



# 2024-2026 COMMUNITY HEALTH NEEDS ASSESSMENT

UCHealth Parkview Medical Center

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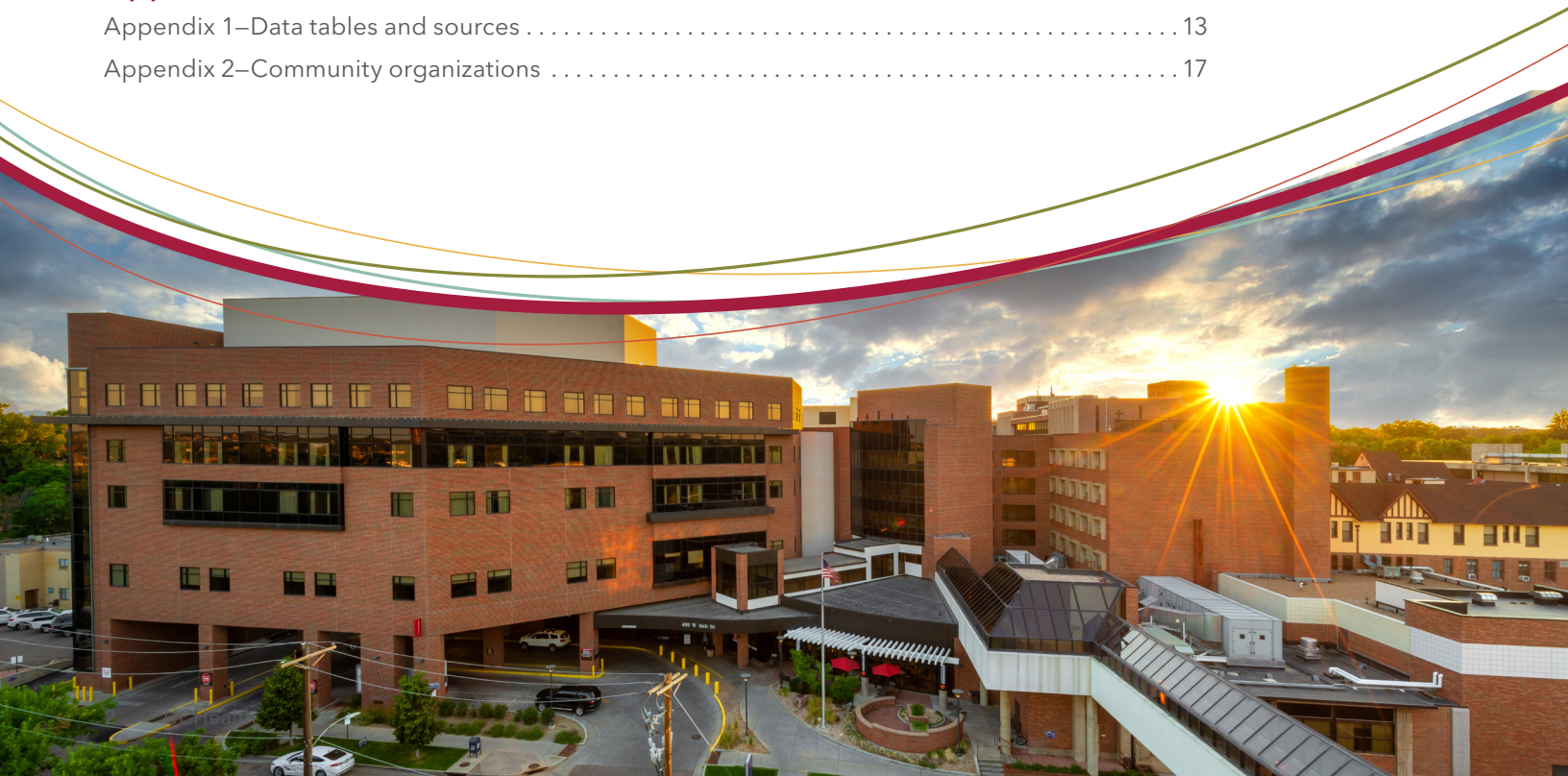
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# INTRODUCTION

The following report contains the 2024–2026 Community Health Needs Assessment (CHNA) for UCHealth Parkview Medical Center (Parkview). The CHNA was conducted to identify significant community health needs and to help inform the development of an implementation strategy to address the identified needs.

In compliance with federal and state regulations, non-profit hospitals conduct CHNAs once every three years in collaboration with other health care providers, public health departments and community organizations. CHNAs also help guide our investments in community health programs and partnerships that extend UCHealth’s not-for-profit mission beyond the walls of our hospitals, improving the lives of those we serve.

## **Our mission.**

We improve lives.

In big ways through learning, healing and discovery.

In small, personal ways through human connection. But in all ways, we improve lives.

## **Our vision.**

From health care to health.

## **Our values.**

Patients first  
Integrity  
Excellence

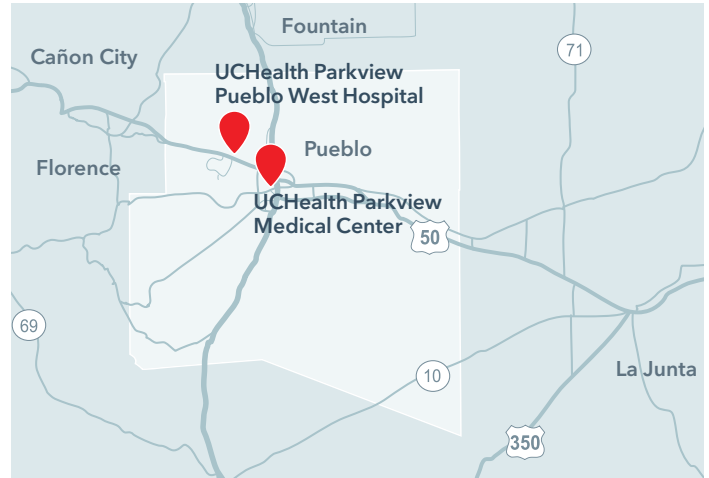
## **UCHealth Parkview Medical Center overview.**

Parkview has two hospital facilities, including Parkview Medical Center, a 250-bed hospital located in central Pueblo, and Parkview Pueblo West, a 20-bed hospital located in west Pueblo. Parkview provides a broad spectrum of clinical services, including primary care, specialty care offerings like orthopedics, cancer, heart and women’s and a variety of ancillary services like imaging, lab and pharmacy. Parkview is committed to improving the lives of the community’s most vulnerable residents and cares for over 63,000 Medicare and Medicaid patients annually. Parkview is one of the largest employers in Pueblo County with approximately 3,000 employees and a medical staff of more than 300 providers.

Parkview is part of UCHealth, a Colorado-based health system that offers the most advanced care throughout the Rocky Mountain Region, extending from Colorado to Wyoming and western Nebraska. As Colorado’s only integrated community and academic health system, UCHealth is dedicated to improving lives and providing the highest quality medical care with exceptional patient experience. With more than 200 locations throughout the region, UCHealth pushes the boundaries of medicine, providing advanced treatments and clinical trials to ensure excellent care and outcomes for 2.7 million patients each year. UCHealth is also the largest provider of Medicaid services in Colorado, with more than one million inpatient admissions and outpatient visits for Medicaid patients during fiscal year 2023.

## Communities served.

For the purposes of this CHNA, the Parkview community is defined as Pueblo County. Pueblo County represents the geographic area most proximal to the hospital and the area where the majority of Parkview’s patients reside. The following map illustrates the Parkview community.



## Demographic characteristics of the communities served.

Pueblo County is located at the base of the Rocky Mountains approximately 100 miles south of Denver at the intersection of Interstate 25 and U.S. Highway 50. Pueblo County is one the larger counties geographically in Colorado, with a total land area of more than 2,386 square miles. Pueblo County has a diverse economy highlighted by agricultural and manufacturing industries.

There are several distinct geographical areas within Pueblo County, including high desert, prairie and mountains. Pueblo also has extensive outdoor trails and a riverwalk along the Arkansas River. The majority of the population lives in the City of Pueblo, and there are several rural areas outside of the city, including St. Charles Mesa, Avondale, Boone, Colorado City, Rye and Beulah.

Demographic characteristics of the population residing within Pueblo County, in comparison with the state overall, are shown in the tables below.

### Population:

	Colorado	Pueblo County
Population	5,812,069	169,622

### Age:

	Colorado	Pueblo County
Percentage younger than 18 years of age	21.4%	22.1%
Percentage 65 years of age and older	15.1%	19.1%

### Race and ethnicity:

	Colorado	Pueblo County
Percentage Non-Hispanic Black	4.1%	1.9%
Percentage American Indian and Alaskan Native	1.7%	3.4%
Percentage Asian	3.6%	1.2%
Percentage Native Hawaiian/Other Pacific Islander	0.2%	0.2%
Percentage Hispanic	22.3%	43.7%
Percentage Non-Hispanic White	67.0%	51.0%
Percentage not proficient in English	3.0%	1.0%
Percentage rural	13.8%	14.2%

## Economic stability and poverty:

	Colorado	Pueblo County
Median household income	\$82,200	\$56,300
Unemployment rate	5.4%	7.9%
Percentage of adults aged 25-44 with some post-secondary education	73.0%	60.0%
Percentage of people under age 18 living in poverty	12.0%	19.0%
Percentage of children eligible for free or reduced-price school lunch	42.0%	64.0%
Percentage of population who lack adequate access to food	8.0%	14.0%

## Preventable hospitalizations:

Hospitalization data for ambulatory care sensitive (ACS) conditions can be used as an indicator of residents' ability to access primary care resources. Hospitalizations for ACS conditions are those that could have been prevented, at least in part, if adequate primary care resources were available and accessible to those patients.

	Colorado	Pueblo County
Number of hospital stays for ambulatory care sensitive conditions per 100,000 Medicare enrollees	1,703	2,397

Source for all values above: 2023 County Health Rankings

# COMMUNITY HEALTH NEEDS ASSESSMENT

Between January and June 2024, Parkview conducted the CHNA, which provided an opportunity for the hospitals to engage public health experts, medical providers and community stakeholders in a formal process to ensure that community benefit programs and resources are focused on significant health needs identified within the community it serves.

## Methods used to conduct the Community Health Needs Assessment.

A multi-phased approach was used to identify the top health priorities for future impact. The process included:

- A comprehensive analysis of local population health indicators.
- Solicitation of community input through engagement with Pueblo Department of Public Health and Environment during the development of their Community Health Assessment (CHA).
- Distribution of a web-based survey to health care providers at Parkview to gather input on community health needs.

After collecting data and soliciting input from the community and health care providers, the Internal Advisory Group (IAG) for Parkview, a subset of the hospital's leadership team, reviewed all information obtained from the activities described above and identified recommended health needs areas of focus for the 2024-2026 CHNA. As described later in this report, recommendations for priority areas of focus were presented to the Parkview Board of Directors for review and approval.

The following illustrates the CHNA process components and participants.

### Identify community health needs.

#### Secondary data analysis:

- Population characteristics.
- Social and economic factors.
- Health data.

#### Community and health care provider input:

- Brainstorming of community health issues.
- Ranking of the community's most significant issues.

### Prioritize significant community health needs.

#### Consolidation and synthesis of information:

- In-depth secondary data analysis.
- Community and provider input.
- IAG recommendations.

#### Prioritization of issues:

- Scope and severity.
- Hospital's ability to impact the issue.
- Availability of evidence-based strategies to address the need.
- Alignment with goals of UCHHealth, local community, Colorado and the U.S. overall.

## Written comments on previously conducted Community Health Needs Assessment.

The 2021-2023 Parkview CHNA and corresponding implementation strategy report have been available to the public on the organization's public website since 2021. In 2022 and 2023, Parkview conducted community benefit public meetings to solicit input from local public health and community organizations, other health care providers and the public. No comments requiring a response were received specific to the CHNA, CHNA process or implementation plan.

# FINDINGS

## **Secondary data review and analysis.**

The initial step of the secondary data review included an assessment of local population health indicators obtained through the County Health Rankings (2023 report year), the Colorado Health Indicators database (2020–2022) and the 2021 Healthy Kids Colorado Survey. Indicator values were assessed at the county and state levels.

Summary tables of the key health indicators in the Parkview community were developed to illustrate the overall health of the community (see Appendix for the data tables and related sources).

Key health needs were determined based on the indicator values and trends, the potential to impact the issues using evidence-based practices and alignment with the priorities of Parkview.

Categories evaluated include:

- Demographics, education and socioeconomic status.
- Health care access and services.
- Health behaviors (including unintentional injury).
- Maternal and child health.
- Mental health (including attempted-suicide hospitalizations and mortality).
- Nutrition, physical activity and body-mass index.
- Substance use disorders.
- Specific health conditions (including hospitalization, morbidity and mortality rates).

From this review, the most significant issues identified were:

- Access to care.
- Behavioral health.
- Prevention and screening for cancer.
- Chronic disease.
- Injury.
- Maternal health.

## **Information gaps impacting ability to assess needs.**

Within the review of the secondary data, gaps were identified related to the health status of minority populations as well as individuals who are medically underserved due to lack of adequate insurance or who encounter barriers to receiving timely and comprehensive health care services.

To gather additional insights, Parkview regularly participates in meetings facilitated by the Pueblo Department of Public Health and Environment and other partner agencies that focus on identifying and implementing best practices for reducing these barriers.

## Community engagement synopsis.

To gather community input on the most significant health issues, Parkview carried out two main activities:

- Partnership with the Pueblo Department of Public Health and Environment during the development of the county’s CHA. The Pueblo County process relied on multiple data sources including population health data and feedback from community leaders and community members.
- Administration of a web-based survey to all Parkview medical staff providers.

## Community Input.

Parkview solicited community input through partnership with Pueblo Department of Public Health and Environment during their multi-phased CHA process conducted in 2024. The county’s CHA process included the following:

- Review of secondary data and local population health indicators, as well as priorities from Pueblo County’s partnering agencies.
- Solicitation of input from community leaders during an open house where attendees completed a survey to identify the health needs of highest concern.
- Gathering of feedback from community members and residents through focus groups, and in-person and online surveys.

At the time in which this report was developed and approved by the Parkview Board of Directors, Pueblo Department of Public Health and Environment’s CHA process was not yet finalized; however, the county shared the following health needs that were identified as a result of the secondary data analysis and the community leader feedback:

- Mental health.
- Adult risky behaviors and substance use.
- Youth risky behaviors.
- Childcare services.
- Poverty among the aging population.

## Provider survey results.

The Parkview medical staff provider survey asked respondents to rank a set of community health needs in order of importance to the community. Results are provided in the table below. The score represents the aggregate points for each health need based on the rankings and prioritization from the respondents.

Health need	Provider survey	
	Score	Rank
Access to health care	117	1
Behavioral health	109	2
Chronic disease	102	3
Maternal health	66	4
Injury	57	5
Cancer	53	6

## Community-wide health care resources available to address needs.

Recognizing the current scope of services available to meet the health care needs of community members is a vital component of a CHNA. The Parkview community is served by three acute-care hospitals, including Parkview's two facilities, community-based health centers and a network of medical and mental health providers. Though services may be available, the CHNA findings reveal that the ability to receive care in a timely and coordinated manner remains a challenge for many vulnerable residents.

## Proven strategies available to impact health issues.

A key factor for consideration during the health issue prioritization process was recognizing the availability of proven strategies or evidence-based interventions that, if implemented, could make an impact on the significant health issues identified.

Resources reviewed included:

- [Community Preventive Services Task Force Findings](#)
- [County Health Rankings Guide—What Works for Health](#)
- [Healthy People 2030 Evidence-Based Resources](#)

## Summary of actions taken by hospitals since the last Community Health Needs Assessment.

To understand the effectiveness and scope of actions taken by Parkview since the completion of its most recent CHNA, a review of community benefit activities was completed. The priorities identified in Parkview's 2021-2023 CHNA were access to healthy eating, healthy living and drug and alcohol use. A few examples of programs and initiatives currently in process to address the prior findings are listed below.

### Healthy eating:

- Educational sessions at local grocery stores
- Patient educational videos

### Healthy living:

- Community-based health screenings including blood pressure checks, lipid panel/cholesterol tests, bone density tests
- Community educational sessions
- Patient educational videos
- Community-based flu vaccinations
- Stress management and sleep habit educational sessions
- Women's health and breast cancer education sessions

### Drug and alcohol use:

- Drug and alcohol screening and education for pregnant women and postpartum mothers
- Co-responder program with Pueblo City Fire Department
- Smoking and drinking education sessions

# PRIORITIZATION AND BOARD OF DIRECTORS APPROVAL

## **Internal Advisory Group recommendations.**

The Parkview IAG reviewed all findings obtained from the activities described previously and conducted a meeting specifically to identify health needs priorities for the CHNA. The following criteria were considered during the decision-making process:

- Scope and severity of the health need.
- Potential for Parkview to impact the health need.
- Alignment with UHealth, local, state and national objectives.
- Economic feasibility to address the health need.

The Parkview IAG identified the following health needs as priorities for the 2024-2026 CHNA:

- Access to care
- Behavioral health
- Chronic disease

A synopsis of key CHNA findings specific to these issues is provided in the following sections of this report.

## **Access to care.**

With the advent of the Affordable Care Act, there has been a sharp decline in the proportion of residents without any health insurance throughout Colorado; however, there are still many barriers to accessing health care services through both Medicaid and other payer sources. For those under age 65 in Pueblo County, 8.9% report a lack of health insurance.

Access to care is a critical component of community health as it helps to prevent disease, detect and treat illnesses or conditions, reduce unnecessary hospitalization or use of emergency services and increase quality of life. Research shows that access to primary care is associated with positive health outcomes, and individuals with an established primary care physician are more likely to receive recommended preventive services such as flu shots, blood pressure screenings and cancer screenings. In addition, access to specialty care is an important part of disease care and management, but patients may encounter challenges accessing services.

In response to the provider survey, health care providers identified access to care as the highest priority health need within the community.

## Behavioral health

According to the U.S. Department of Health and Human Services, mental health disorders are among the most common causes of disability in the U.S. The resulting disease burden of mental illness is among the highest of all diseases.

In Pueblo County, the percentage of adults reporting poor mental health for 14 or more days during the past 30 days is 16.0%, higher than Colorado overall at 13.0%. At the same time, 48.7% of high school students reported that they felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months (compared to Colorado average of 39.6%). 20.5% of high school students in Pueblo County also reported that they seriously considered attempting suicide during the last 12 months (compared to Colorado average of 17.1%). The age-adjusted hospitalization rate per 100,000 for both mental health conditions and attempted suicide is significantly higher in Pueblo County than the state overall.

The effects of substance use disorders are cumulative, significantly contributing to costly social, physical, mental and public health problems. The Centers for Disease Control and Prevention reports that binge drinking is the most common, costly and deadly pattern of excessive alcohol use in the U.S. Binge drinking is defined as a pattern of drinking that brings a person's blood alcohol concentration to 0.08 g/dl or above. This typically happens when men consume five or more drinks or women consume four or more drinks in about two hours. In Pueblo County, while the percentage of adults who binge drink is lower than the state average, 14.7% of teens reported binge drinking compared to the state average of 12.5%.

Within Pueblo Department of Public Health and Environment's CHA, three of the five priorities identified at the time this report was developed were related to behavioral health. Also, the results of the provider survey identified behavioral health as the second highest priority health need.

Behavioral health	Colorado	Pueblo County
Percentage of adults reporting that their mental health was not good for 14+ days during the past 30 days	13.0%	<b>16.0%</b>
Percentage of high school students who felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months	39.6%	<b>48.7%</b>
Percentage of high school students who seriously considered attempting suicide during the past 12 months	17.1%	<b>20.5%</b>
Percentage of adults who report binge drinking (5+ drinks on one occasion in the past month)	20.0%	18.0%
Percentage of high school students who binge drank (4+ drinks for females, 5+ drinks for males, within a couple of hours) on one or more of the past 30 days	12.5%	<b>14.7%</b>
Percentage of adults who are current smokers	13.0%	<b>18.0%</b>
Number of drug poisoning deaths per 100,000 population	21	<b>35</b>
Number of deaths due to suicide per 100,000 (age-adjusted)	21.1	<b>28.8</b>
Mental health-diagnosed hospitalizations (age-adjusted rate of hospitalizations per 100,000 residents)	2,854.1	<b>4,163.0</b>
Suicide hospitalizations (age-adjusted rate of hospitalizations per 100,000 residents)	61.2	<b>101.2</b>

See the Appendix for additional supporting information and relevant data sources. Values highlighted in red indicate measures that are less favorable when compared to the state values.

## Chronic disease

According to the Centers for Disease Control and Prevention, chronic diseases and conditions are one of the leading causes of death and disability in the United States. Chronic conditions—including some cancers, cerebrovascular disease, heart disease, obesity, diabetes and lung disease—share risk factors such as tobacco use, unhealthy diet, physical inactivity and lack of access to preventive care.

As shown in the table below, public health data shows that there is a higher rate among many chronic diseases and conditions in Pueblo County when compared to the state of Colorado overall. Examples include the overall incidence of cancer and hospitalizations for stroke, heart disease and congestive heart failure, among others. In addition, the rate of obesity among adults, as well as the percentage of adults with diagnosed diabetes are significantly higher than the state average.

Chronic disease	Colorado	Pueblo County
All cancer sites combined (age-adjusted incidence rate per 100,000)	369.2	<b>408.5</b>
Lung and bronchus (age-adjusted incidence rate per 100,000)	35.9	<b>48.6</b>
Prostate cancer (age-adjusted incidence rate per 100,000 males)	47.3	<b>49.0</b>
Stroke hospitalization (age-adjusted per 100,000)	317.6	<b>450.0</b>
Heart disease hospitalization (age-adjusted per 100,000)	1,961.4	<b>2,581.8</b>
Congestive heart failure hospitalization (age-adjusted per 100,000)	802.7	<b>1,060.5</b>
Alzheimer’s disease (age-adjusted mortality rate per 100,000)	29.7	<b>34.6</b>
Chronic lower respiratory diseases (age-adjusted mortality rate per 100,000)	36.4	<b>70.6</b>
Percentage of adults aged 20 and older with diagnosed diabetes	7.0%	<b>10.0%</b>
Percentage of adults (18+) who were obese (Body Mass Index > = 30)	24.0%	<b>30.0%</b>

See the Appendix for additional supporting information and relevant data sources. Values highlighted in red indicate measures that are less favorable when compared to the state values.

## Board of Directors review and approval.

During the June 2024 meeting, the Parkview Board of Directors, which includes representatives from the local community, reviewed, discussed and approved the information contained within this report.

## Acknowledgments, recommendations and next steps.

We thank Pueblo Department of Public Health and Environment and other partnering agencies, as well as medical providers and community members who provided insight and expertise to this report.

In the following months, implementation strategies designed to address the identified health needs within Pueblo County will be prepared and presented to the Parkview Board of Directors for approval.

The Parkview CHNA report will be made available to the public for viewing or download on the [UCHealth website](#), as well as in hard copy located in the Parkview administrative office.

# APPENDICES

## Appendix 1–Data tables and sources

### FY 2024-2026 Community Health Needs Assessment indicator values

Demographics	Year/Source	Colorado	Pueblo County
<b>Population</b>	2023 CHR	5,812,069	169,622
Percentage below 18 years of age	2023 CHR	21.4%	22.1%
Percentage 65 and older	2023 CHR	15.1%	19.1%
Percentage Non-Hispanic Black	2023 CHR	4.1%	1.9%
Percentage American Indian and Alaskan Native	2023 CHR	1.7%	3.4%
Percentage Asian	2023 CHR	3.6%	1.2%
Percentage Native Hawaiian/Other Pacific Islander	2023 CHR	0.2%	0.2%
Percentage Hispanic	2023 CHR	22.3%	43.7%
Percentage Non-Hispanic White	2023 CHR	67.0%	51.0%
Percentage not proficient in English	2023 CHR	3.0%	1.0%
Percentage female	2023 CHR	49.3%	50.4%
Percentage rural	2023 CHR	13.8%	14.2%

Health Outcomes	Year/Source	Colorado	Pueblo County
<b>Quality of Life</b>			
Percentage of adults reporting poor or fair health (age-adjusted)	2023 CHR	10.0%	<b>16.0%</b>
<b>Maternal and Child Health</b>			
Percentage of live births with low birth weight (LBW) (<2500 grams)	2023 CHR	9.0%	<b>10.0%</b>
Number of all infant deaths (within 1 year) per 1,000 live births	2023 CHR	5	<b>6</b>
<b>Mental Health</b>			
Percentage of adults reporting that their mental health was not good for 14+ days during the past 30 days	2023 CHR	13.0%	<b>16.0%</b>
Percentage of high school students who felt sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months	2021 HKCS	39.6%	<b>48.7%</b>
Percentage of high school students who seriously considered attempting suicide during the past 12 months	2021 HKCS	17.1%	<b>20.5%</b>

#### Footnotes and sources:

- N/A: data is not available, or data is suppressed due to small sample size.
- CHR: County Health Rankings; 2023 report year; measures collected from various sources and years ([County Health Rankings](#)).
- COHI: Colorado Health Indicators (provides access to state and local-level data compiled by Colorado Department of Public Health and Environment) ([Colorado Health Information Dataset](#)).
- HKCS: Healthy Kids Colorado Survey; 2021 ([Healthy Kids Colorado Survey](#)).
- 2020 CEN: United States Census Bureau; 2020 (U.S. Census Bureau Quick Facts - Pueblo County).

Health Factors	Year/Source	Colorado	Pueblo County
<b>Tobacco Use</b>			
Percentage of adults who are current smokers	2023 CHR	13.0%	<b>18.0%</b>
Percentage of high school students who have ever used an electronic vapor product	2021 HKCS	30.4%	<b>41.3%</b>
Percentage of high school students who smoked cigarettes on one or more of the past 30 days	2021 HKCS	3.3%	3.1%
<b>Weight Status and Physical Activity</b>			
Percentage of adults (18+) who were obese (Body Mass Index > = 30)	2023 CHR	24.0%	<b>30.0%</b>
Percentage of high school students physically active for a total of at least 60 minutes per day on five or more of the past 7 days	2021 HKCS	49.0%	<b>45.0%</b>
Percentage of adults age 20 and over reporting no leisure-time physical activity	2023 CHR	17.0%	<b>24.0%</b>
<b>Alcohol and Drug Use</b>			
Percentage of high school students who binge drank (4+ drinks for females, 5+ drinks for males, within a couple of hours) on one or more of the past 30 days	2021 HKCS	12.5%	<b>14.7%</b>
Percentage of adults who report binge drinking (5+ drinks on one occasion in the past month)	2023 CHR	20.0%	18.0%
Percentage of driving deaths with alcohol involvement	2023 CHR	34.0%	34.0%
Number of drug poisoning deaths per 100,000 population	2023 CHR	21	<b>35</b>
<b>Sexual Activity</b>			
Number of newly diagnosed chlamydia cases per 100,000 population	2023 CHR	453.9	<b>597.3</b>
Number of births per 1,000 female population ages 15-19	2023 CHR	16	<b>27</b>
<b>Clinical Care - Access to Care</b>			
Percentage of population under age 65 without health insurance	2020 CEN	9.3%	8.9%
Ratio of population to primary care physicians	2023 CHR	1,200:1	<b>1,500:1</b>
Ratio of population to dentists	2023 CHR	1,180:1	<b>1,400:1</b>
Ratio of population to mental health providers	2023 CHR	230:1	180:1
<b>Clinical Care - Quality of Care</b>			
Number of hospital stays for ambulatory care sensitive conditions per 100,000 Medicare enrollees	2023 CHR	1,703	<b>2,397</b>

Specific Health Conditions - Self-Reported	Year/Source	Colorado	Pueblo County
Percentage of high school students who had ever been told by a doctor or nurse that they had asthma	2021 HKCS	18.1%	<b>23.6%</b>
Percentage of adults aged 20 and older with diagnosed diabetes	2023 CHR	7.0%	<b>10.0%</b>
Number of persons living with a diagnosis of HIV infection	2023 CHR	269	168

**Footnotes and sources:**

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- COHI: Colorado Health Indicators (provides access to state and local-level data compiled by Colorado Department of Public Health and Environment) ([Colorado Health Information Dataset](#)).
- HKCS: Healthy Kids Colorado Survey; 2021 ([Healthy Kids Colorado Survey](#)).
- 2020 CEN: United States Census Bureau; 2020 (U.S. Census Bureau Quick Facts - Pueblo County).

Social and Economic Factors	Year/Source	Colorado	Pueblo County
<b>Education</b>			
High school graduation rate	2023 CHR	82.0%	87.0%
Percentage of teens and young adults ages 16-24 who are neither working nor in school (disconnected youth)	2023 CHR	6.0%	<b>14.0%</b>
Percentage of adults ages 25-44 with some post-secondary education	2023 CHR	73.0%	<b>60.0%</b>
<b>Employment</b>			
Unemployment rate	2023 CHR	5.4%	<b>7.9%</b>
<b>Income</b>			
Median household income	2023 CHR	\$82,200	<b>\$56,300</b>
Percentage of children under age 18 in poverty	2023 CHR	12.0%	<b>19.0%</b>
Percentage of children eligible for free/reduced school lunch	2023 CHR	42.0%	<b>64.0%</b>
Percentage of households that spend 50% or more of their household income on housing (severe housing cost burden)	2023 CHR	14.0%	<b>16.0%</b>
Percentage of population who lack adequate access to food (food insecure)	2023 CHR	8.0%	<b>14.0%</b>
<b>Community Safety</b>			
Number of motor vehicle crash deaths per 100,000 population	2023 CHR	11	<b>17</b>
Number of deaths due to injury per 100,000 population	2023 CHR	83	<b>117</b>
Number of deaths due to homicide per 100,000 population	2023 CHR	4	<b>9</b>
Number of deaths due to firearms per 100,000 population	2023 CHR	15	<b>23</b>

Age-adjusted Incidence Rates of Cancer Per 100,000 Population	Year/Source	Colorado	Pueblo County
All cancer sites combined	2020 COHI	369.2	<b>408.5</b>
Lung and bronchus	2020 COHI	35.9	<b>48.6</b>
Breast cancer (females)	2020 COHI	63.2	60.4
Prostate cancer (males)	2020 COHI	47.3	<b>49.0</b>
Colorectal cancer	2020 COHI	28.1	<b>28.3</b>
Invasive cervical cancer (females)	2020 COHI	2.7	<b>4.0</b>
Melanoma of skin	2020 COHI	18.0	12.7

**Footnotes and sources:**

- N/A: data is not available, or data is suppressed due to small sample size.
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- COHI: Colorado Health Indicators (provides access to state and local-level data compiled by Colorado Department of Public Health and Environment) ([Colorado Health Information Dataset](#)).
- HKCS: Healthy Kids Colorado Survey; 2021 ([Healthy Kids Colorado Survey](#)).
- 2020 CEN: United States Census Bureau; 2020 (U.S. Census Bureau Quick Facts - Pueblo County).

Age-adjusted Rate of Hospitalization Per 100,000 Population	Year/Source	Colorado	Pueblo County
Stroke	2020-2022 COHI	317.6	<b>450.0</b>
Heart disease	2020-2022 COHI	1,961.4	<b>2,581.8</b>
Acute myocardial infarction	2020-2022 COHI	195.3	<b>234.9</b>
Congestive heart failure	2020-2022 COHI	802.7	<b>1,060.5</b>
Mental health diagnosed hospitalizations	2020-2022 COHI	2,854.1	<b>4,163.0</b>
Suicide hospitalizations	2020-2022 COHI	61.2	<b>101.2</b>
Influenza (ages 65+)	2020-2022 COHI	118.1	<b>170.2</b>

Age-adjusted Mortality Rates Per 100,000 Population	Year/Source	Colorado	Pueblo County
All causes	2022 COHI	712.1	<b>1,006.3</b>
Malignant neoplasms (all cancers)	2022 COHI	120.5	<b>151.4</b>
Heart disease (all categories)	2022 COHI	125.9	<b>142.8</b>
Accidents	2022 COHI	68.7	<b>108.2</b>
Chronic lower respiratory diseases	2022 COHI	36.4	<b>70.6</b>
COVID-19	2022 COHI	33.7	<b>60.4</b>
Alzheimer's disease	2022 COHI	29.7	<b>34.6</b>
Diabetes	2022 COHI	17.8	<b>31.9</b>
Suicide	2022 COHI	21.1	<b>28.8</b>
Cerebrovascular diseases	2022 COHI	32.2	27.5
Prescription opioid overdose	2022 COHI	19.1	<b>23.3</b>
Falls	2022 COHI	17.4	11.5

**Footnotes and sources:**

- N/A: data is not available, or data is suppressed due to small sample size.
- CHR: County Health Rankings; 2023 report year; measures collected from various sources and years ([County Health Rankings](#)).
- COHI: Colorado Health Indicators (provides access to state and local-level data compiled by Colorado Department of Public Health and Environment) ([Colorado Health Information Dataset](#)).
- HKCS: Healthy Kids Colorado Survey; 2021 ([Healthy Kids Colorado Survey](#)).
- 2020 CEN: United States Census Bureau; 2020 (U.S. Census Bureau Quick Facts - Pueblo County).

## Appendix 2–Community Organizations

- Pueblo Department of Public Health & Environment
- Pueblo Parks and Recreation
- Pueblo District Library
- Pueblo County
- Pueblo Community Health Center
- Pueblo County Department of Human Services
- Health Solutions
- Pueblo Community College - Fremont senior college
- Pueblo School District 60
- Pueblo School District 70
- Pueblo West High School
- Pleasant View Middle School
- Beulah Mountain School
- Senior Retirement Development Agency (SRDA)
- Royal Gorge Chamber Alliance
- Florence County Farmers Market
- Senior Connections Health Fair
- Colorado State University - Pueblo Nursing program
- Safeway Grocery Store
- Pueblo County Sheriff's Office
- Rocky Mountain Cancer Center
- American Medical Response (AMR)
- American Heart Association
- Philson Dentistry
- Park West Dental and Vision
- MxV Rail
- Hanger orthotics
- Big R
- EVRAZ
- Soaring Eagles Center For Autism (SECA)
- Pueblo Diversified Industry (PDI)
- Colorado Department of Transportation (CDOT)
- San Isabel Electric Association (SIEA)
- GCC
- Industrial Constructors/Managers Inc. (ICM)
- Hartung Glass Industries
- GulfCo Manufacturing
- Collins Aerospace