

2016
Southwest
Colorado
Index

A healthy community offers high quality healthcare that is focused on prevention, provides a continuum of primary and emergency care, and includes alternative approaches.

Healthcare



Photo provided by Southwestern Colorado AHEC

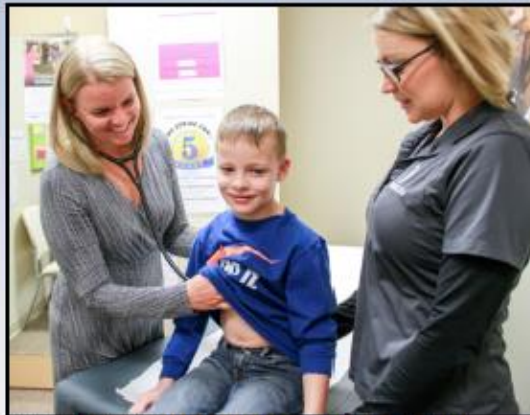


Photo provided by Mercy Regional Medical Center



Diana Crea, La Plata Integrated Healthcare
Photo provided by Axis Health System



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HEALTHCARE

Community Vision – To offer high quality healthcare that is focused on prevention, provides a continuum of primary and emergency care, and includes alternative approaches.

Healthcare is just as important and vital to a community’s infrastructure as transportation systems, utilities and housing. Companies wishing to move or relocate to a region carefully evaluate the cost, quality and availability of healthcare. In addition, economic growth is significantly less likely without a strong healthcare sector. One primary care provider, affiliated with a local hospital, creates 24.2 local jobs and \$1.3 million of revenue from direct and indirect spending.¹

Major obstacles to seeking primary care include lack of insurance or payer source, provider access issues, limited transportation resources and often real and daunting challenges in navigating complex healthcare systems. Chronic lack of access, resulting in late diagnosis, often leads to high rates of untreated and preventable chronic illnesses such as hypertension, diabetes, obesity and cardiovascular disease. These conditions tend to be aggravated by other poor health habits, such as inadequate physical activity, poor nutrition, smoking, depression, anxiety and/or substance use.²

Since the last Index report on Healthcare (2008) there have been many changes in the way that healthcare is offered. One of these changes is the introduction of **Integrated Care** to the region, bringing multiple healthcare disciplines (often including primary, behavioral and oral healthcare) into a cohesive healthcare team that provides a broader care and treatment perspective to the patient to improve health outcomes and increase patient engagement.

Integrating care is believed to be a more effective approach to improving a patient’s overall health and well-being. Colorado is identified as a national leader in developing integrated care models and delivery systems.

This report, produced by the Region 9 Economic Development District (Region 9) with the assistance of local healthcare providers, looks at a variety of data that impact residents’ health ranging from coverage, access, pharmacies, age, disabilities and leading causes of death. Together, these indicators provide a picture of important healthcare data and trends in southwest Colorado, identifying areas that need community-wide attention.

¹ National Center for the Analysis of Healthcare, 2016

² <http://www.integration.samhsa.gov/resource/what-is-integrated-care>

Key Findings

We examined specific areas of healthcare to give an overall picture of how southwest Colorado provides for and supports its residents.

- **Insurance Coverage:** The number of **Uninsured** Coloradans has decreased across Region 9 by an average of 8%. Marked decreases by county include: Archuleta uninsured numbers decreased (7%); Dolores (8%); La Plata (8%); and Montezuma (7%). Only San Juan experienced an increase in uninsured of 2%.
 - ✓ Despite improvements, the estimated percentage of uninsured individuals in southwest Colorado exceeds the estimated state percentage (9% in 2015) for every county from 2013 to 2015.
- **Oral Health:** Visits have increased with eleven dentists accepting Medicaid for the five counties in Region 9 in 2015, up from 2007 when only six dentists in the region accepted Medicaid, which was an improvement over 1997 when there was only 1.
 - ✓ The Center for Disease Control and Prevention (CDC) suggests strong growth in access to oral health care in southwest Colorado is a result of Medicaid recipients now being eligible for a new oral health benefit.
- **Child welfare and maternal care:** The percentage of women receiving prenatal care starting after the first trimester, averaging 30%, remains above the state average of 21%. In this corresponding time frame, there has been a decrease of numbers of both teen births and births to unwed mothers.
- **Behavioral Health:** With the introduction of integrated care in the region and behavioral health services available as part of the continuum of primary care, a true year over year comparison for behavioral health services provided is not available.
 - ✓ Data available currently associated with behavioral health patients seen in traditional community mental health/ substance use settings indicate a decrease in patients seen from 5,581 in 2006 to 4,018 in 2015.
 - ✓ Emergency assessments increased by approximately 49%, from 557 individuals in 2007 to 832 in 2015 in part due to an expansion of crisis response services.
 - ✓ Mobile crisis response teams were introduced in the Region 9 area in 2015, improving access to crisis services available throughout Region 9.

Percentage of Uninsured

A large barrier to healthcare access is not having insurance. Uninsured residents are much more likely to delay needed care because of cost, and thus experience more serious health problems that are often left untreated until they are severely impacting the person. This often results in increased indirect economic impact to the community associated with significantly higher incidences of untreated chronic conditions that impair their health status that affects the stability of the local workforce. Additionally, the uninsured also are more likely to use the local hospital Emergency Room (ER) as their health provider instead of establishing routine care at a primary care clinic.

According to the Colorado Health Institute’s 2015 report on insurance coverage, the percentage of uninsured Coloradans has fallen to 9%. This is an improvement over 2013, when 14% of residents did not have health insurance.

Those most at risk for being uninsured are residents living in poverty which is 38% of **all** uninsured, up from 36% in 2013. While individual insurance coverage is widely available under the Affordable Care Act, some residents report they are daunted by the many plan choices — nearly 500 plans on the individual market in 2015.

Across Colorado, the rate of uninsured Hispanics continues to be the most disproportionately uninsured group – representing 37% of all uninsured and 20% of the population. The African American, Asian, American Indian and other Coloradans demographic had an uninsured rate of 5% in 2015, a noticeable drop from 13% in 2013.

In Region 9 counties, the estimated percentage of uninsured individuals has exceeded the estimated state percentage for every county since 2000. That said, there is noticeable improvement across most of the region, with the exception of San Juan County.

Estimated Percentage of Uninsured by County						
	Archuleta	Dolores	La Plata	Montezuma	San Juan	Colorado
2000	21%	19%	19%	20%	27%	17%
2013	19%	21%	19%	23%	26%	14%
2015	12%	13%	11%	16%	28%	9%

Sources: 2013 and 2015 Enroll America, <http://www.enrollamerica.org/research-maps/>

Data for 2000 for all counties except La Plata was from www.coloradohealthinstitute.org.

2000 La Plata data came from www.chaclaplata.org

Hospital Emergency Departments

These facilities provide medical care 24/7, 365 days a year. Each of the four hospitals in Region 9 have emergency rooms (ERs): Pagosa Springs Medical Center (Archuleta County); Animas Surgical, Durango (La Plata County); Mercy Medical Center, Durango (La Plata County); and, Southwest Memorial Hospital, Cortez (Montezuma County).

In the case of trauma capabilities, there is a statewide system (Level I, II, III, IV) of specifying hospitals' trauma capabilities based on certain criteria.³ Each of the hospitals identified has a different trauma capability defined by Colorado State Law. Trauma center levels across the United States are identified in two fashions – A designation process and a verification process.

The different levels (i.e. Level I, II, III, IV or V) refer to the kinds of resources available in a trauma center and the number of patients admitted yearly. These are categories that define national standards for trauma care in hospitals. Categorization is unique to both Adult and Pediatric facilities.

Mercy Regional Medical Center is an 82-bed acute care treatment facility with a Level III trauma certification.⁴ A Level III trauma center has demonstrated an ability to provide prompt assessment, resuscitation, surgery, intensive care and stabilization of injured patients and emergency operations.

Pagosa Springs Medical Center⁵ and Southwest Memorial Hospital⁶ in Cortez are critical access hospitals with 25 beds or less. A critical access hospital (CAH) is: located more than a 35-mile drive from any hospital or other CAH; or located more than a 15-mile drive from any hospital or other CAH in an area with mountainous terrain or only secondary roads. They furnish 24-hour emergency care services 7 days a week, using either on-site or on-call staff, with specific on-site response time frames for on-call staff. They maintain no more than 25 inpatient beds that may also be used for swing bed services. A CAH may also operate a distinctive part rehabilitation and/or psychiatric unit, each with up to 10 beds.⁷

Both hospitals have a Level IV Trauma Center, which means they have demonstrated an ability to provide advanced trauma life support (ATLS) prior to transfer of patients to a higher level

³ <http://www.amtrauma.org/?page=traumalevels>

⁴ <https://www.mercydurango.org/MDU/Specialties/Emergency-Medicine/>

⁵ <http://pagosaspringsmedicalcenter.org/departments-physicians/ems/>

⁶ <http://WWW.SOUTHWESTTRAININGCENTER.ORG>

⁷ <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/CritAccessHospfctsh.pdf>

trauma center. It provides evaluation, stabilization, and diagnostic capabilities for injured patients.

Pagosa Springs Medical Center and Southwest Memorial Hospital own and operate ambulance services that serve the community, provide continuing education, participate in county wide drills and emergency preparedness, and have state accredited training centers for EMS education.

Animas Surgical Hospital (ASH) is also licensed as a Level IV Trauma Center. ASH provides surgeries, 24/7 short-wait emergency care, diagnostic imaging, occupational medicine, and internal medicine.⁸

It is estimated that 20.5% of patients seen at local emergency rooms lack insurance. Without an adequate primary care infrastructure and the numbers of uninsured, ERs are the source for many citizens' medical care – the costliest and least preventive type of health care.

Pharmacies

There are a total of 19 pharmacies in the region. Most pharmacies are in Durango (La Plata County) and Cortez (Montezuma County), the population centers of the region. There are none in either San Juan or Dolores Counties. The people in those counties must drive long distances to receive their prescriptions. For example, an 80 mile round trip from Dove Creek to Cortez, and a 96 mile round trip from Silverton to Durango.

Available Pharmacies						
Year	Archuleta	Dolores	La Plata	Montezuma	San Juan	Total
2001	2	0	8	6	0	16
2007	2	0	9	5	0	16
2015	4	0	9	6	0	19

Source: Internet search

⁸ <http://www.animassurgical.com/>

Safety Net Clinics

Safety net clinics provide affordable and accessible healthcare in medically underserved communities. Whether a Community Health Center (FQHC), a stand-alone clinic, a Rural Health Clinic (RHC), or a School Based Health Center (SBHC), these facilities are designed to increase patients access to healthcare, providing care to the uninsured, under-insured and those covered by public insurance plans like Medicare, Medicaid, or Colorado’s Children’s Health Insurance Program (CHP+).

There are a total of 15 safety net clinics in the region, up from six in 2007. This increase demonstrates the demand for these services.

Patients Seen at Safety Net Clinics		
	2007	2015
Archuleta - Pagosa Springs Medical Center (RHC)	*	16,753
Dolores - Dove Creek Community Health Center (FQHC)	1,550	1,478
La Plata		
Axis - Durango High School School-Based Health Center	175	532
Axis - La Plata Integrated Healthcare (FQHC)	1,086	2,386
Axis - Florida Mesa Elementary School - Based Health Center	*	152
Mercy Family Medicine (RHC)	*	*
Montezuma		
Axis - Cortez Integrated Healthcare (FQHC)	*	3,118
Dolores Medical Center (RHC)	*	*
Southwest Medical Group, Elm Street (RHC)	*	9,237
Southwest Medical Group, Chesnut Street (RHC)	*	5,663
Southwest Medical Group, Walk-in Care (RHC)	*	8,293
Southwest Medical Group, Mancos Valley (RHC)	*	5,490
Southwest Medical Group, Market Street (RHC)	*	5,351
Southwest School Based Health Center, Montezuma-Cortez High School (RHC)	*	261
Southwest Open School- Based Health Center	165	*
Valley Wide Health Systems (FQHC)	2,491	**

Sources: Individual Clinics

* Data not Available

**Closed in 2007

Oral Healthcare

Poor oral health can cause needless suffering, complications that can devastate overall health and well-being, and raise medical care costs that diminish quality of life (Office of the Surgeon General, 2000). Untreated tooth decay causes pain and infections that may lead to problems such as difficulties eating, speaking, playing and learning.

Tooth decay is typically measured in third graders because it is important to catch early before more serious and costly problems develop, increasing the need for and cost of medical services. Current data measuring 3rd grader tooth decay was not available for this report, but the Colorado Center for Health and Environmental Data expects this information to be available after the publication of this report (Fall of 2016).⁹

While there are many private providers in the region, there are fewer alternatives for low income households that use Medicaid or are uninsured.

Number of Dentists Accepting Medicaid					
Year	Archuleta	Dolores	La Plata	Montezuma	San Juan
1997	One for all five counties				
2007	2	1	2	1	0
2015	1	0	7	3	0

In 2015, eleven dentists accepted Medicaid for the five counties in Region 9. This number represents a significant improvement from 2007 when only six dentists in the region accepted this public insurance, and only one for the entire region in 1997. However, some dental practices limit the number of Medicaid patients that they will accept at any one time.

San Juan Basin Health Dental Clinic (SJBHDC), the public health department serving residents of Archuleta, La Plata and San Juan Counties provided oral healthcare services until its planned transition to AXIS Health System in June 2016. From July 2014 thru March 2015, the SJBHDC clinic saw a total of 1,950 people - 833 children, and 1,117 adults, of whom, all but about 300 were covered by Medicaid.

San Juan Basin Dental Clinic and Smilemakers Dental Health Services										
Year	Archuleta		Dolores		La Plata		Montezuma		San Juan	
	Patients	Visits	Patients	Visits	Patients	Visits	Patients	Visits	Patients	Visits
2003	18	19	5	6	259	289	419	537	15	22
2005	31	31	1	1	281	315	645	823	1	1
2007	110	155	7	12	355	467	653	1068	38	52
2015	San Juan Basin Health Dental Clinic				1,950	Montezuma County Health Department				2,425

Source: San Juan Basin Health Department
<http://sjbhd.org/>

⁹ www.cdphe.state.co.us/hs/vs/

In July 2016, Axis Health System opened its Oral Health Clinic in La Plata to help cover some of the oral health need and eventually expand the oral health capacity for the community for those who have Medicaid or are uninsured /underinsured.

Residents of Montezuma and Dolores Counties have affordable access to oral healthcare services through the Montezuma County Public Health Department (MCPHD). From June 2015 through June 2016 MCPHD saw 2,425 patients, 537 of these were new patients.

This table shows the percentage of the total county population in the region who had visited a dentist from 2012 – 2015. The number of visits for Region 9 comes close to meeting statewide figures. However; residents in La Plata County with no dental insurance exceed the state average.

Dental Visits (2012-2015)				
	La Plata	Archuleta	Region	State
Visit within last year	58%	22%	57%	65%
Visit within 2+ years	28%	34%	28%	23%
% no dental insurance	49%	n/a	52%	39%

source: CDC/CDPHE Behavioral Risk Factor Survey
<http://www.cdc.gov/brfss/>

Estimates of the impact of the new oral health benefit for Medicaid patients was predicted for the years 2012, 2014, and 2016. These estimates were produced by CDC/CDPHE’s Behavioral

Medicaid Enrollees with Dental Benefits Estimates for 2012, 2014, and 2016			
County	2012	2014	2016
Archuleta	807	1,099	2,080
La Plata	2,556	3,754	7,373
Montezuma	2,360	3,400	5,772

Risk Factor Survey (Age 18+). Impact of benefit is currently restricted by providers accepting this form of payment. Future year’s data will provide better impact assessment of this benefit.

source: CDC/CDPHE Behavioral Risk Factor Survey
<http://www.cdc.gov/brfss/>
<http://www.chd.dphe.state.co.us/cohid/brfssdata.htm>

Behavioral Healthcare

A wide range of behavioral healthcare (substance use and mental health) services are available in the region through Axis Health System (AHS). AHS provides a wide variety of care across nine service locations throughout southwest Colorado, including those specifically dedicated to providing behavioral healthcare and those providing integrated care. Behavioral healthcare services are available at AHS’ Columbine Behavioral Healthcare Clinic, Crossroads Acute Treatment Unit and Detox facility, all located in Durango as well as at the Pagosa Springs Behavioral Healthcare clinic location.

Mental Health Clients Served			
	2006	2012	2015
Archuleta	566	397	419
La Plata / San Juan	3,505	1,995	2,196
Montezuma / Dolores	1,079	1,251	1,162
Other Colorado	79	52	41
Out of State	295	157	171
Unknown	57	61	29
Total	5,581	3,913	4,018

Source: Axis Health System (AHS)

Note: AHS also provides behavioral healthcare as an essential component of its integrated care model at La Plata Integrated Healthcare, Cortez Integrated Healthcare, Durango High School Based Health Center and Florida Mesa School Based Health Center.

The Crossroads facility opened in 2006 in Durango as the hub for regional crisis operations, a psychiatric stabilization unit and Detox services. The Acute Treatment Unit at Crossroads offers short term psychiatric stabilization and placement. In 2007, there were 200 admissions to Crossroads and in 2015, the number more than doubled to 435 admissions.

Crossroads Acute Treatment Unit Admissions		
	2007	2015
Archuleta	15	22
La Plata / San Juan	135	320
Montezuma / Dolores	42	61
Other	2	11
Out of State	6	16
Unknown	0	5
Total	200	435

Source: Axis Health System (AHS)

Emergency Assessments Performed		
	2007	2015
Archuleta	45	53
La Plata / San Juan	395	481
Montezuma / Dolores	69	225
Other	28	10
Out of State	17	49
Unknown	3	14
Total	557	832

Source: Axis Health System (AHS)

AHS also conducted 832 emergency assessments through its Crisis teams in 2015, up from 557 in 2007 when last reported by Region 9. Such assessments help determine the patient’s treatment needs – on the spot, or referred to another facility.

The AHS Detox is a facility staffed to manage individuals intoxicated with drugs and/or alcohol. This resource is available 24x7, 365 days a year and can provide referrals to substance use treatment or further crisis evaluation. Funding for the Detox includes local county, municipal and other partner support. The Detox Facility is considered to be an important component of healthcare in the region.

Number of Suicide Deaths						
Year	Archuleta	Dolores	La Plata	Montezuma	San Juan	Statewide
2008	*	*	9	7	*	803
2009	9	*	9	6	*	941
2010	*	*	10	9	*	865
2011	*	*	9	7	*	913
2012	3	*	16	9	*	1,052
2013	5	*	9	11	*	1,007
2014	3	*	9	9	*	1,083
All	20	*	71	58	*	6,664

*Data not available

Source: Colorado Department of Public Health and Environment

Other drug rehabilitation programs located in Durango include: the Pagosa Recovery Center PC; Pathfinder Clinic; Inc.; and the Southern Rockies Abuse Treatment Services. Clarity Counseling PC is a drug abuse treatment program in the Town of Dolores in Montezuma County. Mental health and substance abuse are strongly tied with suicide, one of the leading causes of death in the region.

Another innovation in the Region 9 counties is the Crisis Intervention Team (CIT) of Southwest Colorado. CIT provides police officers with tools to identify persons with mental health or substance use disorders to prevent and de-escalate crisis situations. CIT is the result of community partnerships with law enforcement, behavioral health professionals, behavioral health consumers, families and advocates. CIT equips law enforcement officers to prevent or de-escalate volatile crisis situations that may threaten both officer and citizens.

Durango P.D. Crisis Intervention Statistics			
Categories	2012	2013	2015
CIT Calls Handled	172	120	428
CIT Arrests	5	4	7
Transported to Mercy	57	68	84
Suicide Attempts	5	19	11

Since 2003, the CIT training program has graduated 275 law enforcement personnel and 91 security/civilian individuals. When Region 9 last reported statistics for 2007 there were a total of 416 calls handled; in 2015 this number rose to 555 calls. Based on La Plata County data, the majority of CIT calls resulted in a referral to one of AHS's facilities, or a transport to Mercy Regional Medical Center. CIT also makes referrals to the Acute Treatment Unit (ATU). As a result of these interventions and referrals, many persons with a mental illness or substance use disorder were diverted early, and avoided unnecessary contact with the criminal justice system.

La Plata County Crisis Intervention Statistics			
Categories	2012	2013	2015
CIT Calls Handled	159	178	127
CIT Arrests	13	7	4
Transported to Mercy	58	67	42
Suicide Attempts	3	1	40

Child Health

The indicators presented below are snapshots of child health for Region 9's five counties, and demonstrate areas where more attention is necessary to help our youngest citizens.

Child Health Indicators 2013						
	Archuleta	Dolores	La Plata	Montezuma	San Juan	State
Child Health Indicators						
Percentage of Children in Poverty	26%	18%	15%	30%	27%	17%
Low Birth Weight Births	9%	LNE	7%	10%	LNE	9%
Women Who Smoked During Pregnancy	12%	LNE	13%	16%	LNE	7%
Teen Injury Deaths (ages 15-19)	LNE	LNE	LNE	LNE	LNE	38%

LNE = Low Number of Events

Source: Colorado Children's Campaign 2005 Kids Count in Colorado! www.coloradokids.org

The Colorado Children's Health Insurance Program (CHP+) is a low-cost health insurance program for families who do not qualify for Medicaid yet lack insurance. The table below shows percentages of each county's population compared with the percentage of the state's population who are CHP+ enrolled children. Each of the counties in the region had percentages that were higher than the state's. However, all counties showed improvement from 2011 to 2015.

Percentage of Children Enrolled in CHP+						
	Archuleta	Dolores	La Plata	Montezuma	San Juan	Colorado
2007	11%	17%	11%	15%	LNE	7%
2011	19%	18%	14%	18%	LNE	9%
2015	12%	10%	10%	12%	LNE	6%

LNE-Low Number Events

Source: Colorado Children's Campaign - Kids Count in Colorado!

Prenatal care is an important preventive measure that can save lives and reduce health care costs. During prenatal care visits, mothers receive guidance about diet, nutrition, exercise and lifestyle choices as well as medical monitoring. Regular check-ups are especially important in identifying risk factors for preterm births, which account for approximately 35% of all health care spending on infants in the United States and are the leading cause of newborn death and disability.

% of Women Starting Prenatal Care After 1st Trimester						
Year	Archuleta	Dolores	La Plata	Montezuma	San Juan	State
2000	38%	23%	34%	33%	*	19%
2003	52%	20%	37%	34%	57%	21%
2006	47%	33%	40%	38%	60%	20%
2011	44%	*	29%	31%	0	20%
2014	40%	41%	21%	24%	0	21%

*indicates one or two events

<https://www.colorado.gov/cdphe>

Babies born to mothers who did not receive prenatal care are three times more likely to have low birth weights and five times more likely to die than babies whose mothers received prenatal care. For prenatal care starting after the first trimester, data show that southwest Colorado communities have percentages above the state average.

A notable positive trend impacting Region 9 according to statistics provided by CDPHE - Teen Births as well as Births to Unwed Mothers are decreasing in number.

Teen Births (Ages 15-17)						
	Archuleta	Dolores	La Plata	Montezuma	San Juan	Colorado
2010	6	0	10	10	0	1,688
2011	4	0	7	12	0	1,362
2012	0	0	5	11	0	1,157
2013	*	0	3	11	*	1,119
2014	*	0	*	8	0	877
Percent Births to Unwed Mothers						
	Archuleta	Dolores	La Plata	Montezuma	San Juan	Colorado
2010	31%	24%	29%	36%	*	24%
2011	24%	39%	32%	38%	*	24%
2012	27%	*	27%	44%	*	23%
2013	34%	19%	32%	35%	*	23%
2014	35%	*	27%	34%	0%	23%

*indicates one or two events

<https://www.colorado.gov/cdphe>

People with Disabilities

The most common types of disabilities in adults are intellectual disabilities (formerly called developmental delays) and cerebral palsy. For children, the top three disabilities include global developmental delays, autism, and cerebral palsy.

Community Connections Inc. (CCI) is a regional organization that works with children and adults with disabilities. In 2006, CCI served 243 people; in 2015, that number increased slightly to 248.

Number of Adults and Children Served			
	2002	2006	2015
Archuleta	12	14	27
La Plata	107	127	133
Montezuma	56	102	88
Total	175	243	248

Source: Community Connections, Inc.

<https://www.communityconnectionsco.org/>

Senior Health

Long Term Care Facilities & Beds			
	Year	# facilities	# beds
Archuleta	2000	1	62
	2007	1	78
	2015	1	60
La Plata	2000	6	270
	2007	4	180
	2015	2	198
Montezuma	2000	8	311
	2007	8	335
	2015	2	161

Source: Colorado Dept of Health

Seniors are the fast growing segment of residents in this region. As people age, their healthcare needs can become more chronic and a full continuum of health services are needed.

According to the Area Agency on Aging, the number of long-term care beds in La Plata and Montezuma Counties is decreasing due to the loss of several facilities. In Archuleta County, the beds and facilities are staying even with no losses. There are no facilities in either Dolores or San Juan Counties.

No matter what your age, good nutrition is critical to good health. Poor nutrition is the biggest threat to an older adult's independence. In 2015, meals were served, or delivered to 59,125 seniors by Senior Centers across the region, up slightly from 52,433 in 2007.

Number of Meals Served per Year			
	2000	2007	2015
Archuleta	8,637	12,282	*
Dolores	3,274	6,273	8,854
La Plata	18,529	37,904	49,519
Montezuma	20,535	24,558	*
San Juan	1,458	1,064	752
Totals	52,433	82,081	59,125

Hospice Care

Hospice care addresses the physical, emotional and spiritual needs of those needing end of life care. The majority of hospice services are utilized by those 80 years of age and older.

Age	Hospice of Montezuma		
	2008	2011	2015
30-39	4	0	3
40-49	3	2	1
50-59	12	12	9
60-69	17	11	19
70-79	26	16	30
80-89	50	40	27
90-99	17	27	10
100+	4	0	2
Total	133	108	101

There are two home based hospice care facilities in the area: Hospice of Mercy, in Durango, and Hospice of Montezuma County, in Cortez. Hospice of Montezuma numbers decreased slightly from 133 individuals in 2008 to just over 100 in 2015.

Mercy Hospice numbers are increasing. Mercy Hospice House is currently under construction in Durango. It will provide an alternative for individuals unable or unwilling to remain in their home. It will be first hospice residence in the region.

Hospice of Mercy					
2010	2011	2012	2013	2014	2015
150	169	235	214	216	252

Leading Causes of Death

Measuring how people die is one of the most important means for assessing the effectiveness of a country’s health system. Current numbers reveal that heart disease, cancer, and chronic lower respiratory disease remain the leading causes of death in southwest Colorado.

Leading Causes of Death by County					
	Average	Average		Average	Average
	2001-06	2007-14		2001-06	2007-14
Archuleta	61	81	Dolores	19	12
Heart Disease	11	23		4	6
Cancer (All Forms)	15	24		3	4
Chronic Lower Respiratory Disease	2	7		3	0
Unintentional Injuries	2	8		1	2
Motor Vehicle Accidents	5	3		0	0
Suicide	1	4		0	0
La Plata	262	259	Montezuma	249	212
Heart Disease	61	89		58	72
Cancer (All Forms)	58	90		51	70
Chronic Lower Respiratory Disease	16	24		19	29
Unintentional Injuries	10	32		8	24
Motor Vehicle Accidents	12	11		10	8
Suicide	9	13		6	10

Data for San Juan County are not available

Most of these conditions can be prevented or postponed with improved nutrition, increased physical activity, avoidance of tobacco use, early detection and treatment of risk factors, and health-care quality improvement.¹⁰

¹⁰ The Center for Science in the Public Interest, 2015
Healthcare

Resources

AARP – Colorado www.aarp.org/states/co/

Center for Disease Control & Prevention, National Center for Health Statistics
<http://www.cdc.gov/nchs/>

Center for Science in the Public Interest
www.cspinet.org/nutritionpolicy/nutrition_policy.html#eat

Colorado Children’s Campaign www.coloradokids.org

Colorado Department of Public Health & Environment www.cdphe.state.co.us/hs/vs/

Colorado Health Institute www.coloradohealthinstitute.org

Colorado Rural Health Center www.coruralhealth.org

National Alliance on Mental Illness, Colorado www.namicolorado.org

State of Colorado, Department of Human Services, Behavioral Health
www.sites.google.com/a/state.co.us/humanservices/offices/behavioral-health

Local Resources

Axis Health System www.axishealthsystem.org

Citizens Health Advisory Council (CHAC) www.chaclaplata.org

Community Connections, Inc. www.communityconnectionsco.org

Mercy Regional Medical Center www.mercydurango.org

Montezuma County Public Health Department
montezumacounty.org/web/departments/public-health/

San Juan Basin Health Department www.sjbhd.org

Southwestern Colorado Area Health Education Center (SWCAHEC) www.swcahec.org

Southwest Health Systems www.swhealth.org