

# Healthy Northern Communities 2011

*Village of Granisle*

Revised  
August 6, 2011



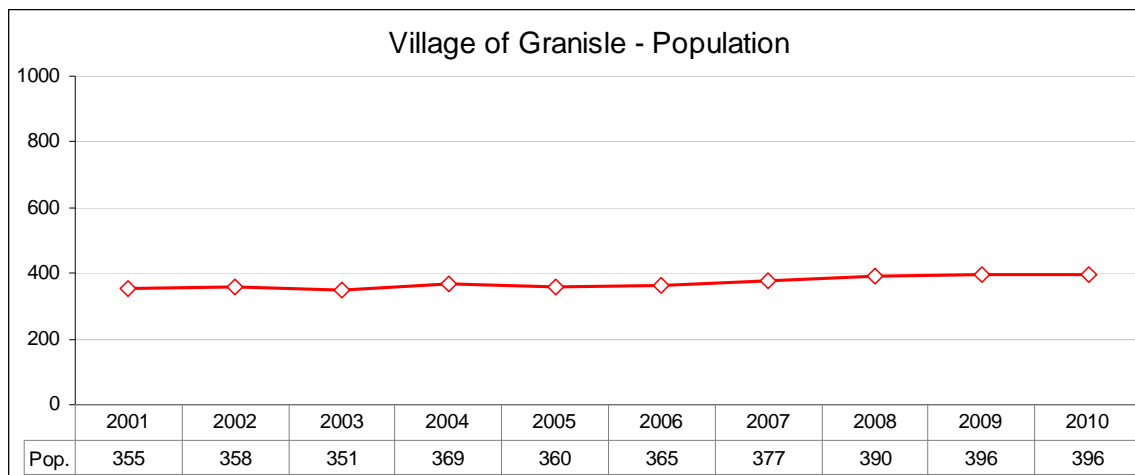
**northern health**  
*the northern way of caring*

## Village of Granisle

The Village of Granisle was incorporated in 1971. Granisle is located approximately 50 km north of Highway 16 at Topley, between Burns Lake and Houston.<sup>1</sup>

The Village of Granisle is also situated within the Bulkley Nechako Regional District, within the Burns Lake Local Health Area (LHA 055) and Northern Interior Health Service Delivery Area of Northern Health. Granisle is served by School District No. 91.

This broad area is the traditional territories of the Wet'suwet'en and Dakelh (Carrier) peoples. The nearby Wet'suwet'en community of Moricetown is located on the southern edge of the Upper Skeena LHA (LHA 053). Dakelh communities of Wit'at (Fort Babine), Nedo'ats (Old Fort), and Tachet are located nearby on Babine Lake.<sup>2, 3</sup>



The estimated 396 people within the Village of Granisle account for approximately 5 % of the Burns Lake LHA population (396 / 7,888 persons) and for 1.0 % of the overall Bulkley Nechako Regional District population (396 / 39,183 persons).<sup>4, 5, 6</sup>

During the 2009 calendar year, there were 6 births and 9 deaths attributed to the residents of Granisle. The average life expectancy for Granisle residents was 77.9 years. This was less than the BC average life expectancy of 81.4 years.<sup>7</sup>

### Community Information

Village of Granisle website (Area Profiles): <http://www.rdbn.bc.ca/>

Granisle Official Community Plan (Regional Services / Planning Department)  
[http://www.rdbn.bc.ca/index.php?option=com\\_content&view=article&id=448&Itemid=57](http://www.rdbn.bc.ca/index.php?option=com_content&view=article&id=448&Itemid=57)

Lake Babine Nation: <http://www.lakebabine.com/>

Wet'suwet'en Nations <http://www.wetsuweten.com/>

Bulkley Nechako Regional District: <http://www.rdbn.bc.ca/>

BC Stats Fact Sheets: <http://www.bcstats.gov.bc.ca/data/dd/facsheet/facsheet.asp>

Northern BC, Community Health Information Portal <http://chip.northernhealth.ca>

## What Determines Health?

A good strong start in life, early and enriching experiences, educational opportunities and achievement, a sufficient and equitable distribution of employment and income, housing, food, interactions with the natural and human built environments, our choices towards certain risk factors and lifestyles, as well as access to high quality health services, are just a few of the many determinants of health and wellbeing.<sup>8, 9</sup>

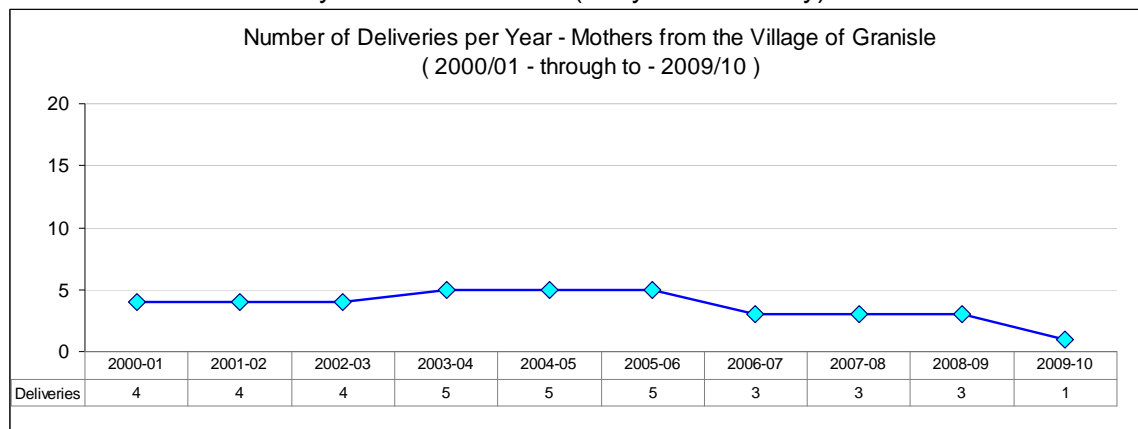
Selected Determinants of Health			
<b>Demographics</b>	Granisle <sup>10</sup>	LHA <sup>11</sup>	BC <sup>12</sup>
Percent of population who are 0 – 19 yrs old	16.2	26.5	23.2
Percent of population who are ages 65+	27.0	12.7	15.0
Percent of population who are Visible Minorities	4.0	0.9	24.5
Percent of population who are Aboriginal Identity	13.0	27.7	4.8
<b>Income</b>			
Percent of families earning < \$20,000 per year	8.3	9.7	8.0
Percent of families earning from \$20,000 - \$80,000 per year	83.4	57.5	53.8
Percent of families earning > \$80,000 per year	8.3	32.1	38.1
* Percent of population receiving Income Assistance > 1 yr.	nca	1.3	1.0
<b>Early Development and Educational Achievement</b>			
Percent of kindergarten children vulnerable: 1 or more EDI scales <sup>13</sup>	nca	40.0	28.6
† Percent of Grade 4 & 7 students below standard on FSA - Reading	nca	39.7	20.7
† Percent of Grade 4 & 7 students below standard on FSA - Writing	nca	41.9	17.9
† Percent of Grade 4 & 7 students below standard on FSA - Math	nca	46.0	23.4
† Grade 10 Provincial-exam non-completion rate - English	nca	32.6	15.9
† Percent of 18 yr olds who did not graduate	nca	48.2	29.0
Percent of persons ages 25 to 54: without high school completion	nca	25.8	11.1
Percent of persons ages 25 to 64: with university degree or above	9.5	10.5	24.1
<b>Housing</b>			
Percent of households that are renting	29.7	26.5	30.4
Percent of tenants paying 30 % or more of income towards housing	55	34.1	43.4
Percent of owners paying 30 % or more of income towards housing	7.0	12.5	22.7
<b>Children and Youth at Risk</b>			
* Children (ages <15) receiving Income Assistance > 1 year	nca	3.0	1.7
* Youth (ages 15 - 24) receiving Income Assistance > 1 yr	nca	0.8	0.9
Children in care rate per 1,000 population, ages 0 – 18	nca	27.5	9.2
Teen pregnancies per 1,000 women ages 15 – 19 (2007-2009)	nca	38.5	26.3
<b>Other Indicators</b>			
Alcohol sales per capita in 2010 (Dollars Spent)	nca	631	790
Alcohol sales per capita in 2010 (Litres Consumed)	nca	100	107
nca = means this level of data detail or data aggregation is "not currently available."			
EDI = the Early Development Index is an early child development assessment tool. <a href="http://www.earlylearning.ubc.ca">http://www.earlylearning.ubc.ca</a>			
LHA = Local Health Area. In this table we are referring to the Burns Lake Local Health Area (LHA - 055).			
* Income Assistance figures may be understated as they do not include Aboriginal people who are living on reserve.			
† education measures shown are an average for the period 2007/08 - 2009 /10. The LHA and BC figures were obtained from <a href="http://www.bcstats.gov.bc.ca">BC Stats Socio-economic profiles</a> . Please also see BC Ministry of Education <a href="http://www.bced.gov.bc.ca/reporting/">http://www.bced.gov.bc.ca/reporting/</a>			

## Promoting Health and Delivering High Quality Services

**A good strong start in life** is more likely if infants, children and family members are healthy. Towards this, we consider community characteristics (Determinants of Health), the number of mothers delivering infants and where these infants are being delivered.

This type of information informs services such as prenatal education, parenting skills programs, post delivery follow-ups for moms, immunizations, as well as the screening services intended to detect and address vision, hearing and dental health concerns.

### Number of deliveries by Granisle mothers (ten year summary).<sup>14</sup>



### Delivery locations for Granisle mothers (five year summary).<sup>15</sup>

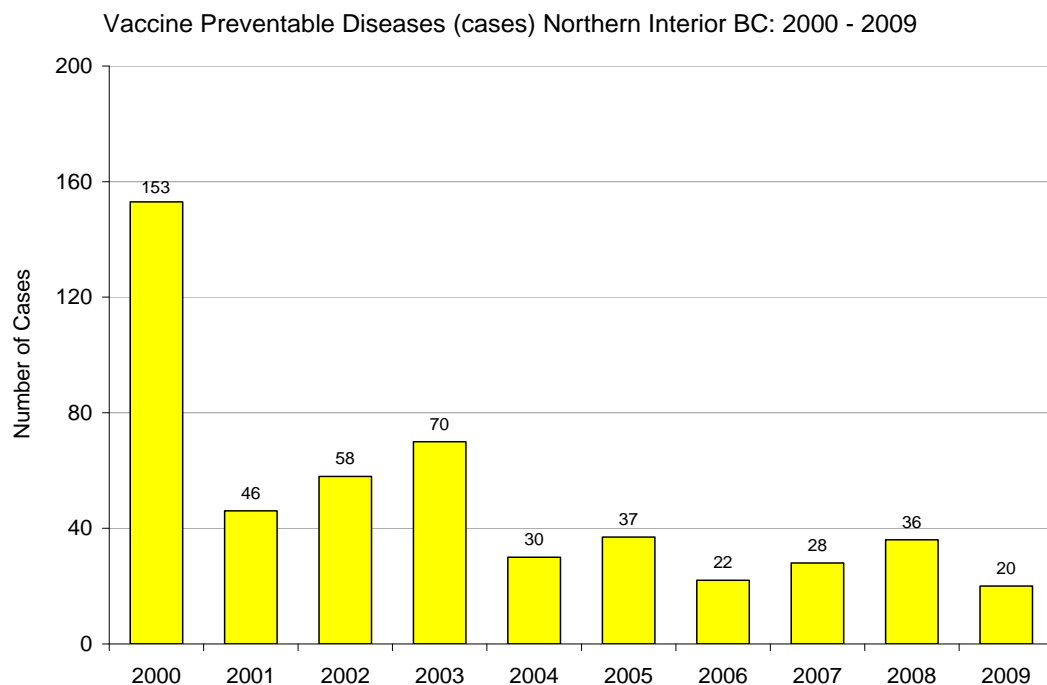
Mother's community or Regional District area	Delivery Location: 2005/06 – 2009/10						
	Burns Lake	Vanderhoof	Prince George	Smithers	Other Location	Home Births	Total Deliveries
Bulk-Nechako R/D (E)	10	0	10	2	2	0	24
Burns Lake (VL)	174	59	95	25	8	11	372
Granisle (VL)	2	0	5	6	2	0	15
Total Deliveries	186	59	110	33	12	11	411

## Promoting Health and Delivering High Quality Services

**Immunizations** are some of the best health investments that we can make. Along with better sanitation and clean drinking water, immunizations have been responsible for the huge increases in life expectancy that we have seen around the world. <sup>16, 17</sup>

Because they are such a good investment and the protection they provide to individuals and communities as a whole is so important, we actively monitor whether certain target populations are fully immunized. For example, we know that the percent of 2 year old children in the Burns Lake / Granisle area, who are fully immunized, is 55.4%. <sup>18</sup>

**Vaccine Preventable Diseases** are illnesses that may have been avoided if individuals and communities were sufficiently immunized. These cases are summarized below.



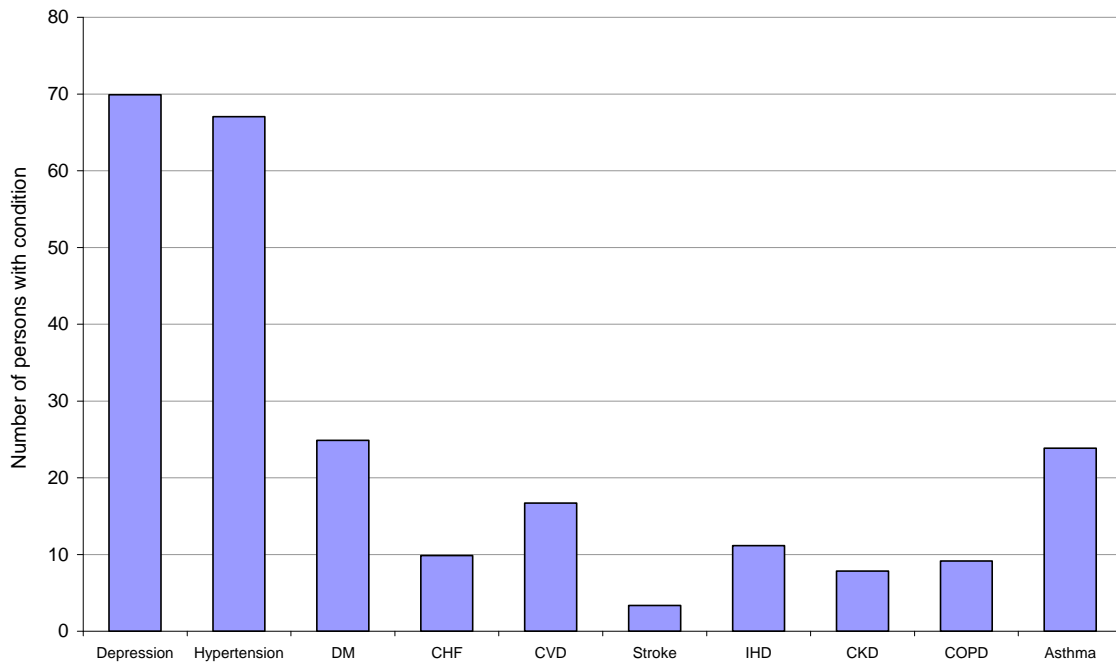
Vaccine Preventable Diseases (cases) in Northern Interior BC: 2000 - 2009 <sup>19</sup>											
Community	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	Total
Burns Lake	0	1	26	1	0	4	0	0	1	2	35
Ft. St. James	3	2	2	0	0	1	3	2	2	0	15
Fraser Lake	0	0	0	5	0	1	0	0	1	0	7
Mackenzie	1	0	0	1	0	0	1	0	0	1	4
McBride	0	1	0	0	0	0	0	0	0	0	1
Prince George	129	35	26	52	26	22	17	19	31	13	370
Quesnel	18	6	1	5	4	9	1	4	1	4	53
Valemount	0	0	0	4	0	0	0	0	0	0	4
Vanderhoof	2	1	3	2	0	0	0	3	0	0	11
<b>Total</b>	<b>153</b>	<b>46</b>	<b>58</b>	<b>70</b>	<b>30</b>	<b>37</b>	<b>22</b>	<b>28</b>	<b>36</b>	<b>20</b>	<b>500</b>

## Promoting Health and Delivering High Quality Services

We know that many factors influence our health. Our choices in lifestyle and towards a handful of well known risk factors: tobacco use; physical inactivity; poor dietary choices; obesity; inappropriate alcohol and drug use; certain sexual activities; and, excessive sun exposure can greatly determine whether we remain healthy and free from certain types of cancers and other chronic illnesses.<sup>20, 21, 22, 23</sup>

### Chronic Disease Estimates

Estimated prevalence (number of existing cases) of selected chronic conditions  
Village of Granisle residents: 2009 - 2010



Chronic Disease Estimates for Village of Granisle residents: 2009 - 10 <sup>24</sup>			
Selected Chronic Conditions	Existing cases	New cases / yr	Cost / patient / yr
Depression	70	2	\$3,349
Hypertension	67	4	\$4,097
Diabetes	25	2	\$5,438
Congestive Heart Failure (CHF)	10	1	\$9,865
Cardiovascular Disease (CVD)	17	2	\$8,318
Stroke	3	1	\$10,386
Ischemic Heart Disease (IHD)	11	1	\$8,021
Chronic Kidney Disease (CKD)	8	1	\$11,676
COPD	9	1	\$7,122
Asthma	24	2	\$1,784

These community level estimates are based upon each community's relative share of the total Local Health Area (LHA) population and reflect what "might be expected" at the community level, given the known experience of the larger LHA.

## Promoting Health and Delivering High Quality Services

**Healthy and independent** northerners is what we want to see when we look around northern BC communities. Indeed, that is a large part of what we do see. However, we know that our population is aging very quickly and that with increasing age there often comes an accumulation of chronic health conditions that inhibit independence.

Long-term home support and other services provided by northern health intend to keep people healthy and independent. During 2011, there were 856 residents of the northern interior receiving home-support services. Here is a clinical profile of these residents.<sup>25</sup>

<b>Male</b>	36 %	<b>Married</b>	28 %	<b>Aged 75+</b>	72 %
<b>Female</b>	64 %	<b>Widowed</b>	44 %	<b>Aboriginal</b>	6 %
<b>Frequently Noted Health Conditions</b>					
Hypertension	56 %	Depression	27 %	Osteoporosis	22%
Arthritis	46 %	Diabetes	24 %	Chronic Arterial	20 %
<b>Clients with Multiple Health Conditions</b>					
≤ 3 Conditions	28 %	3 - 5 Conditions	37 %	≥5 Conditions	34 %
<b>Clients with Cognitive Impairment (Cognitive Performance Score)</b>					
No impairment	39 %	Borderline /mild	49 %	Mod - Very Severe	12 %
<b>Clients with independence difficulty in 1- 3 daily activities (IADL Difficulty Scale)</b>					
No difficulty	28 %	Some difficulty	22 %	Great difficulty	50 %

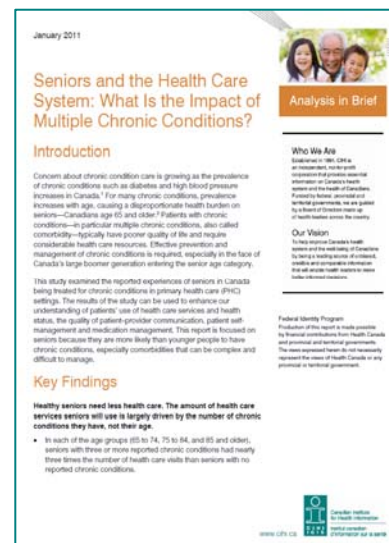
## How do we compare to the rest of Canada?

The most frequently reported chronic conditions affecting Canadian seniors overall are:

- Hypertension (47%)
- Arthritis (27%)
- Hypertension and arthritis (14%)
- Hypertension and heart disease (12%)
- Hypertension and diabetes (11%)

The amount of health care that Canadian seniors need as they age is largely driven by the number of chronic conditions that they have, not their age.<sup>26</sup>

These are just a few of the many findings contained in the report: *Seniors and the Health Care System: What is the Impact of Multiple Chronic Conditions?*



## Promoting Health and Delivering High Quality Services

We employ the best available information related to community characteristics and the determinants of health, population trends, disease occurrences, health needs and health services utilization when assessing services and when planning for the future.

These tables provide a glimpse into some of the inpatient and facility activity.

### Location: where inpatient hospital services were received.<sup>27</sup>

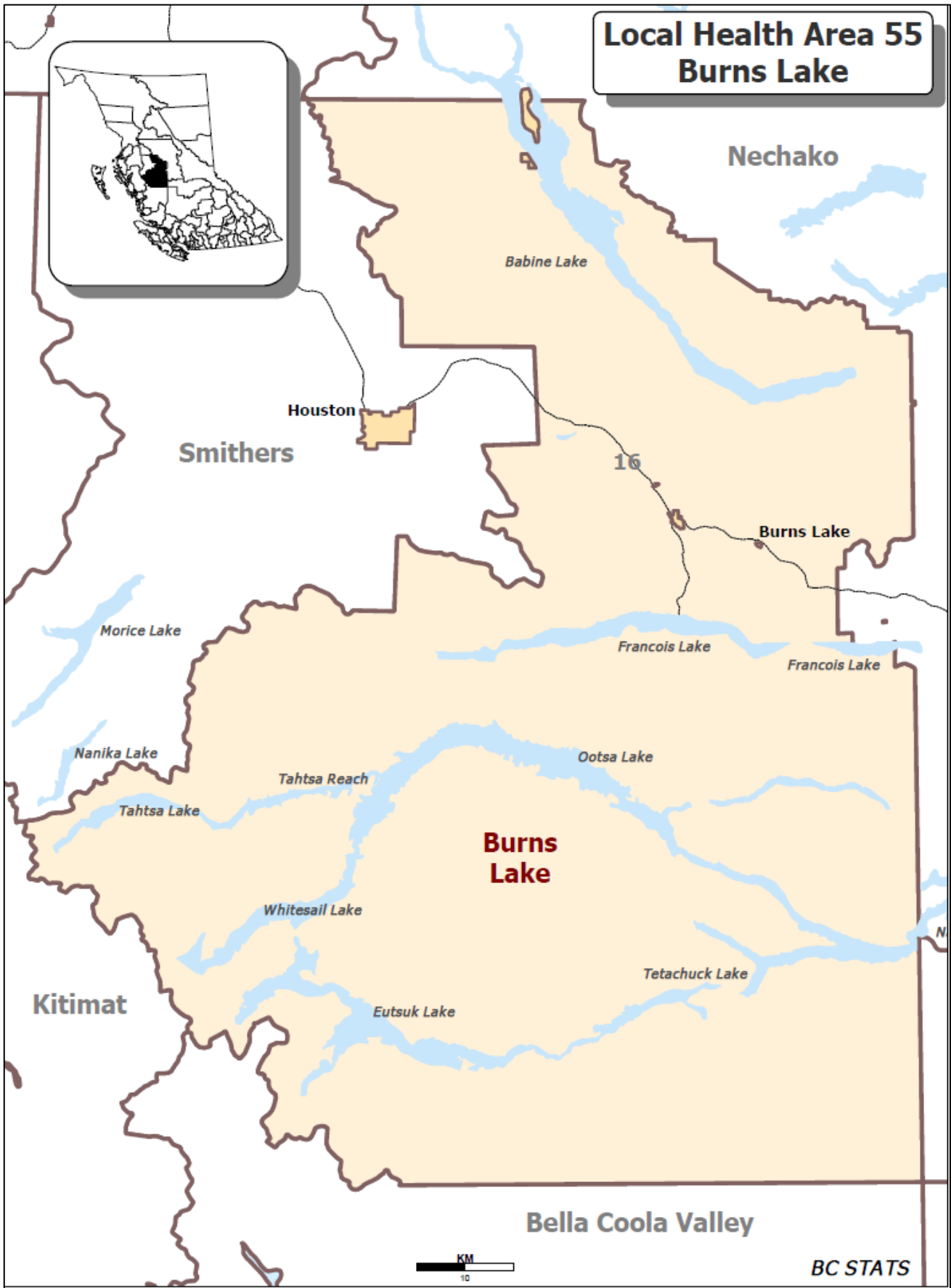
For Granisle residents during the five year period: 2005 / 06 - 2009 / 10.							
Number of Cases and Days	Location of Hospital Care						
	Burns Lake	Prince George	Smithers	Other NHA	Other BC	OOP	Total
Cases	273	127	83	29	61	4	577
Days	1,460	1,020	289	174	400	243	3,586

- Cases These are inpatient cases - client was admitted to the facility.
- Days These are inpatient days - does not include days attributable to ALC.
- Other NH Care was received at a Northern Health facility other than those shown.
- Other BC Care was received at a non Northern Health facility in BC.
- OOP Care was received Out of Province – in most cases this means Alberta.
- ALC Alternate Level of Care. Clients who no longer need acute services and who are waiting to be discharged to a setting more appropriate to their needs.<sup>28</sup>

### Facility and Patient Activity (selected measures).<sup>29</sup>

Granisle Health Centre					
Selected Measures	2006/07	2007/08	2008/09	2009/10	2010/11
Ambulatory visits (excl E/R).	3,458	2,477	2,520	3,003	3,127
Emergency visits (excl ambul)	n/a	n/a	n/a	n/a	n/a
Medical Imaging Tests	n/a	n/a	n/a	n/a	n/a
Lab Tests (excluding respiratory)	n/a	n/a	n/a	n/a	n/a





# Bulkley-Nechako Regional District



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- 4 BC Stats: Population Estimates for Local Health Areas: PEOPLE 35. <http://www.bcstats.gov.bc.ca/data/pop/popstart.asp>
- 5 Population Estimates for Municipalities: BC Stats; 1996-2006, 2006-2010. <http://www.bcstats.gov.bc.ca/data/pop/pop/estspop.asp#totpop>
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This is calendar year data (Jan - Dec). There will be a small mismatch with fiscal year data of Perinatal-Services-BC.
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