



County Profile:
Osceola County 2010

The Health Council of East
Central Florida

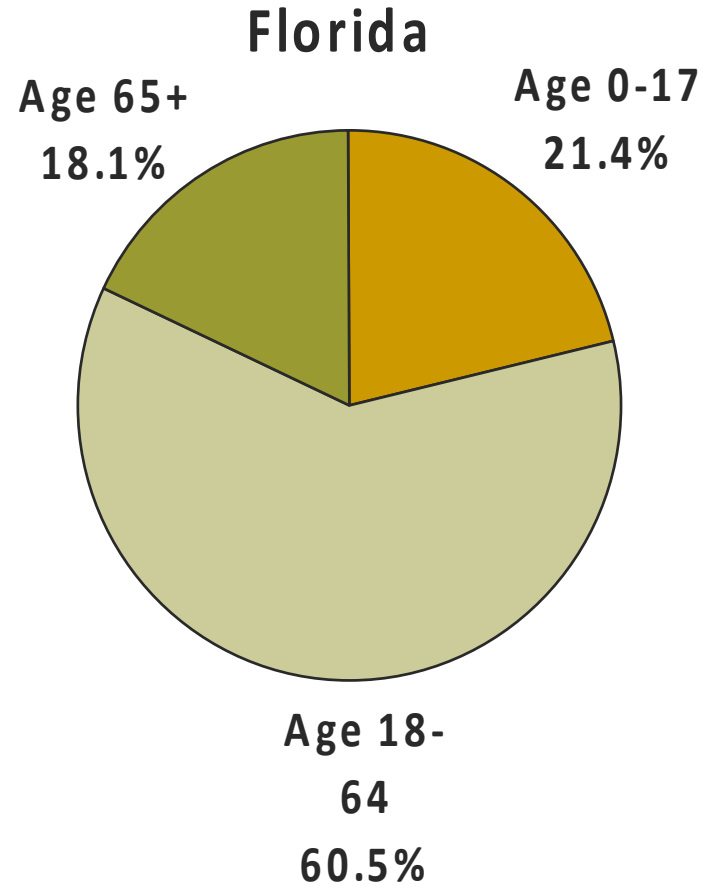
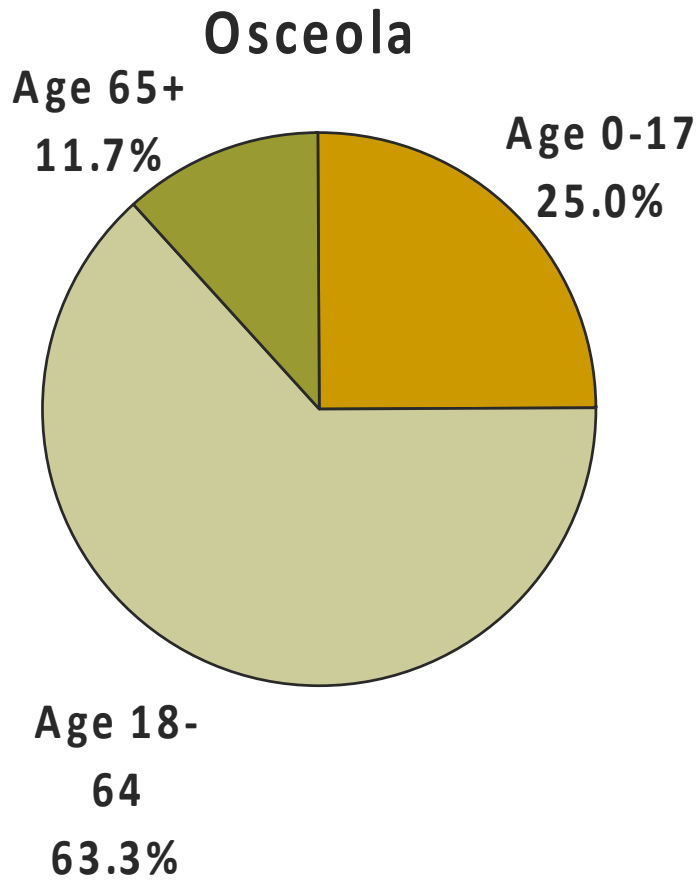
Demographics

Race, Ethnicity, Gender, and Prison Inmates

	Osceola		Florida	
	Number	Percent	Number	Percent
Total Pop	281,215	100	19,021,613	100
Asian	8,155	2.9	437,497	2.3
Black	22,216	7.9	3,005,415	15.8
White	202,475	72.0	14,209,145	74.7
Other	48,369	17.2	1,369,556	7.2
Hispanic	112,205	39.9	4,089,647	21.5
Female	142,295	50.6	9,739,066	51.2
Male	138,920	49.4	9,282,547	48.8
Prison	225	0.1	100,894	0.5

Demographics

Age



Socioeconomics

	Osceola	Florida
Per Capita Income (\$)	20,797	27,128
Median Household Income (\$)	48,305	50,413
Percent of persons below 100% of the FPL (%)	11.1	13.2
Percent of persons below 200% of the FPL (%)	37.9	32.5
Students on Free/Reduced Lunch (%)	63.0	45.9
Unemployment Rate (%)	6.4	6.2
Percent of establishments that employ < 50 employees (%)	95.5	95.6
Percent with High School Diplomas (%)	84.9	85.2
Percent with College Diplomas (%)	26.7	34.2

Sources: ESRI forecast for 2009; 2008 American Community Survey; Florida Department of Education, 2007-2008; Florida Research and Economic Database, 2008; US Census Bureau, County Business Patterns, 2007.

Note: FPL: Federal Poverty Level.

Maternal and Infant Health

	Osceola	Florida
Total Birth Rate (per 1,000)	14.7	12.3
Teen Birth Rate (per 1,000)	23.2	20.4
Repeat Birth Rate (%)	12.6	18.3
Low Birthweight (%)	8.5	8.8
Late or No Prenatal Care (%)	4.5	5.8
Percent of Students Immunized (%)	86.3	89.8
Infant Death Rate (per 1,000)	8.6	7.2

Sources: Florida CHARTS 2008, Florida Department of Health (DOH), Bureau of Vital Statistics; Florida CHARTS 2008, Florida DOH, Bureau of Immunization
 Notes: Total birth rate is per 1,000 total population. Teen birth rate is per 1,000 females age 15–17. Repeat birth rate is percent of females age 15–19. Low birth weight is per 1,000 live births. Late (3rd or no prenatal care is percentage total births. Percent of students immunized is based on the percentage of kindergarten students. Infant death (0-364 days) is per 1,000 live births.

Healthcare Access Federal Designations



	Designation Status	Designation Type
Primary Health Professional Shortage Area	Yes	LIMFP/CHC
Dental Health Professional Shortage Area	Yes	LIMFP/CHC
Mental Health Professional Shortage Area	Yes	CHC
Medically Underserved Area/Population	Yes	WC

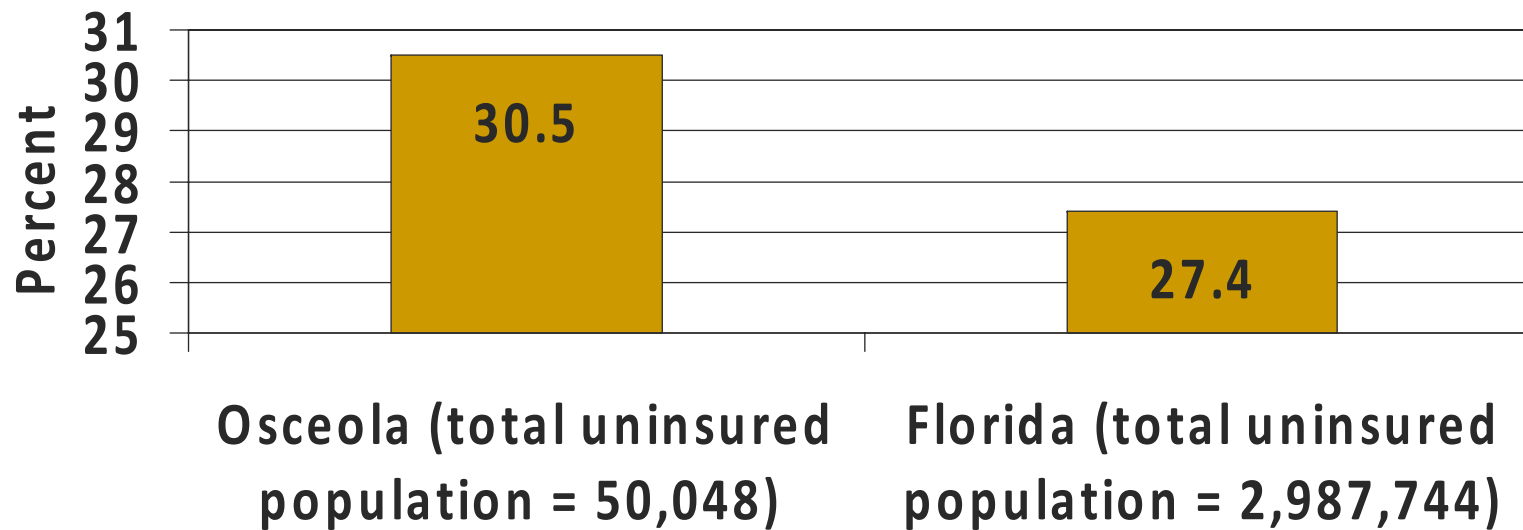
Source: US Department of Health and Human Services, Bureau of Health Professions, 2009

Note: Periodically, the US Dept. of Health and Human Services evaluates whether a county or a sub-population within a county is a primary, dental or mental health professional shortage area (HPSA) or medically underserved area/population (MUA/MUP). The designation status informs whether or not there is a designation and the designation type indicates the population or area that is designated. LIMFP: Low Income/Migrant Farmworker Population; LIP: Low Income Population; WC: Whole County; CI: Correctional Institution; CHC: Community Health Center

Healthcare Access

Uninsured

Non-Elderly (age 0-64) Uninsured



Leading Causes of Death

Cause	Osceola			Florida
	Number	Crude Rate	Age adjusted Death Rate	Age adjusted Death Rate
All Causes	1,553	564.9	649.8	668.8
Heart Disease	386	140.4	164.6	155.0
Cancer	344	125.1	140.8	161.2
Respiratory Disease	115	41.8	50.4	38.0
All Unintentional Injuries	90	32.7	33.8	44.2
Motor Vehicle Crashes	49	17.8	17.6	15.9
Stroke	81	29.5	35.7	31.3
Diabetes	56	20.4	23.5	20.3
Alzheimer's Disease	32	11.6	14.7	15.9

Source: FloridaCHARTS 2008, State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics.

Notes: Crude rates and age-adjusted death rates (AADR) are per 100,000 population. Crude rates are the actual deaths per 100,000 persons in the population. AADR are calculated indicator rates that remove the effects of differences in age-group distributions and allow rates to be compared between different populations that might have very different age-distributions that could skew crude rate comparisons. The AADRs presented here have been adjusted to the 2000 US standard population according to guidelines of the Centers for Disease Control and the National Center for Health Statistics. Motor vehicle crashes (MVC) are presented as a subset of all unintentional injuries deaths as MVC deaths customarily account for the majority of all unintentional injury deaths.

Hospitalizations

- Most utilized hospitals
 - Osceola Regional Medical Center
 - 16,578 resident discharges
 - Florida Hospital Celebration Health
 - 11,695 resident discharges
 - Saint Cloud Regional Medical Center
 - 4,352 resident discharges

Avoidable Hospitalizations

	Osceola	Florida
Hospitalization Discharge Rate (per 1,000)	130.22	134.44
Potentially Preventable Discharge Rate (per 1,000)	8.77	14.06
Potentially Preventable Discharge Rate - Perforated Appendicitis (per 1,000)	228.26	266.75
Potentially Preventable Discharge Rate - Low Birth Weight (per 1,000)	36.01	61.34
Avoidable Emergency Department Visits (%)	82.2	82.5

Source: AHCA Discharge Data, April 2008 through March 2009; AHCA Discharge Data, 2008, retrieved from the Broward Regional Health Planning Council Hospital Inpatient & Emergency Department Analytical System

Notes: Population data for hospitalization discharge rate is from 2008 American Community Survey; Prevention Quality Indicators (PQIs) are conditions for which good outpatient care can potentially prevent the need for hospitalization or for which early intervention can prevent complications or more severe disease. PQIs in this report include all non-maternal discharges for the following diagnosis codes: diabetes short-term and long-term complications, chronic obstructive pulmonary disorder, hypertension, congestive heart failure, dehydration, bacteria pneumonia, urinary tract infection, angina admission without procedure, uncontrolled diabetes, adult asthma, and lower-extremity amputation among patients with diabetes. Rates are determined by the population of the County. Perforated appendicitis includes discharges with ICD-9-CM diagnosis code for perforations or abscesses of appendix in any field. Rates are determined using all non-maternal discharges of age 18 years and older in the County with diagnosis code for appendicitis in any field. Low birth weight includes the number of births with ICD-9-CM diagnosis code for less than 2500 grams in any field. Rates are determined by the population of all Newborn/Neonate in-hospital live birth. Avoidable emergency department visits include cases that are non-emergent; emergent but treatable by primary care; and those that require emergency department care, but were preventable or avoidable.