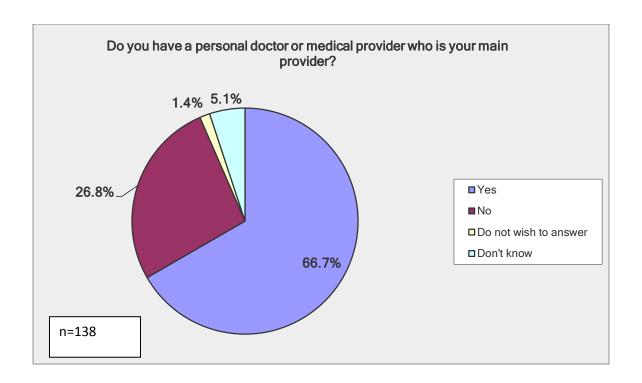


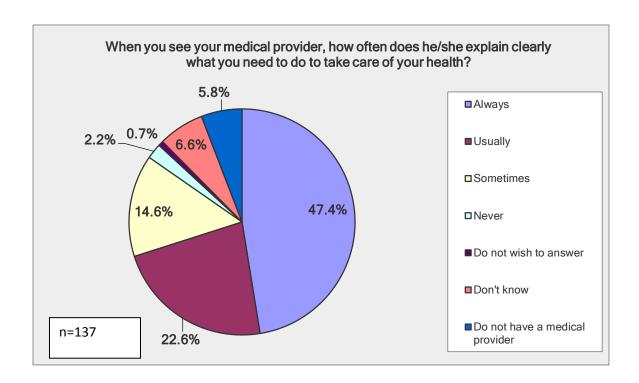


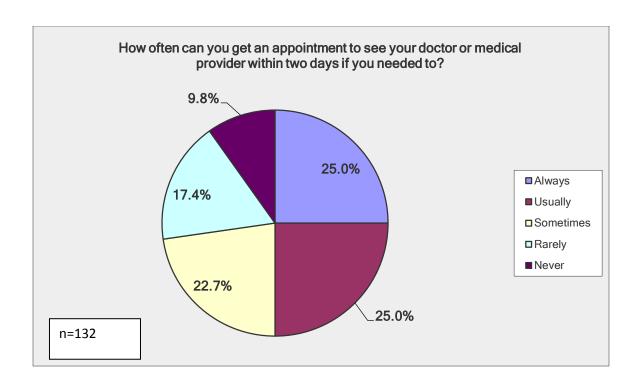


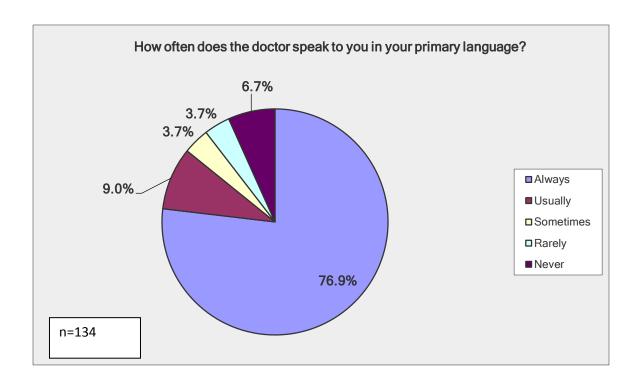


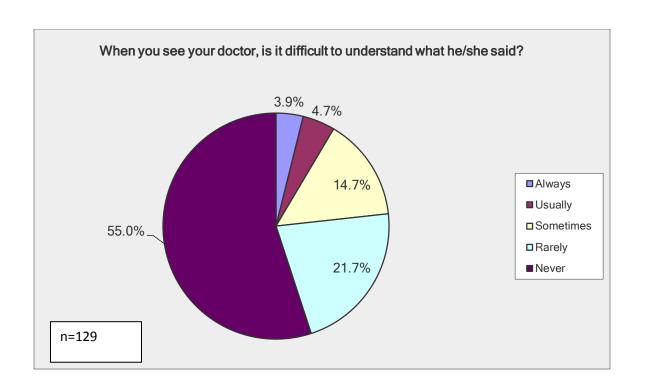


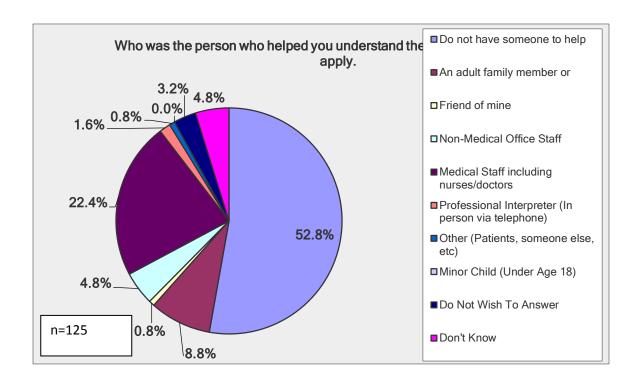


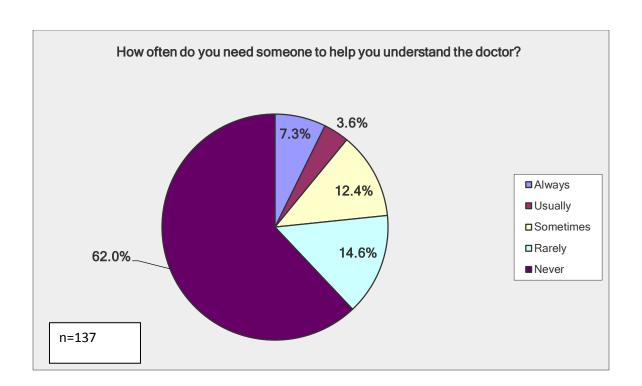


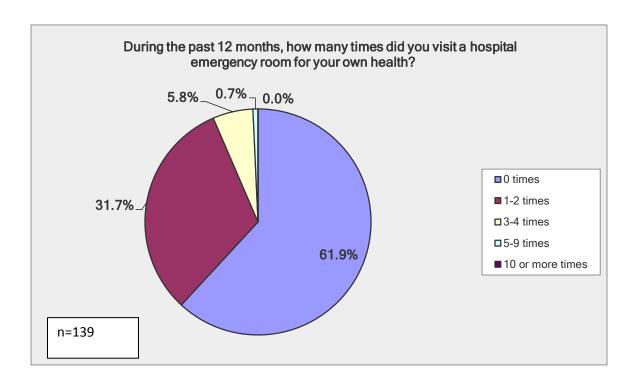


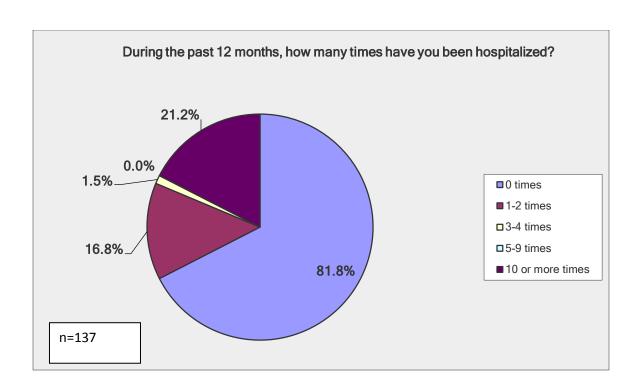


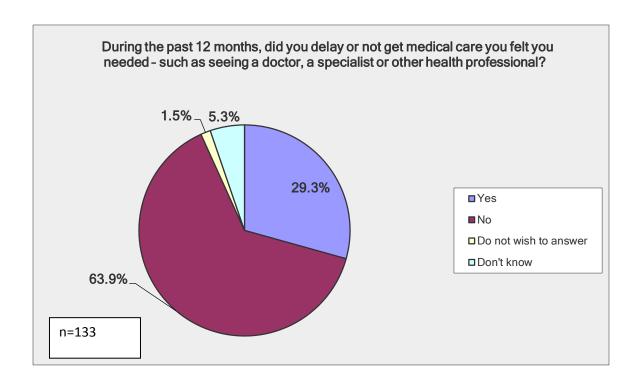


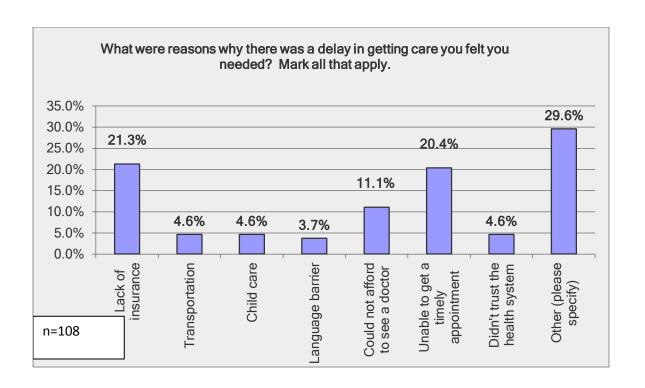


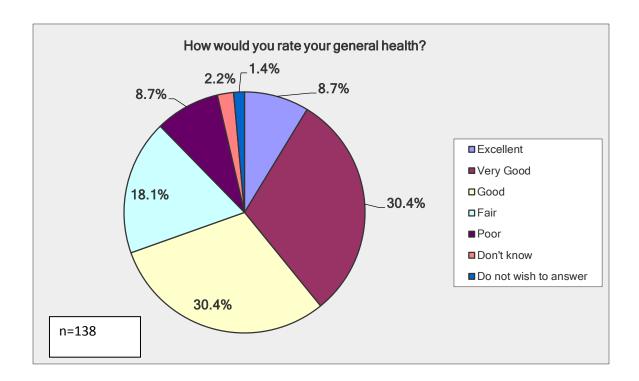


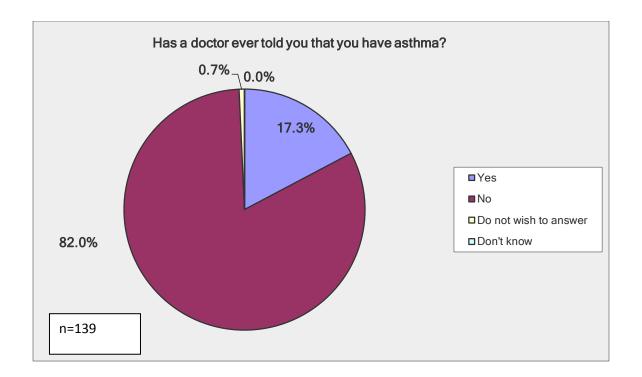


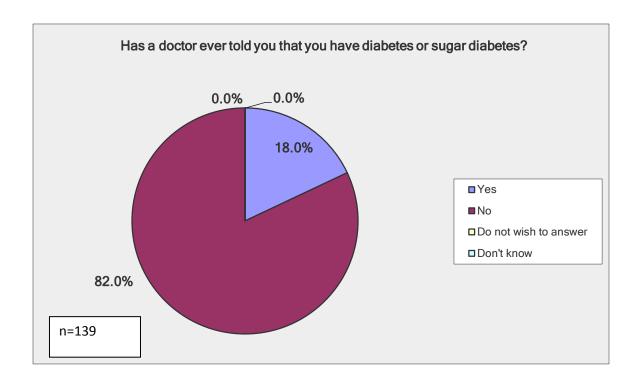


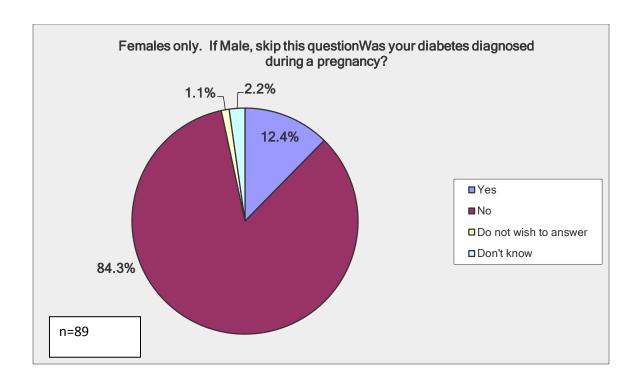


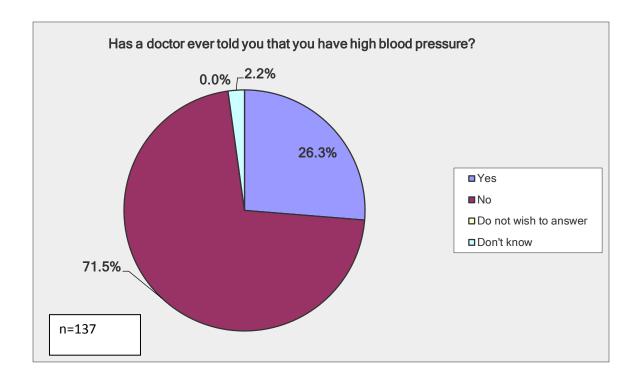


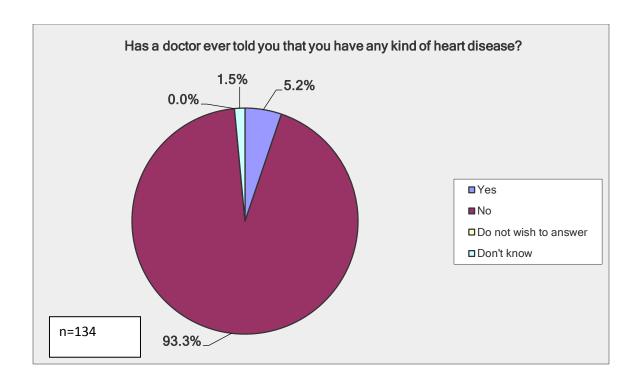


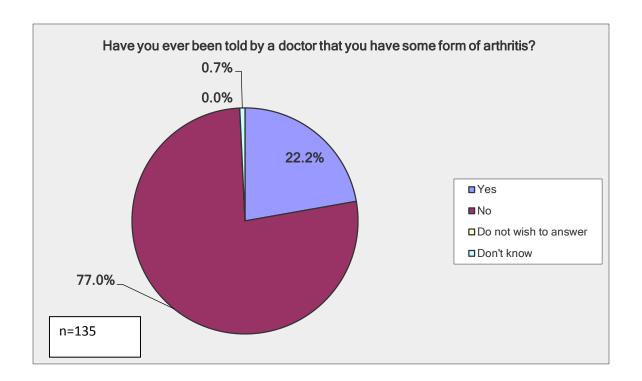


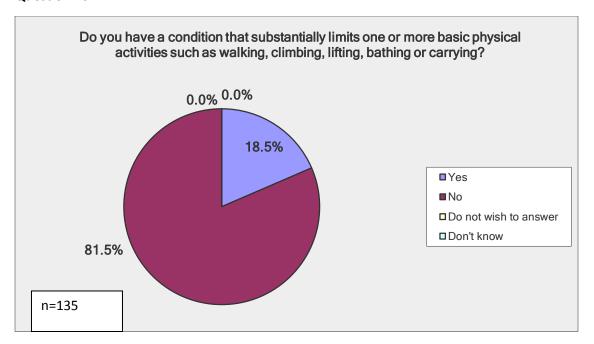


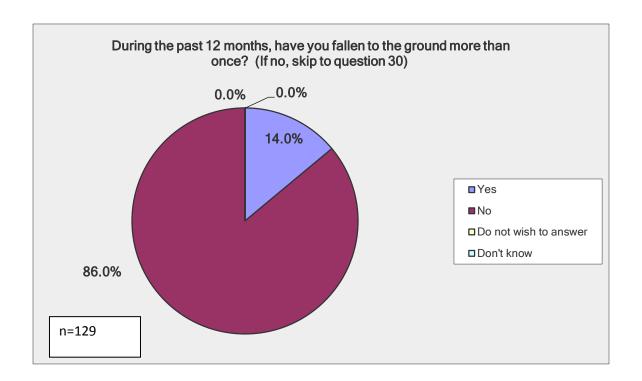


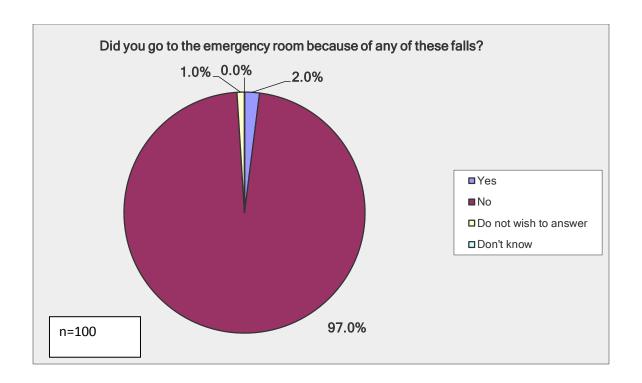


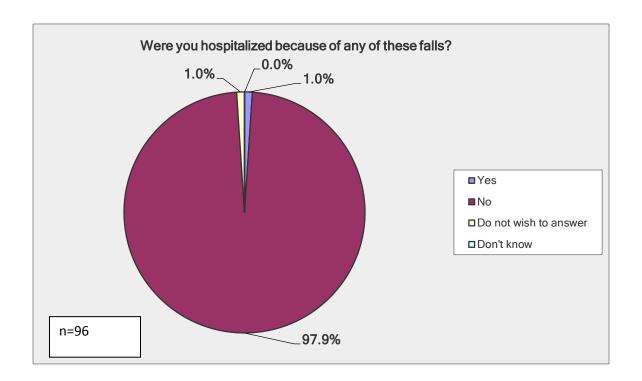


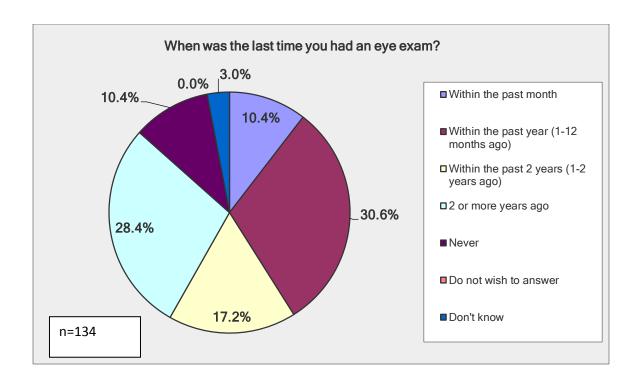


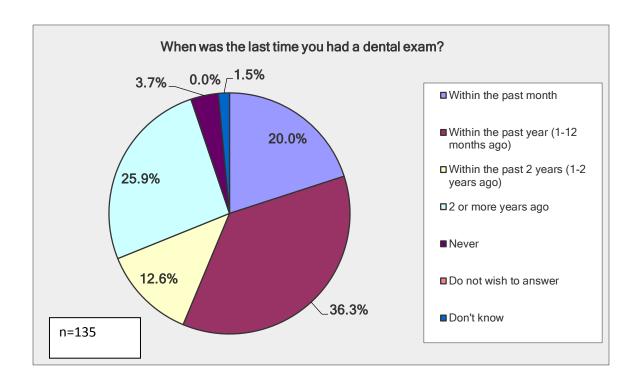


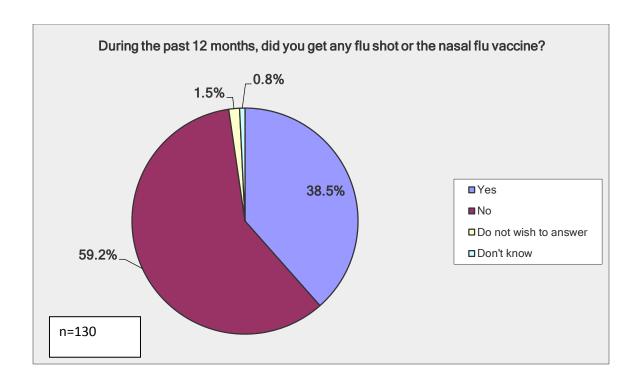


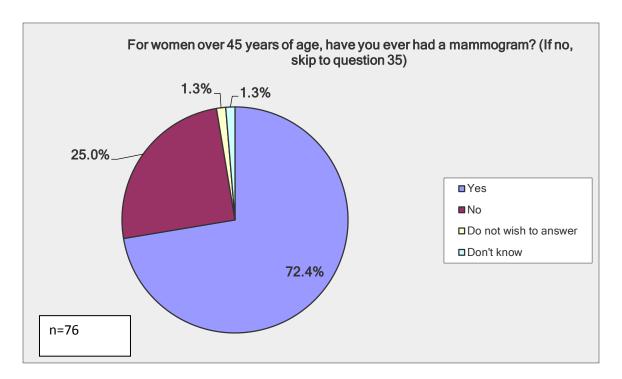




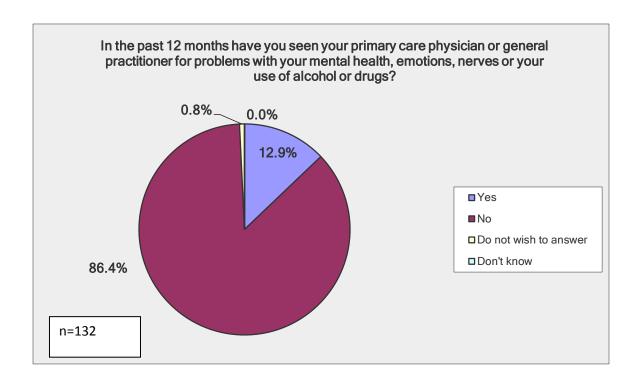


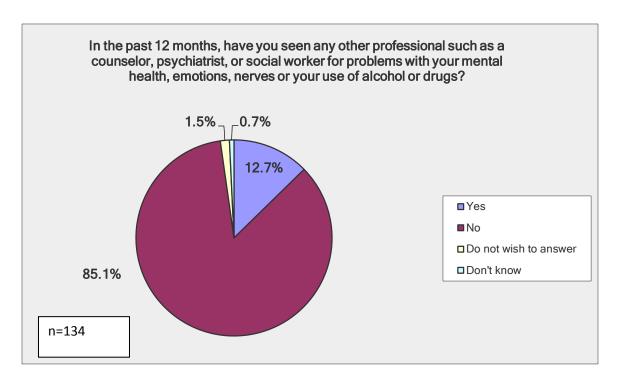




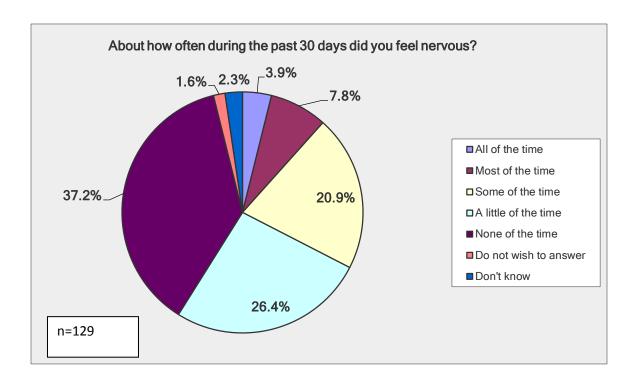


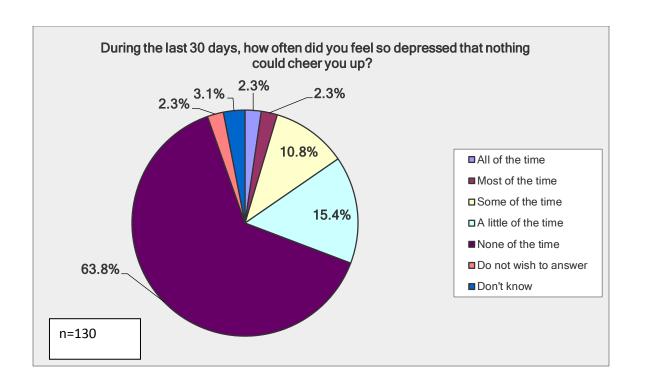
How long ago did you have your most recent mammogram?		
Answer Options Response Count		
	61	
answered question 61		

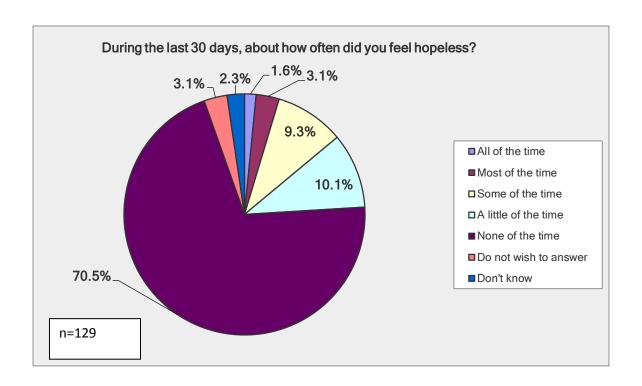


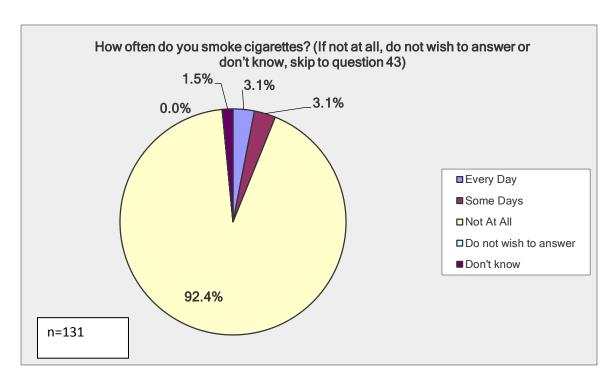


How many days out of the past 30 days were you unable to work or carry out your normal activities because of your feeling nervous, depressed or emotionally stressed?		
Answer Options	Response Count	
	97	
answered question	97	









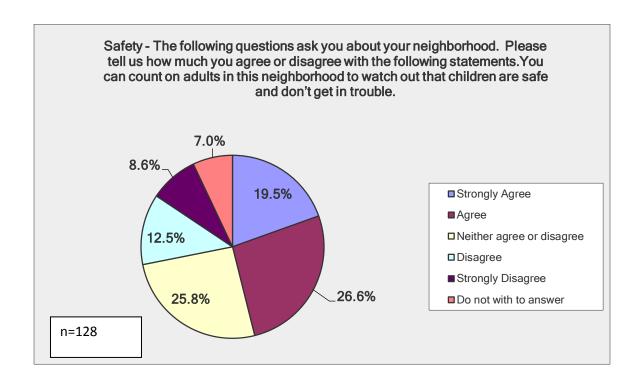
On average, how many cigarettes do you smoke a day?		
Answer Options	Response Count	
	55	
answered question	55	

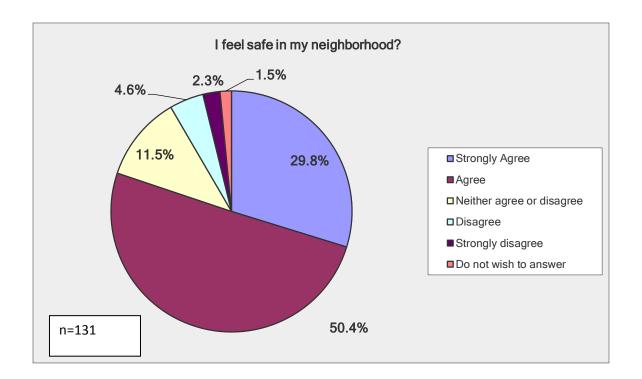
Question 43

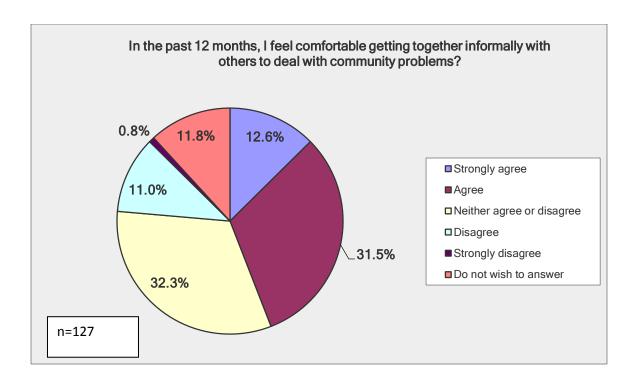
In the past 12 months, about how many times did you have 1 or 2 alcoholic drinks in a single day?		
Answer Options	Response Count	
	119	
answered question	119	

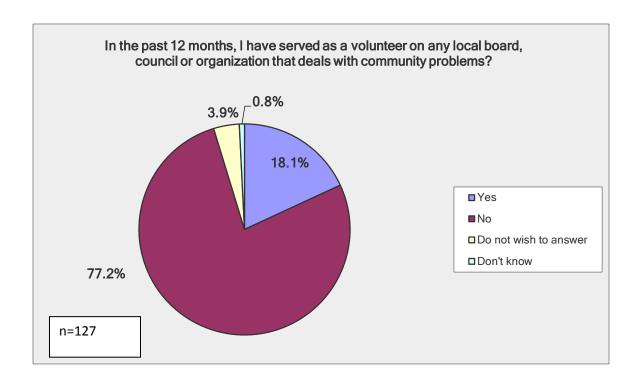
In the past 12 months, about how many times did you have 3 or 4 alcoholic drinks in a single day?		
Answer Options	Response Count	
	117	
answered question	117	

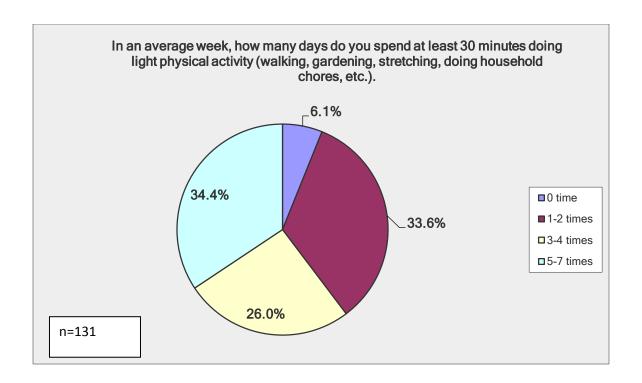
In the past 12 months, about how many times did you have 5 or more alcoholic drinks in a single day?		
Answer Options	Response Count	
	118	
answered question	118	

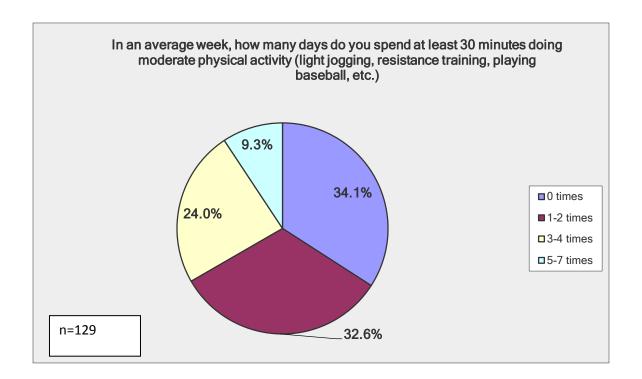


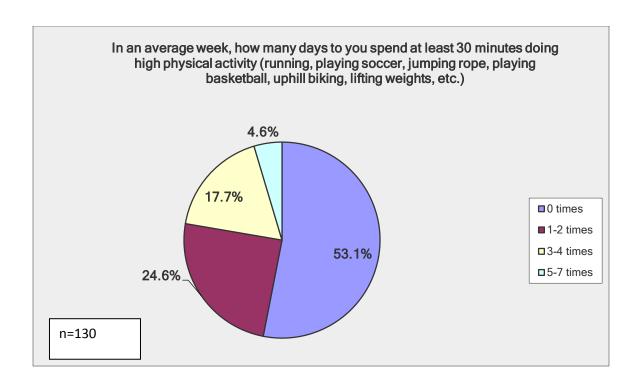












San Bernardino Mountains Community Hospital Top 25 Discharges by DRG, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	3,868
202/203	Bronchitis & asthma	526
193/194/195	Simple pneumonia & Pleurisy	268
870/871/872	Septicemia	258
313	Chest pain	246
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	226
417/418/419	Laparoscopic cholecystectomy	214
338-343	Appendectomy	187
190/191/192	Chronic obstructive pulmonary disease	183
602/603	Cellulitis	166
291/292/293	Heart failure & shock	160
689/690	Urinary tract infections	160
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	150
682/683/684	Renal failure	146
811/812	Red blood cell disorders	143
469/470	Major joint replacement/reattachment lower extremity	134
736-743	Uterine & adnexa procedures	134
286/287	Circulatory disorders	130
637/638/639	Diabetes	118
377/378/379	G.I. hemorrhage	95
308/309/310	Cardiac arrhythmia & conduction disorders	93
894-897	Alcohol/drug abuse or dependence	92
189	Pulmonary edema & respiratory failure	75
064/065/066	Intercranial hemorrhage or cerebral infarction	71
246-251	Percutaneous cardiovascular procedures	45
TOTAL		7,888

Top DRG Discharges Among San Bernardino Mountains Community Hospital Service Area by Race/Ethnicity, 2014

San Bernardino Mountains Community Hospital's Top DRG Among Service Area Non-Hispanic White Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	2187
870/871/872	Septicemia	136
469/470	Major joint replacement/reattachment lower extremity	114
190/191/192	Chronic obstructive pulmonary disease	95
193/194/195	Simple pneumonia & Pleurisy	91
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	86
602/603	Cellulitis	72
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	66
894-897	Alcohol/drug abuse or dependence	66
313	Chest pain	63
202/203	Bronchitis & asthma	60

682/683/684	Renal failure	60
291/292/293	Heart failure & shock	56
417/418/419	Laparoscopic cholecystectomy	53
689/690	Urinary tract infections	52
286/287	Circulatory disorders	52
736-743	Uterine & adnexa procedures	51
308/309/310	Cardiac arrhythmia & conduction disorders	47
064/065/066	Intercranial hemorrhage or cerebral infarction	47
377/378/379	G.I. hemorrhage	42
246-251	Percutaneous cardiovascular procedures	41
338-343	Appendectomy	39
811/812	Red blood cell disorders	35
637/638/639	Diabetes	33
945/946	Rehabilitation	29
189	Pulmonary edema & respiratory failure	24
100/101	Seizures	17
456-460	Spinal fusion	16
Total		3730

San Bernardino Mountains Community Hospital's Top DRG Among Service Area Hispanic (Any Race) Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	1217
202/203	Bronchitis & asthma	334
338-343	Appendectomy	139
417/418/419	Laparoscopic cholecystectomy	138
193/194/195	Simple pneumonia & Pleurisy	128
313	Chest pain	122
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	96
870/871/872	Septicemia	89
689/690	Urinary tract infections	88
602/603	Cellulitis	80
637/638/639	Diabetes	64
811/812	Red blood cell disorders	60
291/292/293	Heart failure & shock	59
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	59
736-743	Uterine & adnexa procedures	56
286/287	Circulatory disorders	53
682/683/684	Renal failure	51
190/191/192	Chronic obstructive pulmonary disease	46
189	Pulmonary edema & respiratory failure	38
308/309/310	Cardiac arrhythmia & conduction disorders	32
377/378/379	G.I. hemorrhage	29
894-897	Alcohol/drug abuse or dependence	25
469/470	Major joint replacement/reattachment lower extremity	15
064/065/066	Intercranial hemorrhage or cerebral infarction	15
100/101	Seizures	14

945/946	Rehabilitation	5
456-460	Spinal fusion	5
246-251	Percutaneous cardiovascular procedures	4
Total		3061

San Bernardino Mountains Community Hospital's Top DRG Among Service Area Non-Hispanic Black Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	1149
202/203	Bronchitis & asthma	105
313	Chest pain	59
811/812	Red blood cell disorders	44
291/292/293	Heart failure & shock	41
190/191/192	Chronic obstructive pulmonary disease	38
193/194/195	Simple pneumonia & Pleurisy	37
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	33
682/683/684	Renal failure	27
870/871/872	Septicemia	25
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	23
286/287	Circulatory disorders	22
637/638/639	Diabetes	22
377/378/379	G.I. hemorrhage	21
736-743	Uterine & adnexa procedures	20
689/690	Urinary tract infections	17
308/309/310	Cardiac arrhythmia & conduction disorders	16
417/418/419	Laparoscopic cholecystectomy	14
602/603	Cellulitis	10
189	Pulmonary edema & respiratory failure	10
338-343	Appendectomy	7
894-897	Alcohol/drug abuse or dependence	3
100/101	Seizures	3
469/470	Major joint replacement/reattachment lower extremity	1
064/065/066	Intercranial hemorrhage or cerebral infarction	1
246-251	Percutaneous cardiovascular procedures	0
945/946	Rehabilitation	0
456-460	Spinal fusion	0
Total		1748

San Bernardino Mountains Community Hospital's Top DRG Among Service Area Non-Hispanic Asian Residents, 2014

MSDRG	DRG Description	Asian
885	Psychoses	57
202/203	Bronchitis & asthma	14
193/194/195	Simple pneumonia & Pleurisy	12
682/683/684	Renal failure	9
870/871/872	Septicemia	7

391/392	Esophagitis, gastroenteritis, misc. digestive disorders	7
291/292/293	Heart failure & shock	
377/378/379	G.I. hemorrhage	6
417/418/419	Laparoscopic cholecystectomy	5
313	Chest pain	4
064/065/066	Intercranial hemorrhage or cerebral infarction	4
689/690	Urinary tract infections	3
811/812	Red blood cell disorders	3
736-743	Uterine & adnexa procedures	3
338-343	Appendectomy	2
190/191/192	Chronic obstructive pulmonary disease	1
602/603	Cellulitis	1
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	1
286/287	Circulatory disorders	1
894-897	Alcohol/drug abuse or dependence	1
308/309/310	Cardiac arrhythmia & conduction disorders	1
189	Pulmonary edema & respiratory failure	1
469/470	Major joint replacement/reattachment lower extremity	0
637/638/639	Diabetes	0
246-251	Percutaneous cardiovascular procedures	0
100/101	Seizures	0
945/946	Rehabilitation	0
456-460	Spinal fusion	0
Total		150

San Bernardino Mountains Community Hospital's Top DRG Among Service Area Non-Hispanic Native-American Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	12
469/470	Major joint replacement/reattachment lower extremity	2
417/418/419	Laparoscopic cholecystectomy	1
190/191/192	Chronic obstructive pulmonary disease	1
894-897	Alcohol/drug abuse or dependence	1
202/203	Bronchitis & asthma	0
193/194/195	Simple pneumonia & Pleurisy	0
870/871/872	Septicemia	0
313	Chest pain	0
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	0
338-343	Appendectomy	0
602/603	Cellulitis	0
291/292/293	Heart failure & shock	0
689/690	Urinary tract infections	0
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	0
682/683/684	Renal failure	0
811/812	Red blood cell disorders	0
736-743	Uterine & adnexa procedures	0

286/287	Circulatory disorders	0
637/638/639	Diabetes	0
377/378/379	G.I. hemorrhage	0
308/309/310	Cardiac arrhythmia & conduction disorders	0
189	Pulmonary edema & respiratory failure	0
064/065/066	Intercranial hemorrhage or cerebral infarction	0
246-251	Percutaneous cardiovascular procedures	0
100/101	Seizures	0
945/946	Rehabilitation	0
456-460	Spinal fusion	0
Total		17

San Bernardino Mountains Community Hospital's Top DRG Among Service Area Non-Hispanic Other/Unknown Race Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	83
202/203	Bronchitis & asthma	16
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	5
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	5
870/871/872	Septicemia	4
417/418/419	Laparoscopic cholecystectomy	4
736-743	Uterine & adnexa procedures	4
064/065/066	Intercranial hemorrhage or cerebral infarction	4
193/194/195	Simple pneumonia & Pleurisy	3
338-343	Appendectomy	3
190/191/192	Chronic obstructive pulmonary disease	3
602/603	Cellulitis	3
811/812	Red blood cell disorders	3
469/470	Major joint replacement/reattachment lower extremity	3
286/287	Circulatory disorders	3
189	Pulmonary edema & respiratory failure	2
313	Chest pain	1
291/292/293	Heart failure & shock	1
689/690	Urinary tract infections	1
637/638/639	Diabetes	1
894-897	Alcohol/drug abuse or dependence	1
100/101	Seizures	1
682/683/684	Renal failure	0
377/378/379	G.I. hemorrhage	0
308/309/310	Cardiac arrhythmia & conduction disorders	0
246-251	Percutaneous cardiovascular procedures	0
945/946	Rehabilitation	0
456-460	Spinal fusion	0
Total		154

Top DRG Discharges Among San Bernardino Mountains Community Hospital Service Area by Age Group, 2014

San Bernardino Mountains Community Hospital's Top DRG Among Service Area Residents Under 18 Years, 2014

MSDRG	DRG Description	Discharges
202/203	Bronchitis & asthma	426
193/194/195	Simple pneumonia & Pleurisy	95
338-343	Appendectomy	83
689/690	Urinary tract infections	43
602/603	Cellulitis	33
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	21
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	20
885	Psychoses	19
100/101	Seizures	10
870/871/872	Septicemia	7
417/418/419	Laparoscopic cholecystectomy	4
811/812	Red blood cell disorders	4
637/638/639	Diabetes	4
189	Pulmonary edema & respiratory failure	4
291/292/293	Heart failure & shock	2
469/470	Major joint replacement/reattachment lower extremity	2
736-743	Uterine & adnexa procedures	2
377/378/379	G.I. hemorrhage	1
456-460	Spinal fusion	1
313	Chest pain	0
190/191/192	Chronic obstructive pulmonary disease	0
682/683/684	Renal failure	0
286/287	Circulatory disorders	0
894-897	Alcohol/drug abuse or dependence	0
308/309/310	Cardiac arrhythmia & conduction disorders	0
064/065/066	Intercranial hemorrhage or cerebral infarction	0
246-251	Percutaneous cardiovascular procedures	0
945/946	Rehabilitation	0
Total		781

San Bernardino Mountains Community Hospital's Top DRG Among Service Area Residents 18-59 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	4429
202/203	Bronchitis & asthma	68
193/194/195	Simple pneumonia & Pleurisy	72
870/871/872	Septicemia	97
313	Chest pain	160

391/392	Esophagitis, gastroenteritis, misc. digestive disorders	118
417/418/419	Laparoscopic cholecystectomy	169
338-343	Appendectomy	98
190/191/192	Chronic obstructive pulmonary disease	79
602/603	Cellulitis	84
291/292/293	Heart failure & shock	56
689/690	Urinary tract infections	57
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	53
682/683/684	Renal failure	57
811/812	Red blood cell disorders	99
469/470	Major joint replacement/reattachment lower extremity	32
736-743	Uterine & adnexa procedures	122
286/287	Circulatory disorders	68
637/638/639	Diabetes	79
377/378/379	G.I. hemorrhage	49
894-897	Alcohol/drug abuse or dependence	87
308/309/310	Cardiac arrhythmia & conduction disorders	32
189	Pulmonary edema & respiratory failure	38
064/065/066	Intercranial hemorrhage or cerebral infarction	23
246-251	Percutaneous cardiovascular procedures	19
100/101	Seizures	13
945/946	Rehabilitation	13
456-460	Spinal fusion	9
Total		6280

San Bernardino Mountains Community Hospital's Top DRG Among Service Area Residents 60 Plus Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	257
870/871/872	Septicemia	157
291/292/293	Heart failure & shock	106
190/191/192	Chronic obstructive pulmonary disease	105
193/194/195	Simple pneumonia & Pleurisy	104
469/470	Major joint replacement/reattachment lower extremity	101
682/683/684	Renal failure	90
313	Chest pain	89
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	88
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	81
308/309/310	Cardiac arrhythmia & conduction disorders	64
286/287	Circulatory disorders	63
689/690	Urinary tract infections	61
602/603	Cellulitis	49
377/378/379	G.I. hemorrhage	48
064/065/066	Intercranial hemorrhage or cerebral infarction	48
417/418/419	Laparoscopic cholecystectomy	42

811/812	Red blood cell disorders	42
637/638/639	Diabetes	37
202/203	Bronchitis & asthma	35
189	Pulmonary edema & respiratory failure	33
246-251	Percutaneous cardiovascular procedures	26
945/946	Rehabilitation	21
100/101	Seizures	12
456-460	Spinal fusion	11
736-743	Uterine & adnexa procedures	10
894-897	Alcohol/drug abuse or dependence	10
338-343	Appendectomy	9
Total		1799

San Bernardino Mountains Community Hospital Focus Group Analysis

Question #1 – How long have you lived in the Inland Empire? If you are new to the area, what brought you here?

Data for question 1 was analyzed individually for each focus group and as an aggregate. A mean and range was calculated for each focus group and a mean, median and range was calculated for the aggregate data. Among all participants, 4.3% stated they lived in the Inland Empire their entire life. This information was not incorporated in the analysis as the number of years living in the Inland Empire was not identified for these participants. Among all participants, the highest frequency of individual years living in the Inland Empire was six and eight years; 8.7% for each.

A. San Bernardino Mountains Community

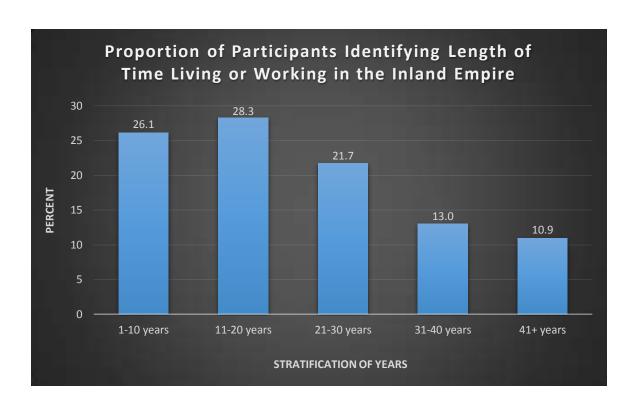
- a. Mean 18.9 years
- b. Range (8-43 years)

Overall Participating Hospitals (Aggregate)

Mean – 21.8 years

Median – 19 years

Range - 1-56 years



Question #2 – What if anything is different about your community now that was not the case five years ago?

- 1. Lack of services for individuals identified as substance users and those identified with mental health needs. Many noted observed increase in population living in half-way homes and in rehabilitation services. No services for homeless population
- 2. Increase in crime burglaries
- 3. Increase in families moving from area due to lack of jobs resulting in increased crime because of vacant homes
- 4. Climate change water shortage, lack of water and snow

Question #3 – What kind of projects, if any, have people in your community worked on together in the past five years? (Note: Participants stated they were members of organizations who assist with services)

- 1. Housing Rebuilding Together program, Christmas in April where contractors donate time to rebuild 5-8 homes a year
- 2. Health services mammograms for uninsured and underinsured, mobile unit offering family services
- 3. Senior services Lifeline program which helps seniors remain in their own home
- 4. The Special Olympics program

Question #4 – Think about your community over the next five years, what changes would you make or not make and why?

- 1. Education provide programs that allows kids access to higher education, want kids to come back to community and work, a community college
- 2. Programs that address drug usage and addiction drug aversion programs for students, programs addressing non-illicit drug use, schools need to provide programs for students using drugs and not expel them
- 3. Programs addressing transportation for students to city college and hospital

Question #5 – If you knew someone was thinking about moving to your community, what would you tell them or her about the area to convince them to move or not to move?

I – Positive

- 1. Physical activity endless events year-round, swimming at lake, skiing, hiking, walking, recreation events in the evenings, dance classes
- 2. Climate/weather
- 3. Jobs, particularly for youth

II - Negative

- 1. Limited employment and with low hourly rate with limited benefits
- 2. Limited resources, i.e. shopping, grocery stores
- **3.** Everything closes early

Question #6 – Describe how your community could be improved.

1. Education – provide programs that allows kids access to higher education, want kids to come back to community and work, a community college

- 2. Programs that address drug usage and addiction drug aversion programs for students, programs addressing non-illicit drug use, schools need to provide programs for students using drugs and not expel them
- 3. Programs addressing transportation for students to city college and hospital

Question #7 – What makes your community a healthy community?

- 1 Access to medical resources/services, such as emergency room, radiology lab, ER doctors, heliport to transport critical patients, and a skilled nursing facility
- 2 Nutrition programs for seniors, such Meals on Wheels

Question #8 – What makes your community unhealthy?

1. Lack of medical resources/services/specialties. For instance, surgeons (Cardiologists and Neurologists), OB/GYNs, no ICU

Question #9 – Describe barriers that may pose challenges to achieving positive community health.

- 1. Lack of healthy food options in schools, lack of healthy food options/resources in community
- 2. Lack of medical resources available sin the community. Community members need to travel down the hill to access services because there is limited prescriptions at the pharmacies and lack of home health services

Question #10 – From what health problems do people in your community suffer?

- 1. Falls
- 2. Chronic diseases COPD, asthma, obesity
- 3. Mental health and substance abuse
- 4. Influenza

Question #11 – Where do people in your community go to receive health care?

1. Physician office in Crestline and Arrowhead, hospitals, rural health clinics, physical therapy office.

Question #12 – What, if any, environmental health concerns do you face in your community?

1. Community infrastructure, earthquakes, fires, unpaved highway down mountain. If members of the community need to evacuate for an emergency, they cannot use this unpaved highway. Also during bad weather, for instance when it snows a lot, the heliport won't operate

Question #13 – Think about the issues we have talked about today. What issues do you think are the most important for your community to address? Why?

- 1. Educating kids on healthy lifestyles and life tasks so they are successful and healthy
- 2. Policing
- 3. The litter problem
- 4. Economy of City. The city is facing bankruptcy so there are no funds to fix city

Question #14 – Think about the strengths in your community we have talked about today. What do you think is the community's greatest asset?

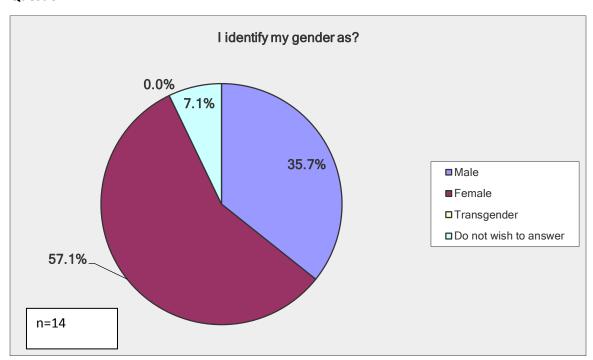
1. Volunteerism, churches, Boy and Girl Scouts, Boys and Girls Club, youth coalition

Question #15 – Is there anything else we have not asked about that is important for us to know about in your community?

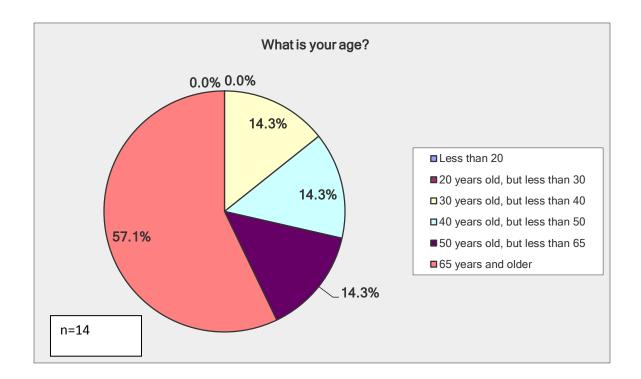
Participants had nothing to say.

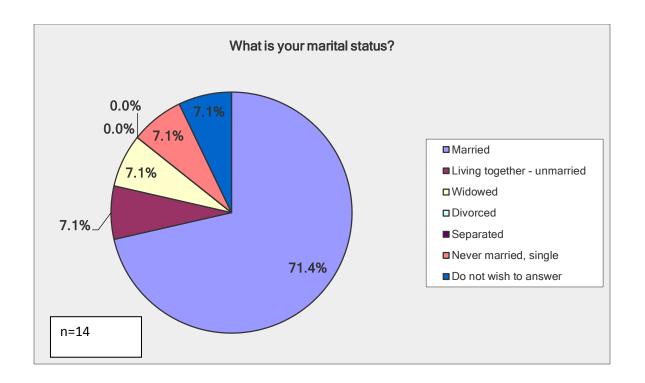
San Bernardino Mountains Community Hospital QOLS Service Area Analysis

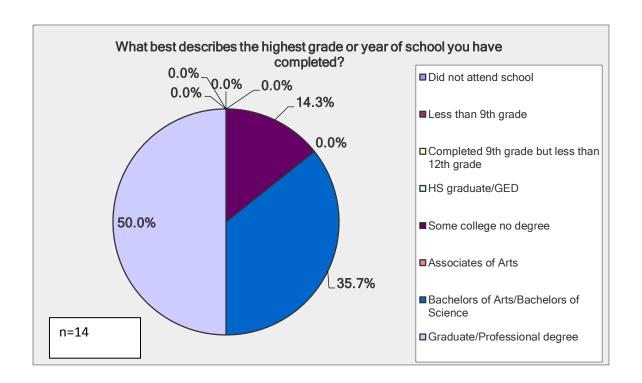
Question 1

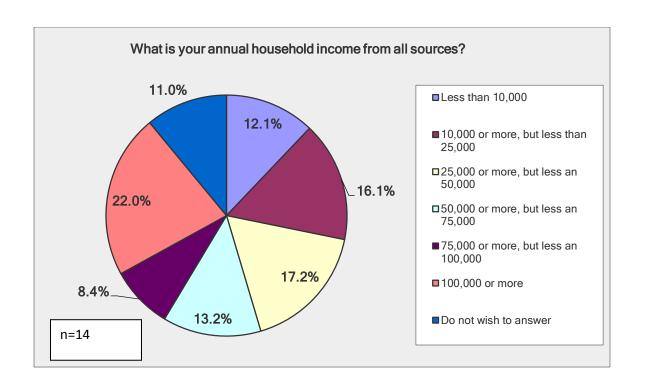


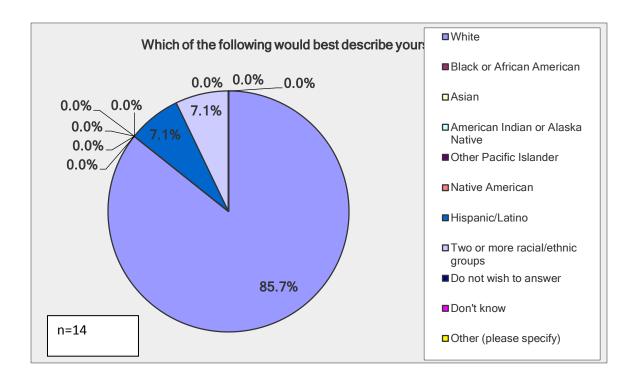
What is your zip code?	
Answer Options	Response Count
	14
answered question	14

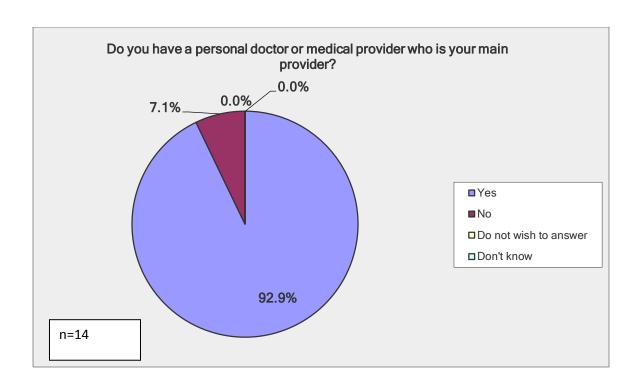


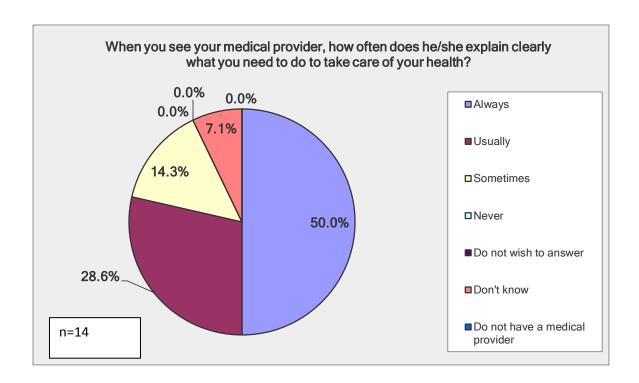


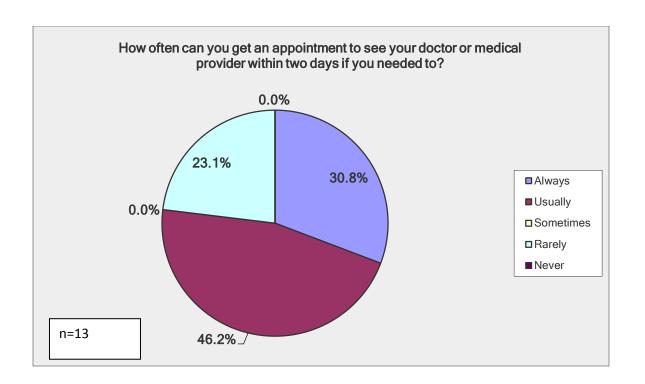


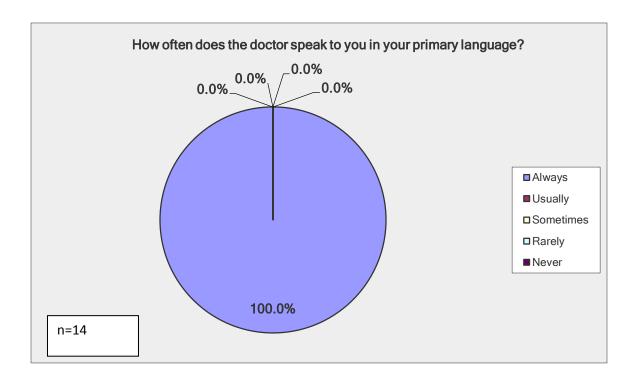


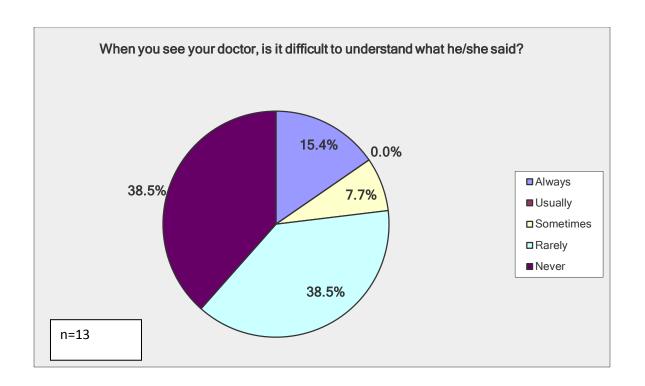


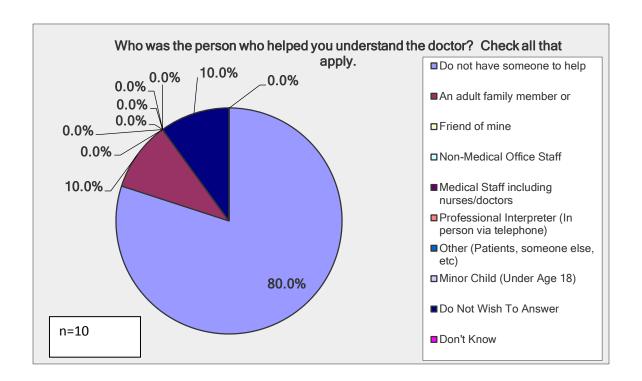


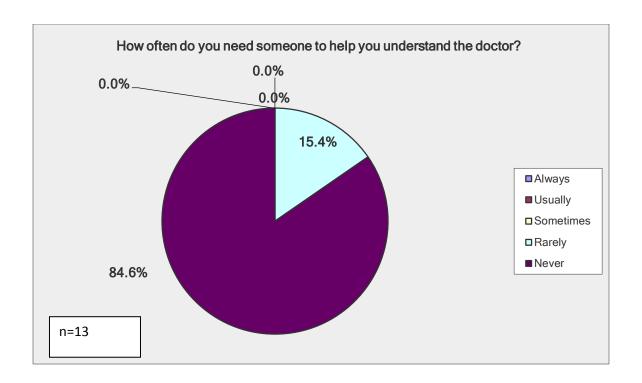


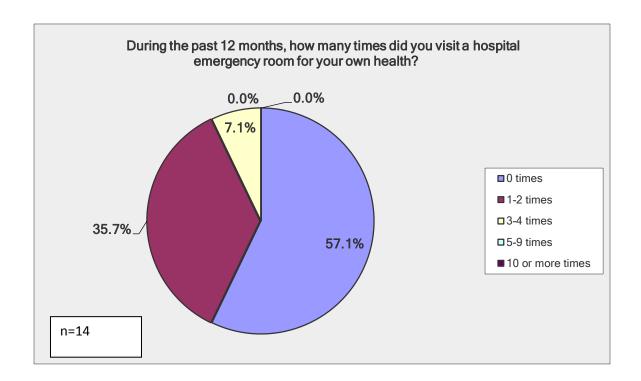


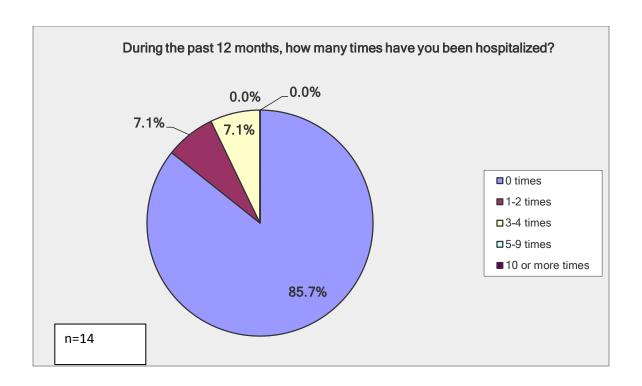


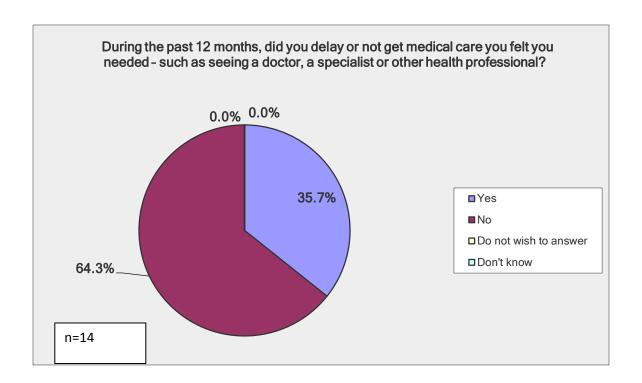


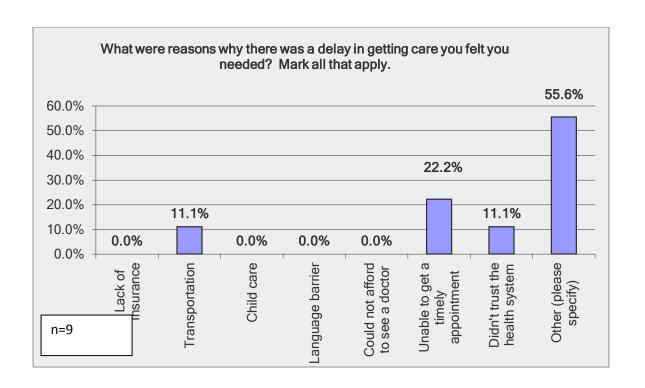


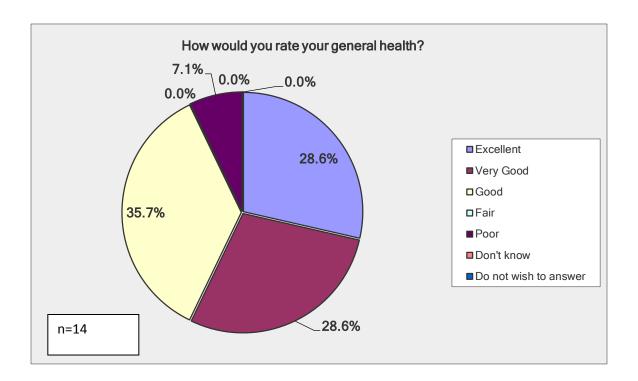


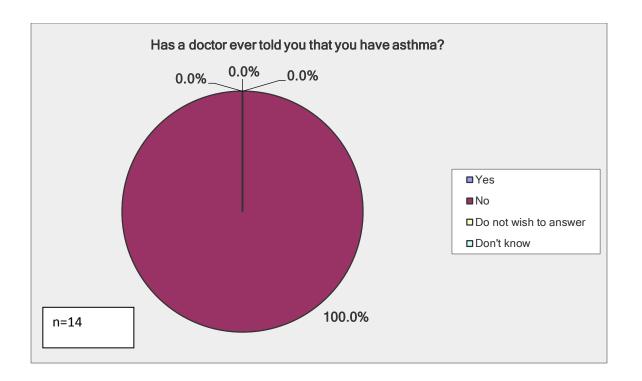


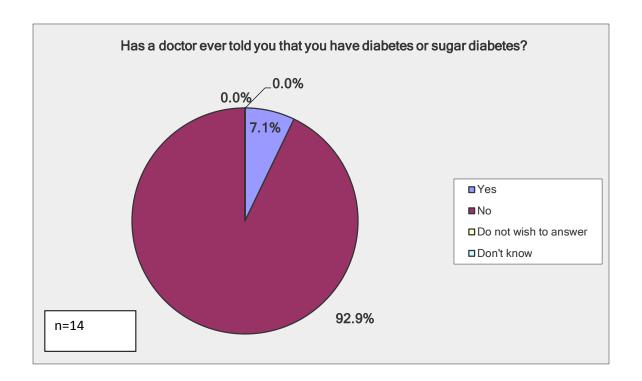


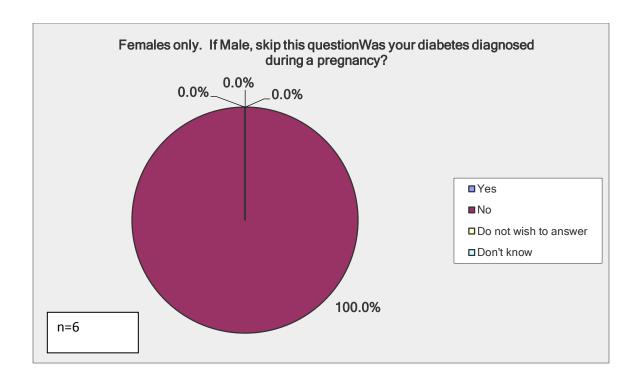


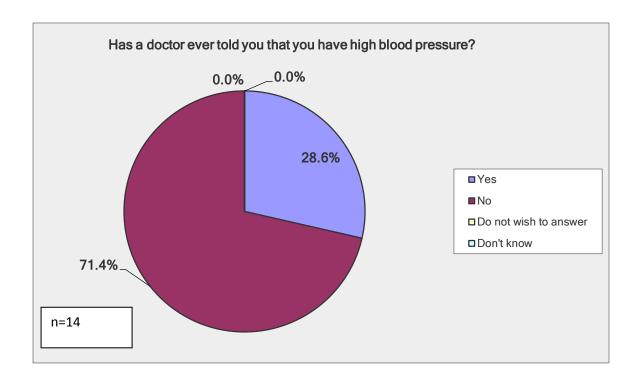


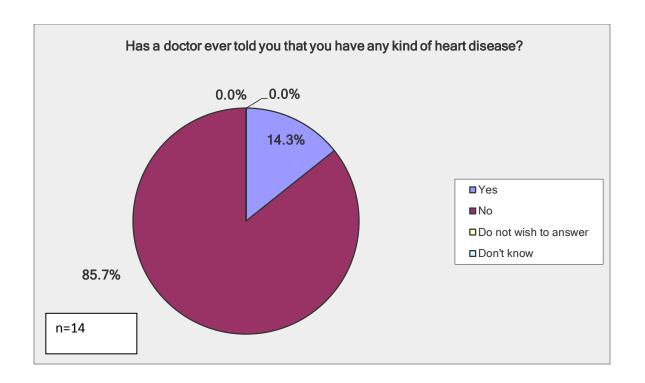


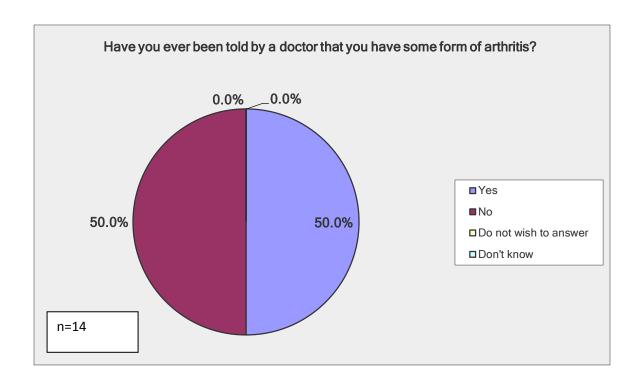


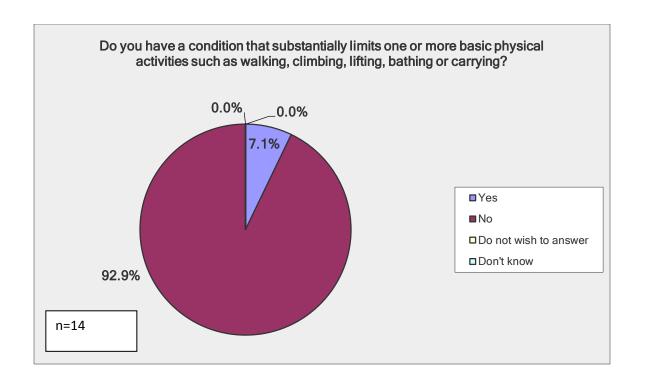


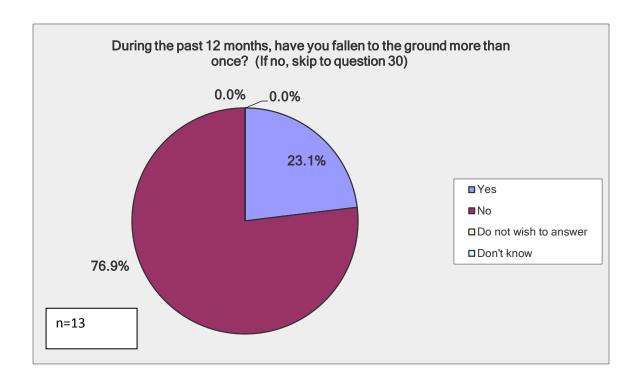


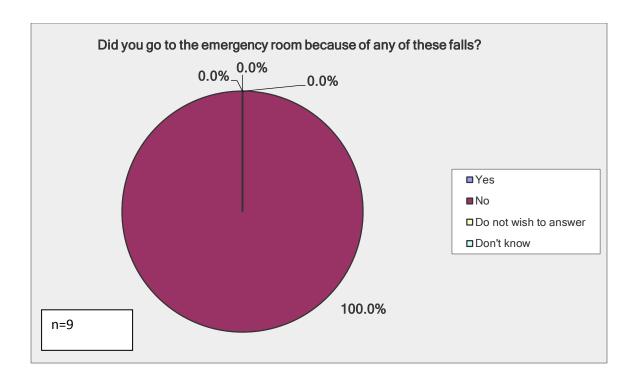


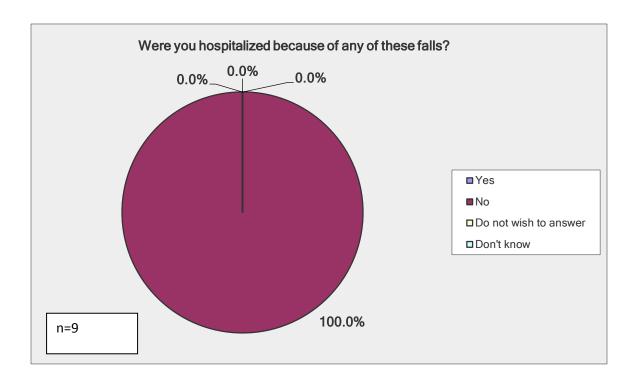


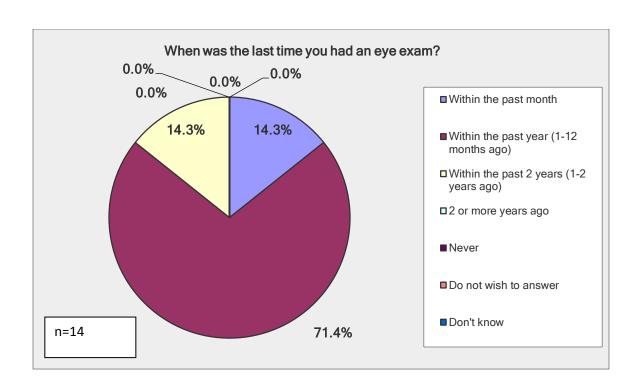


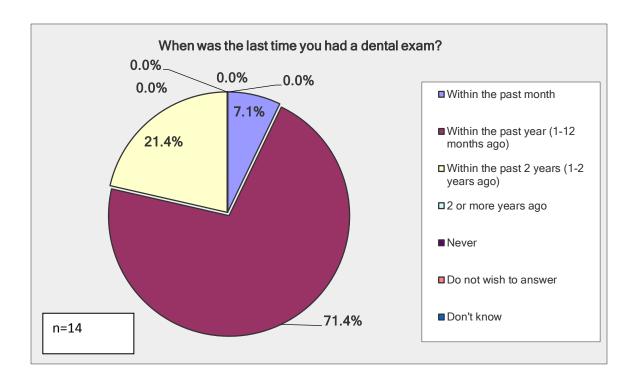


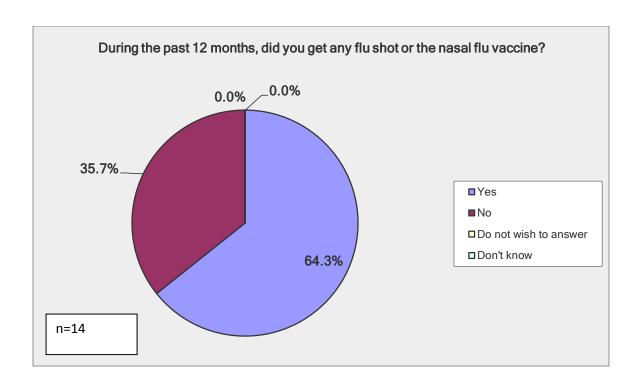


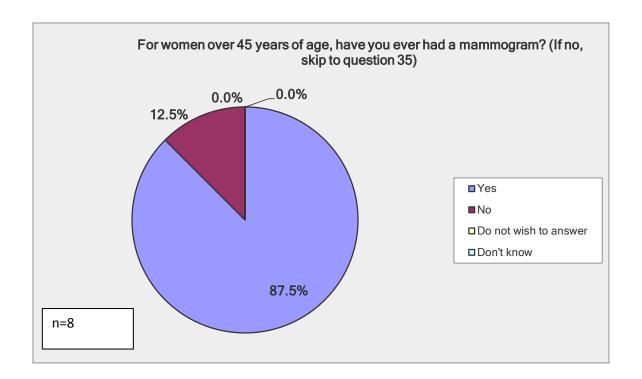




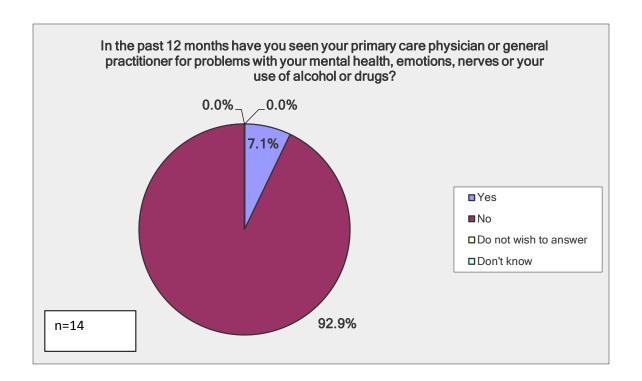


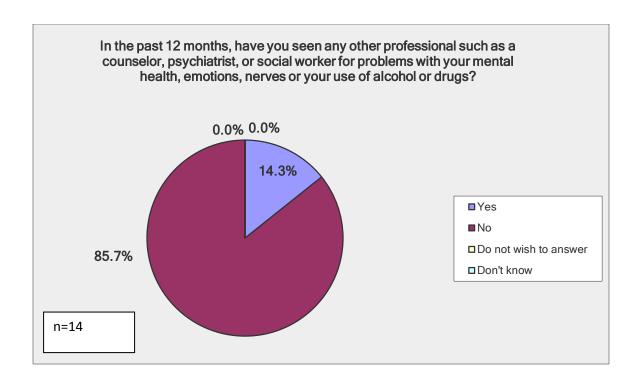






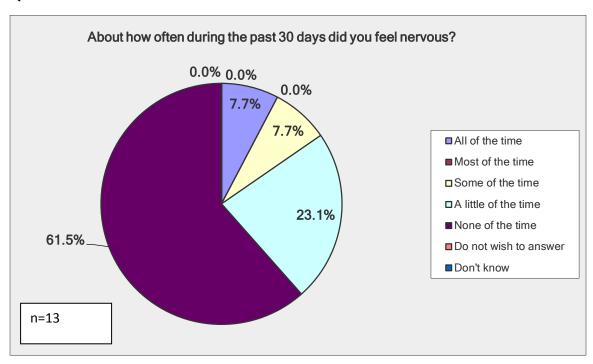
How long ago did you have your most recent mammogram?		
Answer Options	Response Count	
	7	
answered question 7		

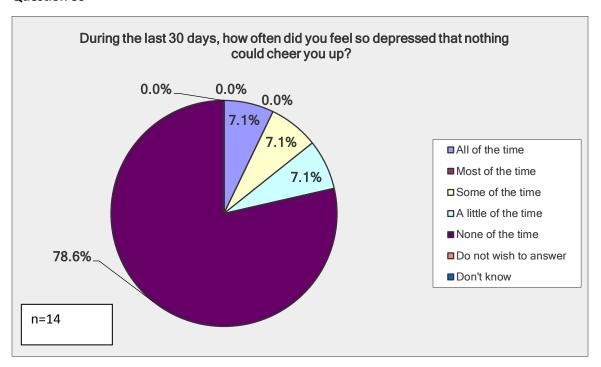


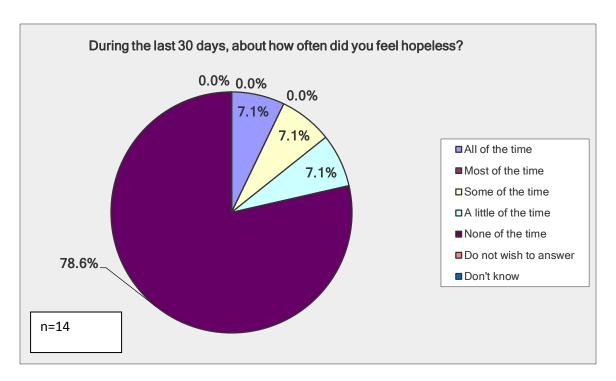


How many days out of the past 30 days were you unable to work or carry out your normal activities because of your feeling nervous, depressed or emotionally stressed?		
Answer Options	Response Count	
	12	
answered question	12	

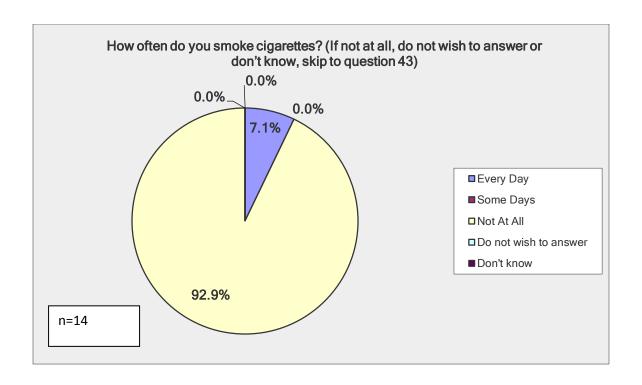
Question 38







Question 41



On average, how many cigarettes do you smoke a day?		
Answer Options	Response Count	
	7	
answered question	7	

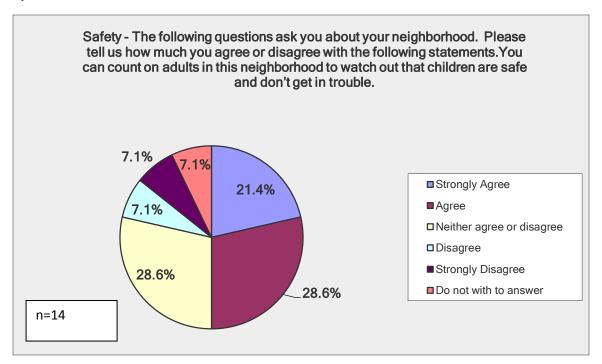
Question 43

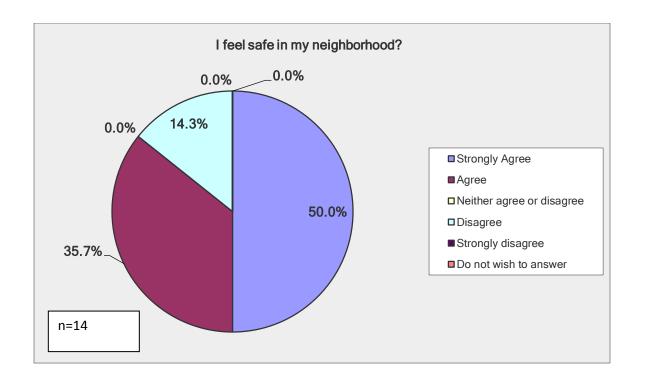
In the past 12 months, about how many times did you have 1 or 2 alcoholic drinks in a single day?		
Answer Options	Response Count	
	12	
answered question	12	

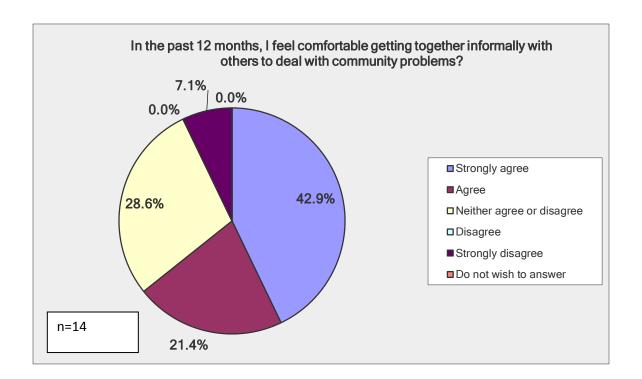
Question 44

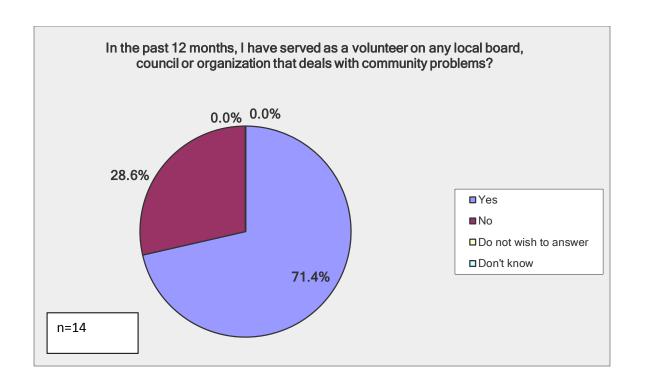
In the past 12 months, about how many times did you have 3 or 4 alcoholic drinks in a single day?		
Answer Options	Response Count	
	11	
answered question	11	

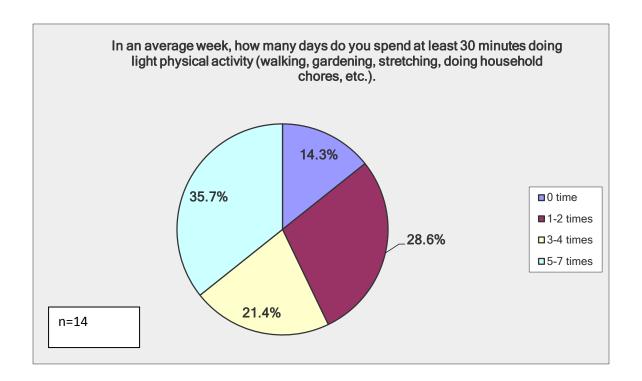
In the past 12 months, about how many times did you have 5 or more alcoholic drinks in a single day?		
Answer Options	Response Count	
	11	
answered question	11	

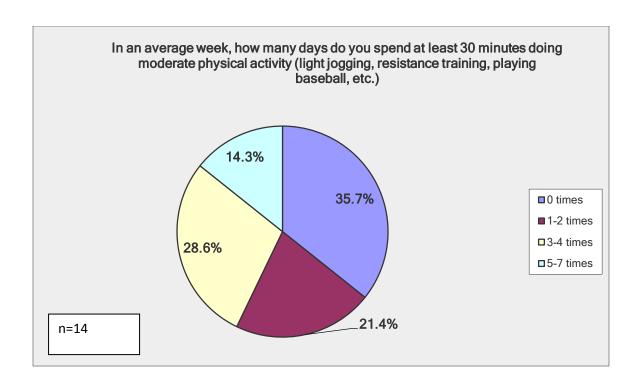


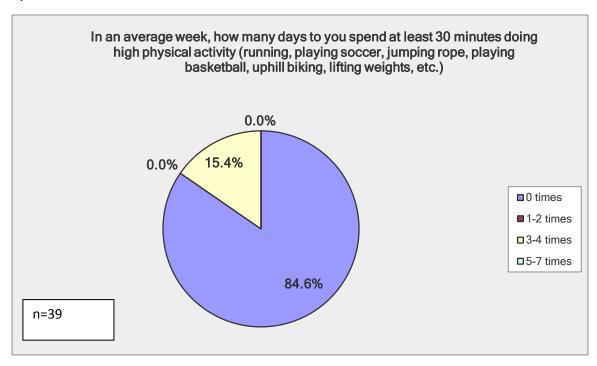












Question #1 – How long have you lived in the Inland Empire? If you are new to the area, what brought you here?

Data for question 1 was analyzed individually for each focus group and as an aggregate. A mean and range was calculated for each focus group and a mean, median and range was calculated for the aggregate data. Among all participants, 4.3% stated they lived in the Inland Empire their entire life. This information was not incorporated in the analysis as the number of years living in the Inland Empire was not identified for these participants. Among all participants, the highest frequency of individual years living in the Inland Empire was six and eight years; 8.7% for each.

San Gorgonio Hospital

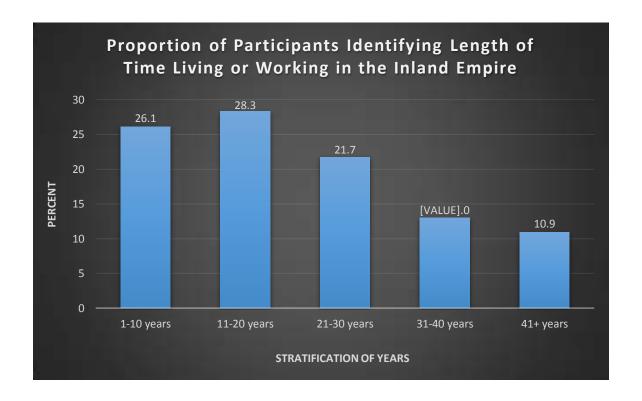
- a. Mean 18.9 years
- b. Range (6.5-41 years)

Overall Participating Hospitals (Aggregate)

Mean - 21.8 years

Median - 19 years

Range - 1-56 years



Question #2 – What if anything is different about your community now that was not the case five years ago?

1. The availability of physical activity programs, specifically walking programs for all ages

- 100 mile club for seniors - Cancer walks - Spirit runs

- elementary running club
- 2. An increased senior community. The senior population needs assistance with transportation services
- 3. A New Emergency Room and Intensive Care Unit for San Gorgonio Memorial Hospital. These services have become an asset for the community

Question #3 – What kind of projects, if any, have people in your community worked on together in the past five years? (Note: Participants stated they were members of organizations who assist with services)

- 1. Projects pertaining to nutrition, specifically
 - a. Health Cities which addresses food deserts
 - b. Mobile Fresh which brings affordable fresh foods to seniors
 - c. Table of Plenti which serves the needy and homeless
- 2. Projects addressing the homeless population
 - a. Homeless count in community
- 3. Water Alliance, which addresses the lack of water in area, bringing together 13 water links
- 4. Projects addressing transportation such as Metro Link, which provides transportation from Coachella to Los Angeles
- 5. Projects addressing adolescents, specifically programs that address issues pertaining to youth such as the Boys and Girls Clubs

Question #4 – Think about your community over the next five years, what changes would you make or not make and why?

- 1. Participants would like to see the government become more active in the community and understand the changes that are occurring within the community. Government needs to understand that the population is growing and changing. In addition, City Council does not agree on key issues impacting the community. The local government has personal agendas and this impacts decisions that could result positive outcomes for the community. Some participants felt elected officials were not educated about community and did not understand the SES factors that affect members of the community. Moreover, participants believed that City Council did understand issues impacting all children. Ultimately, participants believed City Council was changing the community in a direction that was unhealthy. Several participants also believed that City Council needed to concentrate on education.
- 2. Participants would like to make changes in education that focuses on creating more schools in the community and to specifically address the high dropout rate among students.
- 3. Participants want to address the lack of services for seniors

- 4. Participants want to make changes to housing programs so as to expand affordable housing in the community.
- 5. Participants want to focus on community growth, specifically creating and providing community resources accessible and available to all in the community. Some participants stated they would like the community to develop a plan for smart growth
- 6. Participants would like to make changes to transportation so that all community members have access to transportation. Some participants want to make changes to the community's infrastructure so as to address the traffic problem.

Question #5 – If you knew someone was thinking about moving to your community, what would you tell them or her about the area to convince them to move or not to move?

I – Positives

- 1. There is a lot of access to physical activities:
 - a. AYSO soccer program,
 - b. Access to outdoor sport activities,
 - c. Equestrian
 - d. Access to parks
 - e. Walking trails
- 2. Community has a small town feel
- 3. The community is affordable and has affordable housing
- 4. The community has good quality of life
- 5. The median income is good
- 6. The weather is good

II - Negatives

- 1. Education is not good for kids unless in you put them in private schools
- 2. There is a long commute to metropolitan areas

Question #6 – Describe how your community could be improved.

- 1. Participants would like to see the government become more active in the community and understand the changes that are occurring within the community. Government needs to understand that the population is growing and changing. In addition, City Council does not agree on key issues impacting the community. The local government has personal agendas and this impacts decisions that could result positive outcomes for the community. Some participants felt elected officials were not educated about community and did not understand the SES factors that affect members of the community. Moreover, participants believed that City Council did understand issues impacting all children. Ultimately, participants believed City Council was changing the community in a direction that was unhealthy. Several participants also believed that City Council needed to concentrate on education.
- 2. Participants would like to make changes in education that focuses on creating more schools in the community and to specifically address the high dropout rate among students.
- 3. Participants want to address the lack of services for seniors

- 4. Participants want to make changes to housing programs so as to expand affordable housing in the community.
- 5. Participants want to focus on community growth, specifically creating and providing community resources accessible and available to all in the community. Some participants stated they would like the community to develop a plan for smart growth
- 6. Participants would like to make changes to transportation so that all community members have access to transportation. Some participants want to make changes to the community's infrastructure so as to address the traffic problem.

Question #7 – What makes your community a healthy community?

- 1. Access to recreational activities, which includes safe places to walk and exercise.
- 2. The environment is good. Participants stated that community does not have toxic industries and air quality is good.
- 3. There is an active senior community.

Question #8 – What makes your community unhealthy?

- 1. Businesses like hookah and cigar lounges, tattoo parlors and businesses that sell alcohol and marijuana.
- 2. The lack of resources offering healthy food options and the abundance of fast food restaurants.
- 3. A Low socio-economic environment with low paying jobs.
- 4. The lack of mental health services.

Question #9 – Describe barriers that may pose challenges to achieving positive community health.

Participants stated that the following were barriers which posed challenges to achieving positive community health:

1. A low socio-economic status community, the lack of good education, the lack of affordable quality housing, and the lack of medical specialists

Question #10 - From what health problems do people in your community suffer?

- 1. Mental health issues. Participants noted lack of resources for mental health patients. Have limited beds in Riverside County. Sometimes patients transferred to other counties.
- 2. Health problems impacting seniors strokes, COPD, fractures, asthma, high blood pressure, diabetes
- 3. Substance abuse (alcohol and drugs)

Question #11 – Where do people in your community go to receive health care?

- 1. Hospitals San Gorgonio Memorial Hospital, Loma Linda University, Redlands Hospital, San Bernardino Hospital, Desert Hospital, Kaiser
- 2. Emergency room
- 3. Clinics Beaver

Question #12 – What, if any, environmental health concerns do you face in your community?

1. Pollution due to traffic from freeways, trains, air traffic. Community on flight path for air traffic

Question #13 – Think about the issues we have talked about today. What issues do you think are the most important for your community to address? Why?

- 1. Economic development, the economy
- 2. Access to healthcare, especially mental health services
- 3. Transportation
- 4. Public safety

5. The development of a community college

Question #14 – Think about the strengths in your community we have talked about today. What do you think is the community's greatest asset?

1. Community leaders, veterans, Boys and Girls club, volunteerism, a desirable place to live (you can depend on people), emergency preparation, a group for any cause you are interested in, charity festivals (Stage Coach Days), libraries.

Question #15 – Is there anything else we have not asked about that is important for us to know about in your community?

1. Communication within the community needs to improve, need better coordination of dispensing information to community.

San Gorgonio Memorial Hospital Top 25 Discharges by DRG, 2014

005		
885	Psychoses	2,070
870/871/872	Septicemia	1,683
469/470	Major joint replacement/reattachment lower extremity	1,147
291/292/293	Heart failure & shock	920
190/191/192	Chronic obstructive pulmonary disease	796
193/194/195	Simple pneumonia & Pleurisy	745
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	716
682/683/684	Renal failure	653
308/309/310	Cardiac arrhythmia & conduction disorders	609
377/378/379	G.I. hemorrhage	556
064/065/066	Intercranial hemorrhage or cerebral infarction	537
894-897	Alcohol/drug abuse or dependence	490
246-251	Percutaneous cardiovascular procedures	479
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	456
602/603	Cellulitis	409
689/690	Urinary tract infections	406
637/638/639	Diabetes	398
736-743	Uterine & adnexa procedures	383
313	Chest pain	379
945/946	Rehabilitation	364
417/418/419	Laparoscopic cholecystectomy	353
100/101	Seizures	296
338-343	Appendectomy	281
811/812	Red blood cell disorders	254
286/287	Circulatory disorders	251
TOTAL		15,631

Top DRG Discharges Among San Gorgonio Memorial Hospital Service Area by Race/Ethnicity, 2014

San Gorgonio Memorial Hospital's Top DRG Among Service Area Non-Hispanic White Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	1294
870/871/872	Septicemia	1224
469/470	Major joint replacement/reattachment lower extremity	947
190/191/192	Chronic obstructive pulmonary disease	638
291/292/293	Heart failure & shock	630
193/194/195	Simple pneumonia & Pleurisy	530
308/309/310	Cardiac arrhythmia & conduction disorders	477
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	430
682/683/684	Renal failure	410
377/378/379	G.I. hemorrhage	386
064/065/066	Intercranial hemorrhage or cerebral infarction	375
894-897	Alcohol/drug abuse or dependence	360

246-251	Percutaneous cardiovascular procedures	354
689/690	Urinary tract infections	316
945/946	Rehabilitation	293
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	286
602/603	Cellulitis	283
736-743	Uterine & adnexa procedures	223
313	Chest pain	220
637/638/639	Diabetes	202
189	Pulmonary edema & respiratory failure	184
417/418/419	Laparoscopic cholecystectomy	174
286/287	Circulatory disorders	164
456-460	Spinal fusion	161
100/101	Seizures	157
811/812	Red blood cell disorders	142
338-343	Appendectomy	139
202/203	Bronchitis & asthma	111
Total		11110

San Gorgonio Memorial Hospital's Top DRG Among Service Area Hispanic (Any Race) Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	453
870/871/872	Septicemia	330
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	210
291/292/293	Heart failure & shock	178
417/418/419	Laparoscopic cholecystectomy	159
682/683/684	Renal failure	158
193/194/195	Simple pneumonia & Pleurisy	153
637/638/639	Diabetes	137
469/470	Major joint replacement/reattachment lower extremity	129
736-743	Uterine & adnexa procedures	126
338-343	Appendectomy	123
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	120
377/378/379	G.I. hemorrhage	118
064/065/066	Intercranial hemorrhage or cerebral infarction	111
100/101	Seizures	102
313	Chest pain	100
602/603	Cellulitis	98
190/191/192	Chronic obstructive pulmonary disease	97
308/309/310	Cardiac arrhythmia & conduction disorders	90
894-897	Alcohol/drug abuse or dependence	84
202/203	Bronchitis & asthma	82
246-251	Percutaneous cardiovascular procedures	77
689/690	Urinary tract infections	68
945/946	Rehabilitation	52
811/812	Red blood cell disorders	48
456-460	Spinal fusion	44

286/287	Circulatory disorders	41
189	Pulmonary edema & respiratory failure	41
Total		3529

San Gorgonio Memorial Hospital's Top DRG Among Service Area Non-Hispanic Black Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	212
291/292/293	Heart failure & shock	85
870/871/872	Septicemia	79
682/683/684	Renal failure	62
811/812	Red blood cell disorders	56
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	52
190/191/192	Chronic obstructive pulmonary disease	51
637/638/639	Diabetes	50
193/194/195	Simple pneumonia & Pleurisy	44
313	Chest pain	44
469/470	Major joint replacement/reattachment lower extremity	43
377/378/379	G.I. hemorrhage	33
202/203	Bronchitis & asthma	32
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	30
064/065/066	Intercranial hemorrhage or cerebral infarction	28
100/101	Seizures	28
308/309/310	Cardiac arrhythmia & conduction disorders	26
286/287	Circulatory disorders	25
736-743	Uterine & adnexa procedures	22
894-897	Alcohol/drug abuse or dependence	20
417/418/419	Laparoscopic cholecystectomy	18
602/603	Cellulitis	17
246-251	Percutaneous cardiovascular procedures	14
189	Pulmonary edema & respiratory failure	14
689/690	Urinary tract infections	12
945/946	Rehabilitation	10
456-460	Spinal fusion	9
338-343	Appendectomy	8
Total		1124

San Gorgonio Memorial Hospital's Top DRG Among Service Area Non-Hispanic Asian Residents, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	32
885	Psychoses	29
291/292/293	Heart failure & shock	21
682/683/684	Renal failure	15
193/194/195	Simple pneumonia & Pleurisy	14
377/378/379	G.I. hemorrhage	13
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	13

469/470	Major joint replacement/reattachment lower extremity	10
308/309/310	Cardiac arrhythmia & conduction disorders	10
064/065/066	Intercranial hemorrhage or cerebral infarction	10
313	Chest pain	10
190/191/192	Chronic obstructive pulmonary disease	8
246-251	Percutaneous cardiovascular procedures	8
736-743	Uterine & adnexa procedures	7
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	6
286/287	Circulatory disorders	6
689/690	Urinary tract infections	5
338-343	Appendectomy	5
894-897	Alcohol/drug abuse or dependence	4
602/603	Cellulitis	4
637/638/639	Diabetes	4
811/812	Red blood cell disorders	4
189	Pulmonary edema & respiratory failure	4
202/203	Bronchitis & asthma	4
456-460	Spinal fusion	4
945/946	Rehabilitation	3
417/418/419	Laparoscopic cholecystectomy	3
100/101	Seizures	2
Total		258

San Gorgonio Memorial Hospital's Top DRG Among Service Area Non-Hispanic Native-American Residents, 2014

MSDRG	DRG Description	Discharges
894-897	Alcohol/drug abuse or dependence	15
885	Psychoses	11
870/871/872	Septicemia	9
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	9
682/683/684	Renal failure	6
291/292/293	Heart failure & shock	5
689/690	Urinary tract infections	5
637/638/639	Diabetes	4
736-743	Uterine & adnexa procedures	4
100/101	Seizures	4
286/287	Circulatory disorders	4
064/065/066	Intercranial hemorrhage or cerebral infarction	3
469/470	Major joint replacement/reattachment lower extremity	2
190/191/192	Chronic obstructive pulmonary disease	2
308/309/310	Cardiac arrhythmia & conduction disorders	2
377/378/379	G.I. hemorrhage	2
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	2
602/603	Cellulitis	2
811/812	Red blood cell disorders	2
193/194/195	Simple pneumonia & Pleurisy	1

246-251	Percutaneous cardiovascular procedures	1
313	Chest pain	1
189	Pulmonary edema & respiratory failure	1
202/203	Bronchitis & asthma	1
945/946	Rehabilitation	0
417/418/419	Laparoscopic cholecystectomy	0
338-343	Appendectomy	0
456-460	Spinal fusion	0
Total		98

San Gorgonio Memorial Hospital's Top DRG Among Service Area Non-Hispanic Other/Unknown Race Residents, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	71
246-251	Percutaneous cardiovascular procedures	25
469/470	Major joint replacement/reattachment lower extremity	17
870/871/872	Septicemia	16
064/065/066	Intercranial hemorrhage or cerebral infarction	11
286/287	Circulatory disorders	11
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	10
894-897	Alcohol/drug abuse or dependence	8
338-343	Appendectomy	8
202/203	Bronchitis & asthma	8
308/309/310	Cardiac arrhythmia & conduction disorders	6
602/603	Cellulitis	6
945/946	Rehabilitation	6
193/194/195	Simple pneumonia & Pleurisy	5
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	5
313	Chest pain	5
100/101	Seizures	5
291/292/293	Heart failure & shock	4
377/378/379	G.I. hemorrhage	4
456-460	Spinal fusion	4
682/683/684	Renal failure	3
190/191/192	Chronic obstructive pulmonary disease	2
689/690	Urinary tract infections	2
637/638/639	Diabetes	2
811/812	Red blood cell disorders	2
189	Pulmonary edema & respiratory failure	2
736-743	Uterine & adnexa procedures	1
417/418/419	Laparoscopic cholecystectomy	1
Total		250

Top DRG Discharges Among San Gorgonio Memorial Hospital Service Area by Age Group, 2014

San Gorgonio Memorial Hospital's Top DRG Among Service Area Residents Under 18 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	369
202/203	Bronchitis & asthma	121
338-343	Appendectomy	86
100/101	Seizures	83
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	58
193/194/195	Simple pneumonia & Pleurisy	57
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	55
637/638/639	Diabetes	37
602/603	Cellulitis	24
689/690	Urinary tract infections	14
811/812	Red blood cell disorders	14
456-460	Spinal fusion	13
870/871/872	Septicemia	12
417/418/419	Laparoscopic cholecystectomy	10
189	Pulmonary edema & respiratory failure	8
377/378/379	G.I. hemorrhage	7
894-897	Alcohol/drug abuse or dependence	6
308/309/310	Cardiac arrhythmia & conduction disorders	5
246-251	Percutaneous cardiovascular procedures	4
736-743	Uterine & adnexa procedures	4
682/683/684	Renal failure	3
064/065/066	Intercranial hemorrhage or cerebral infarction	2
313	Chest pain	2
286/287	Circulatory disorders	2
291/292/293	Heart failure & shock	1
190/191/192	Chronic obstructive pulmonary disease	1
945/946	Rehabilitation	1
469/470	Major joint replacement/reattachment lower extremity	0
Total		999

San Gorgonio Memorial Hospital's Top DRG Among Service Area Residents 18-59 Years, 2014

MSDRG	DRG Description	Discharges
885	Psychoses	1478
870/871/872	Septicemia	474
894-897	Alcohol/drug abuse or dependence	391
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	330
736-743	Uterine & adnexa procedures	312
637/638/639	Diabetes	248
682/683/684	Renal failure	233
417/418/419	Laparoscopic cholecystectomy	229
469/470	Major joint replacement/reattachment lower extremity	208
291/292/293	Heart failure & shock	205

190/191/192	Chronic obstructive pulmonary disease	205
313	Chest pain	191
602/603	Cellulitis	190
193/194/195	Simple pneumonia & Pleurisy	177
338-343	Appendectomy	152
377/378/379	G.I. hemorrhage	140
246-251	Percutaneous cardiovascular procedures	136
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	126
100/101	Seizures	126
064/065/066	Intercranial hemorrhage or cerebral infarction	115
308/309/310	Cardiac arrhythmia & conduction disorders	106
286/287	Circulatory disorders	105
689/690	Urinary tract infections	100
456-460	Spinal fusion	98
945/946	Rehabilitation	86
811/812	Red blood cell disorders	86
202/203	Bronchitis & asthma	81
189	Pulmonary edema & respiratory failure	66
Total		6394

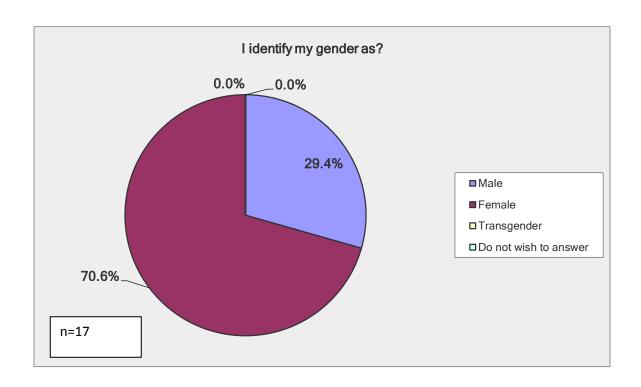
San Gorgonio Memorial Hospital's Top DRG Among Service Area Residents 60 Plus Years, 2014

MSDRG	DRG Description	Discharges
870/871/872	Septicemia	1204
469/470	Major joint replacement/reattachment lower extremity	940
291/292/293	Heart failure & shock	717
190/191/192	Chronic obstructive pulmonary disease	592
193/194/195	Simple pneumonia & Pleurisy	513
308/309/310	Cardiac arrhythmia & conduction disorders	500
064/065/066	Intercranial hemorrhage or cerebral infarction	421
682/683/684	Renal failure	418
377/378/379	G.I. hemorrhage	409
246-251	Percutaneous cardiovascular procedures	339
391/392	Esophagitis, gastroenteritis, misc. digestive disorders	332
689/690	Urinary tract infections	294
945/946	Rehabilitation	277
640/641	Misc. disorders of nutrition, metabolism, fluids/electrolytes	272
885	Psychoses	223
602/603	Cellulitis	196
313	Chest pain	187
189	Pulmonary edema & respiratory failure	172
811/812	Red blood cell disorders	154
286/287	Circulatory disorders	144
417/418/419	Laparoscopic cholecystectomy	116
637/638/639	Diabetes	114
456-460	Spinal fusion	111
894-897	Alcohol/drug abuse or dependence	94

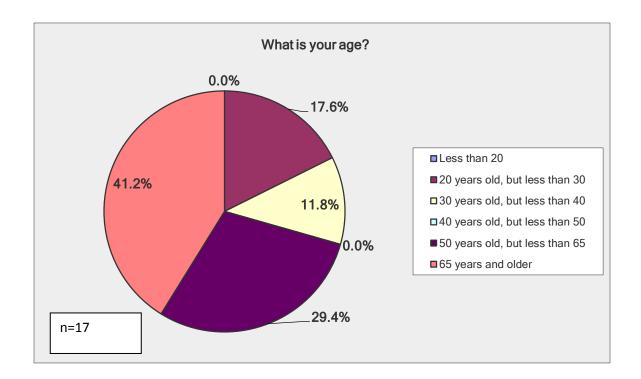
100/101	Seizures	89
736-743	Uterine & adnexa procedures	67
338-343	Appendectomy	45
202/203	Bronchitis & asthma	36
Total		8976

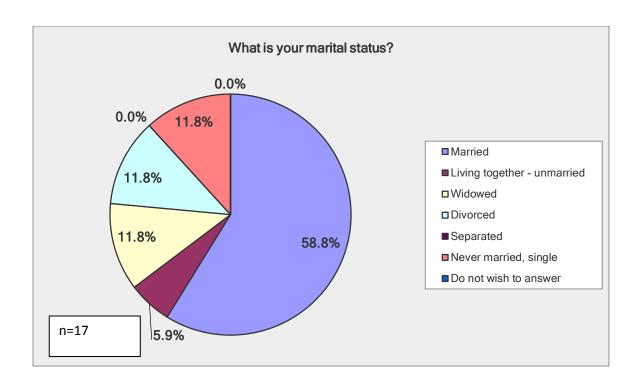
San Gorgonio Memorial Hospital QOLS Service Area Analysis

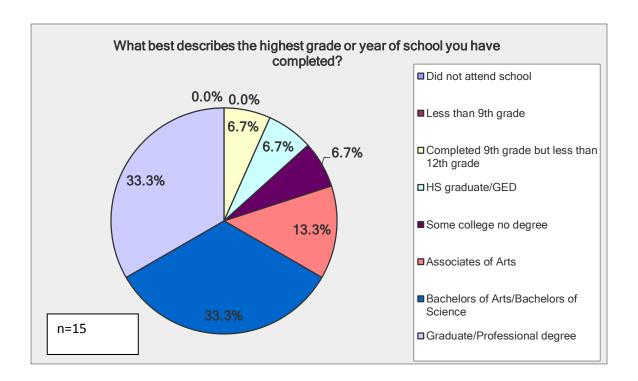
Question 1

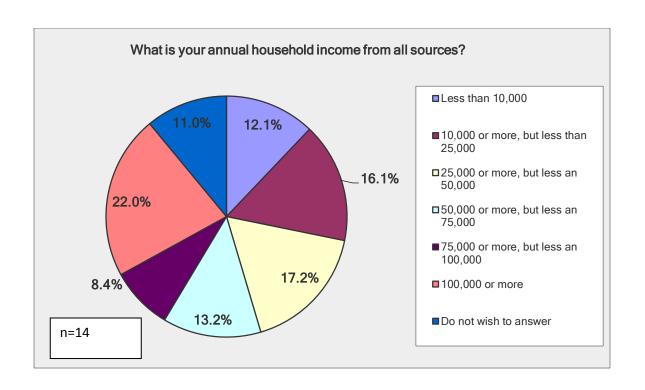


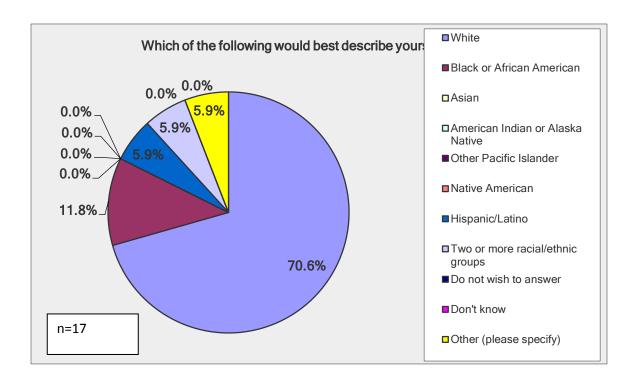
What is your zip code?	
Answer Options	Response Count
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answered question	17

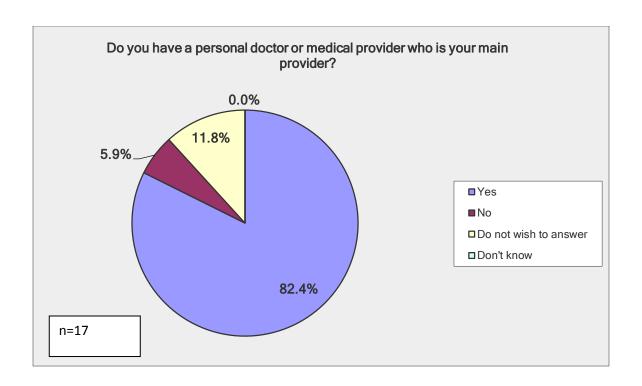


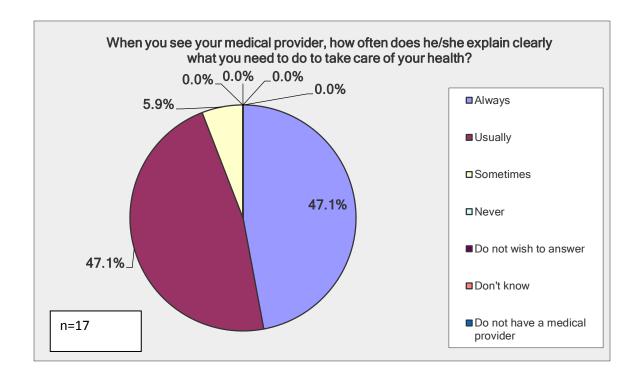


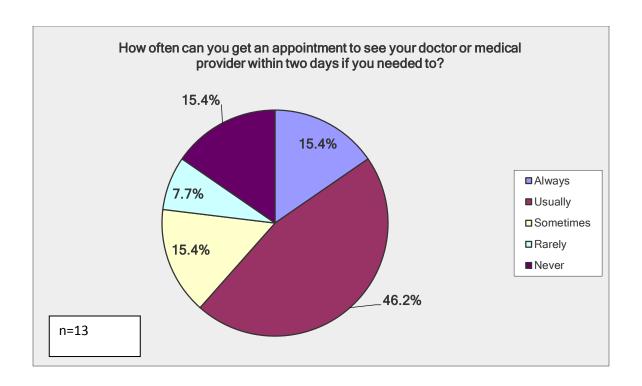


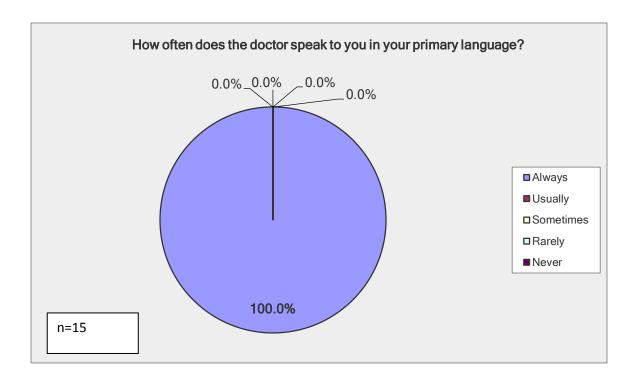


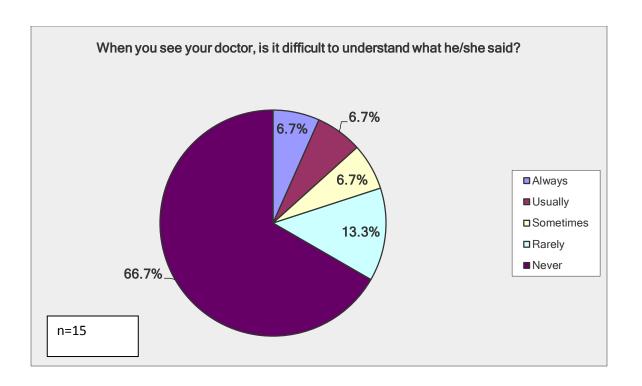


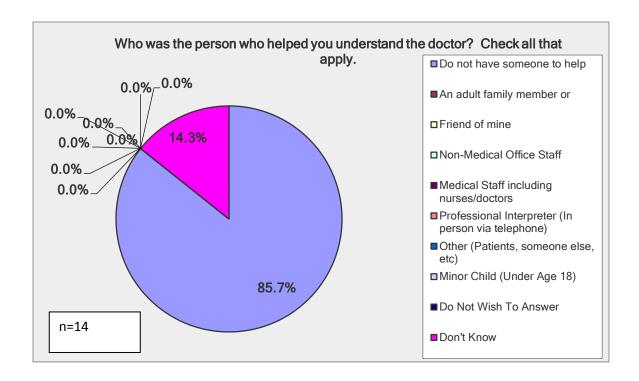


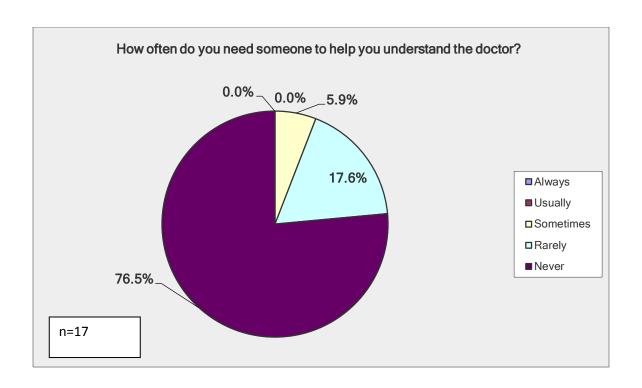


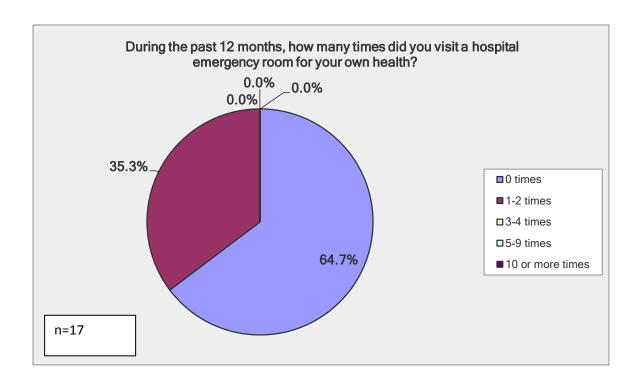


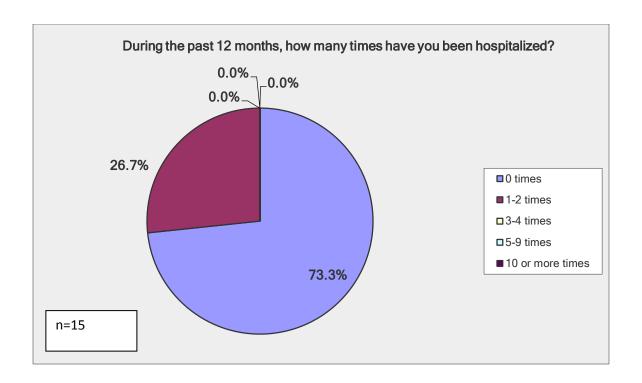


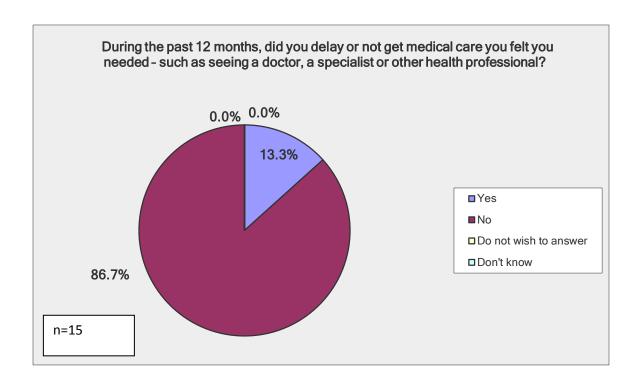


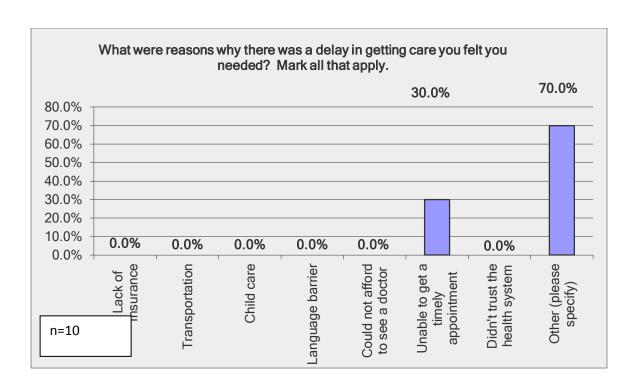


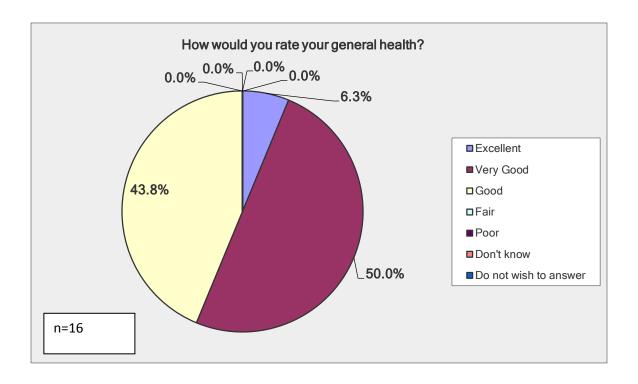


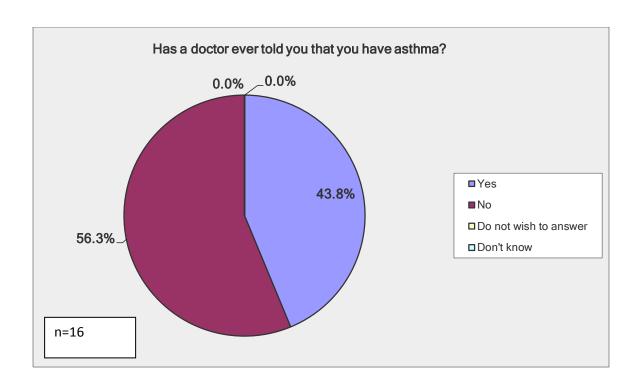


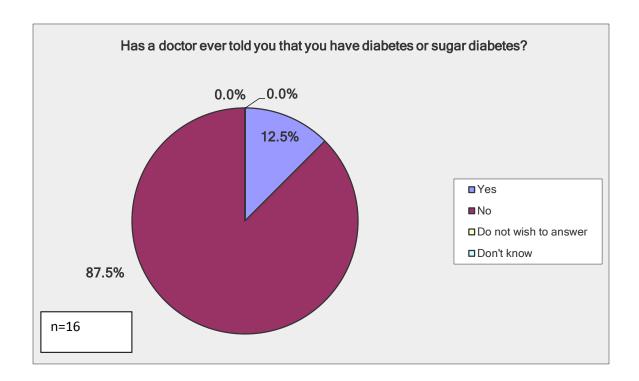


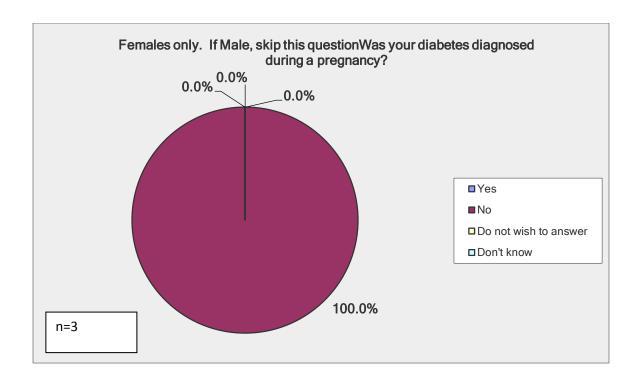


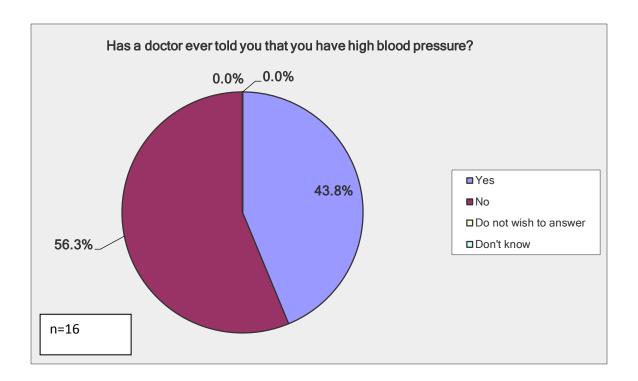


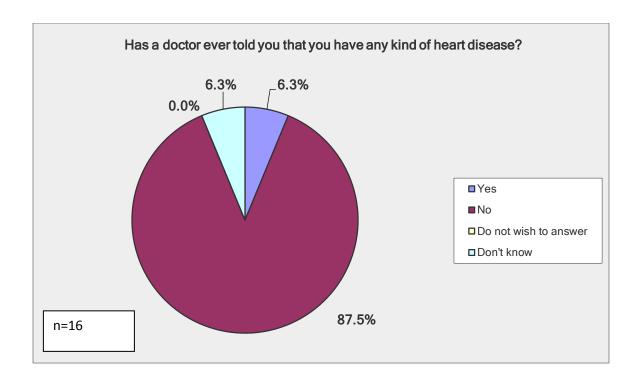


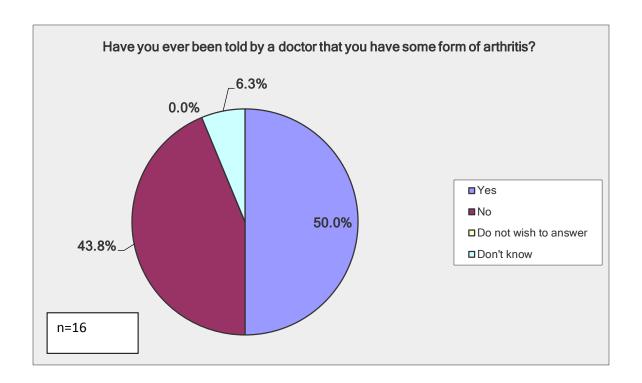


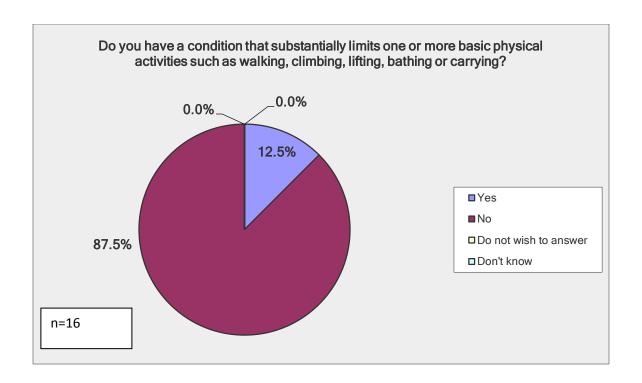


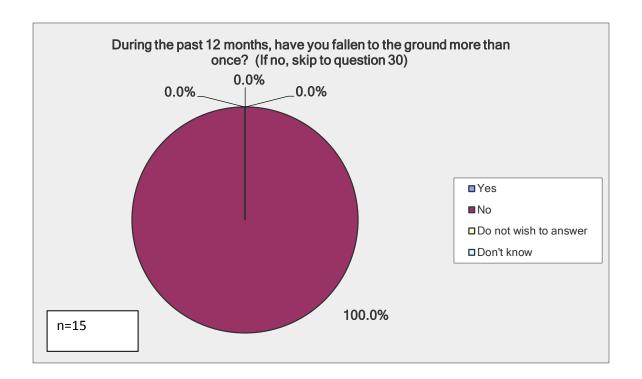


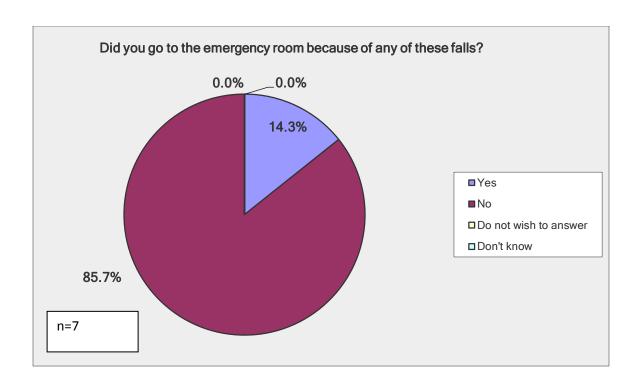


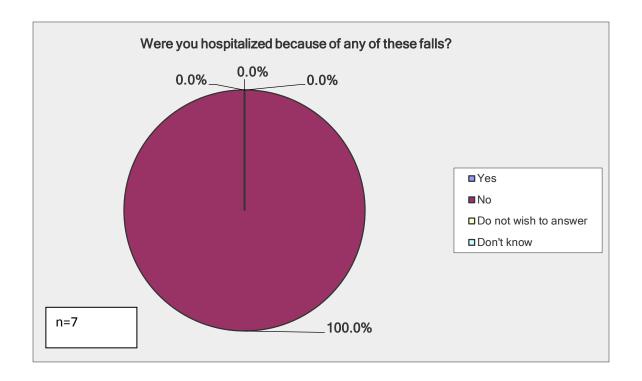


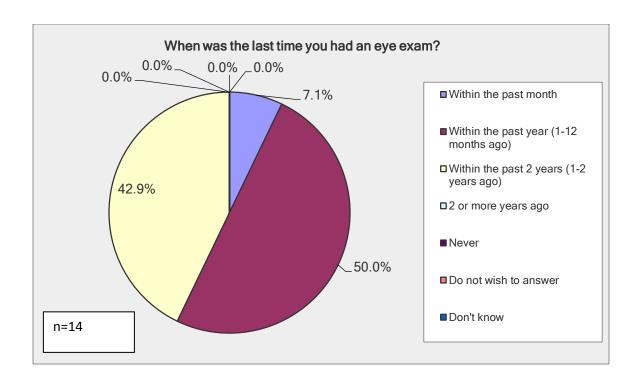


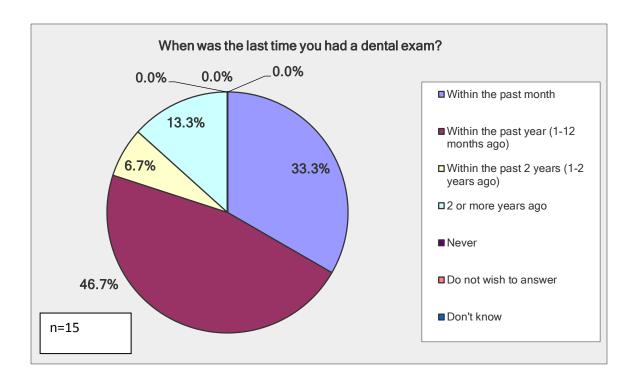


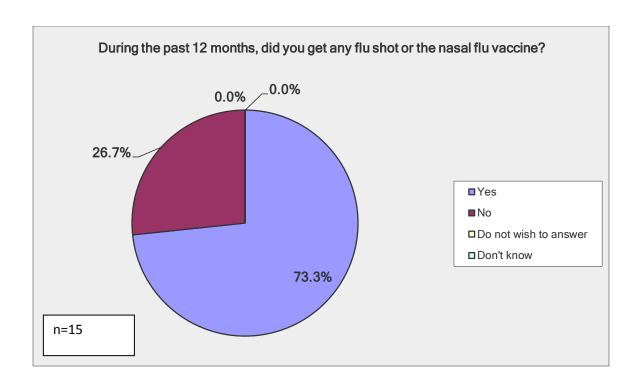


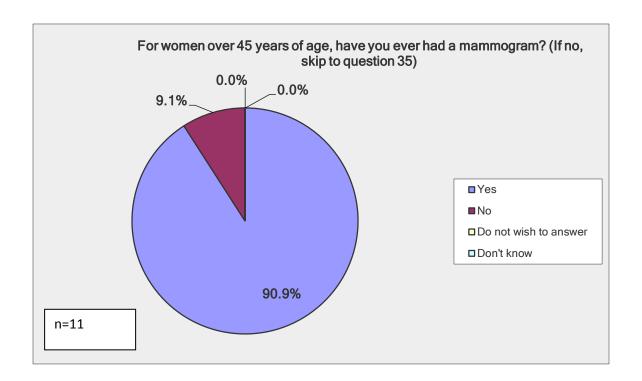




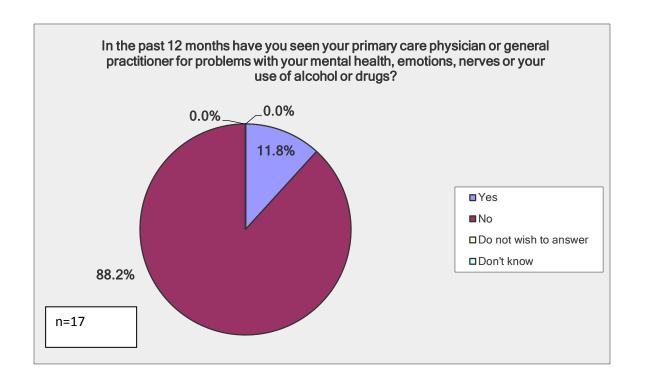


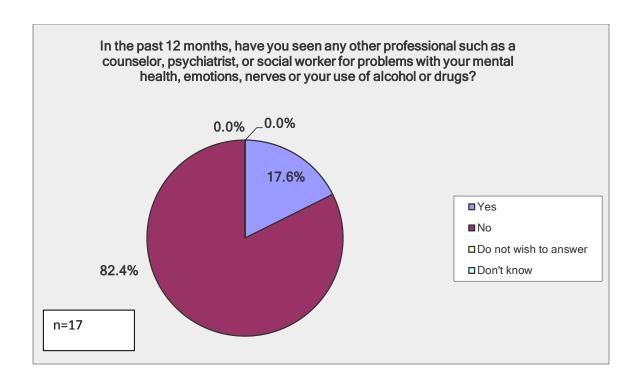




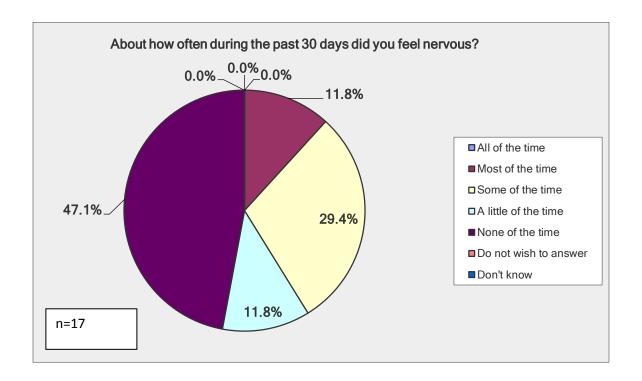


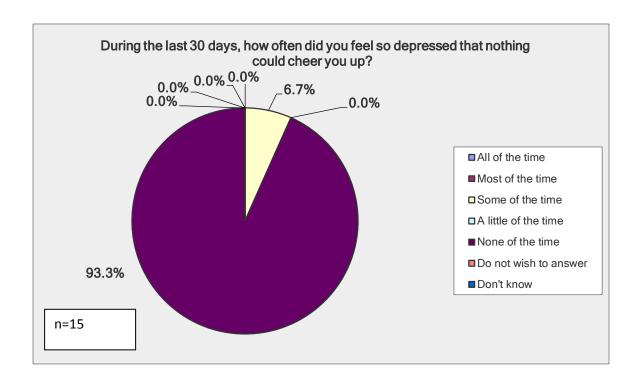
How long ago did you have your most recent mammogram?		
Answer Options Response Count		
12		
answered question 12		

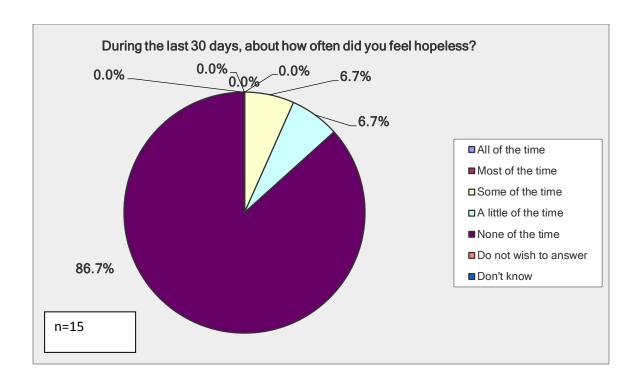


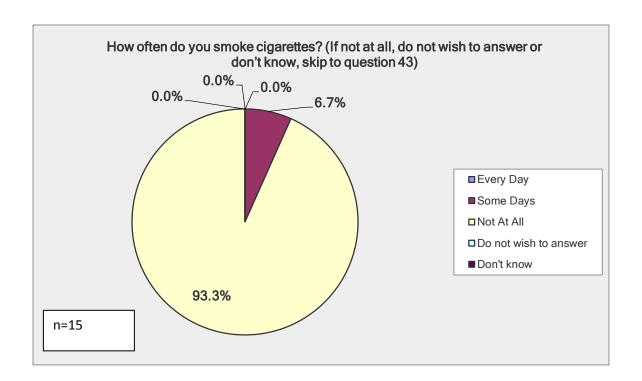


How many days out of the past 30 days were you unable to work or carry out your normal activities because of your feeling nervous, depressed or emotionally stressed?		
Answer Options Response Count		
	13	
answered question	13	









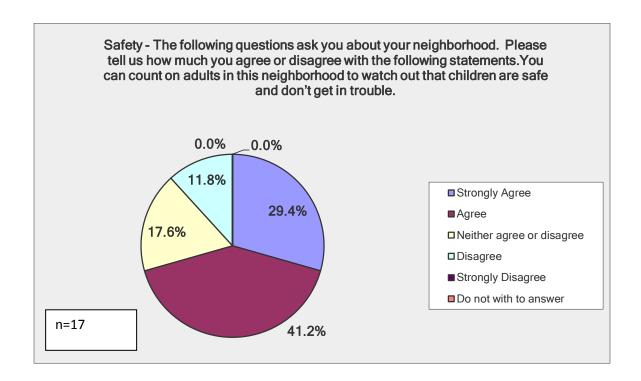
On average, how many cigarettes do you smoke a day?		
Answer Options Respons Count		
	11	
answered question 11		

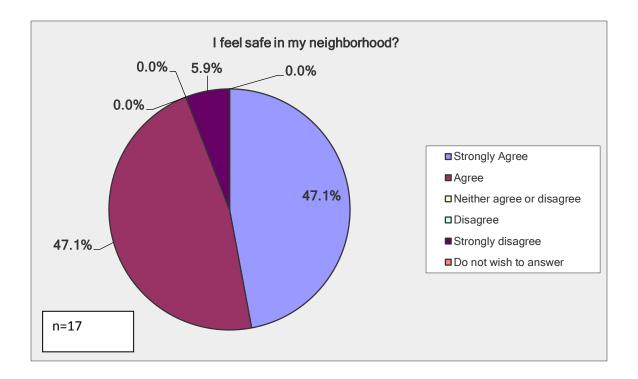
Question 43

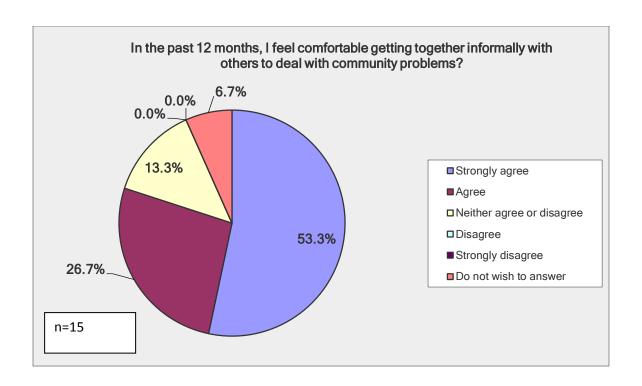
In the past 12 months, about how many times did you have 1 or 2 alcoholic drinks in a single day?		
Answer Options	Response Count	
	13	
answered question	17	

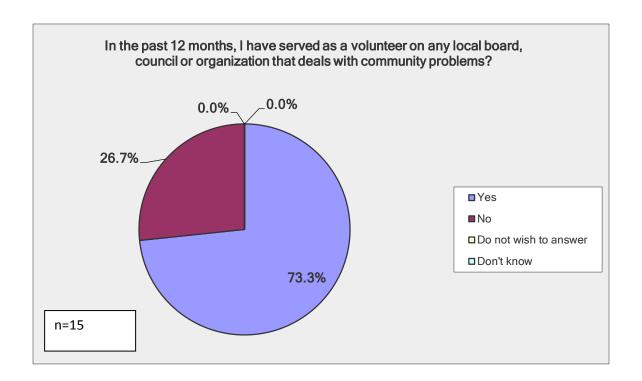
In the past 12 months, about how many times did you have 3 or 4 alcoholic drinks in a single day?		
Answer Options	Response Count	
	15	
answered question	15	

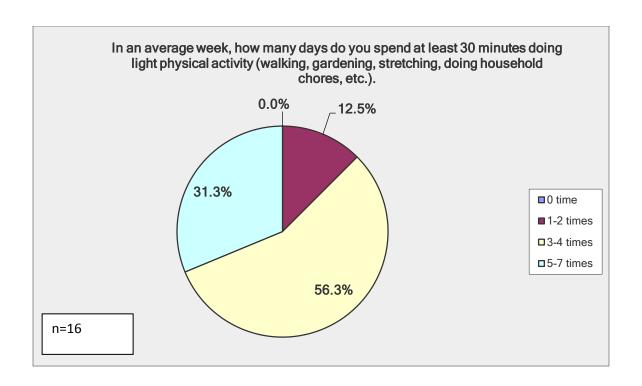
In the past 12 months, about how many times did you have 5 or more alcoholic drinks in a single day?		
Answer Options	Response Count	
	16	
answered question	16	

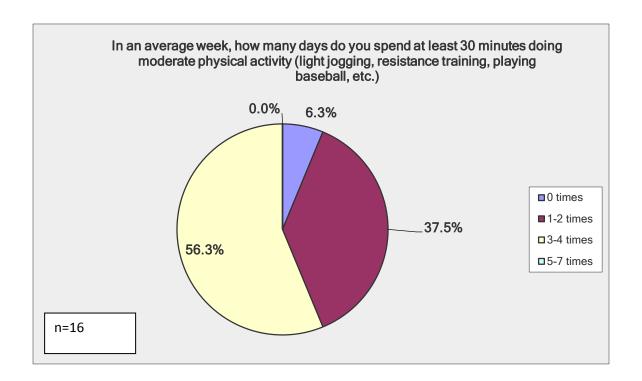


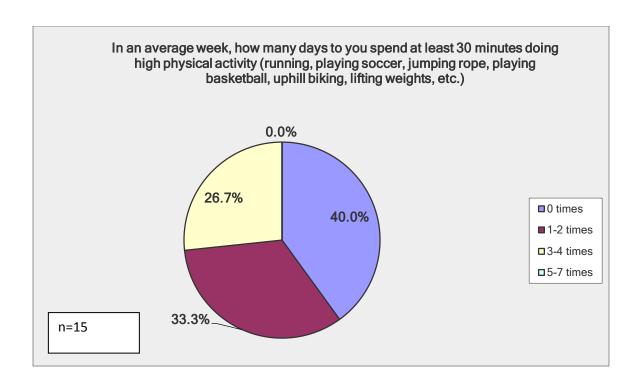












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