

# 2016 State of the County Health Report - McDowell County



The following SOTCH Scorecard was created and submitted **March 10, 2017** in order to meet the requirements for the **McDowell County** annual State of the County's Health (SOTCH) Report.

Clear Impact Scorecard™ is a strategy and performance management software that is accessible through a web browser and designed to support collaboration both inside and outside organizations. WNC Healthy Impact is using Clear Impact Scorecard™ to support the development of electronic CHIPs, SOTCH Reports and Hospital Implementation Strategy scorecards in communities across the region.

Scorecard helps communities organize their community health improvement efforts:

- Develop and communicate shared vision
- Define clear measures of progress
- Share data internally or with partners
- Simplify the way you collect, monitor and report data on your results

The **2015 Community Health Assessment** priority areas are:

- Tobacco Use
- Built Environment and Active Living
- Substance Abuse

The following resources were used/reviewed in order to complete the SOTCH:

- [2017 County Health Data Book](#)
- BRFSS
- Vital Statistics
- County Health Rankings

## Priority 1-Tobacco

<b>R</b>	Tobacco-free lifestyles for all	Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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### Progress Made in Last Year

The following progress was made in 2016 on reducing tobacco use in McDowell County.

- A Tobacco-Free Worksites intervention was initiated in partnership with the WorkFORCE Wellness Program offered by the McDowell Health Coalition. In 2016, four McDowell worksites are using the CDC Health Score Card: Columbia Forest Products, Spencer's Hardware, NC Career Works and Metal Industries. Each worksite has a wellness committee.
- McDowell Access to Health Care (MATCH) program began referring clients to NC Quit Line through a motivational interviewing approach and Fax referral program in 2016. MATCH provides comprehensive support to many of McDowell's most vulnerable residents who are uninsured and struggling with chronic disease and poor health.
- Beginning in July 2016, the Rutherford Polk McDowell Health District (RPMHD) launched a mass media campaign to promote Quitline NC using digital media, printed materials and DVDs and age-appropriate materials for Middle Schools and High Schools.

Outcomes: 659 McDowell County workers now have information about community resources including smoking cessation resources and the Quitline NC . 276 McDowell County workers have participated in Health and Wellness Intervention hosted at their worksite.

Outcomes: using the CDC's Tips campaign ads, guidance from Ann Staples and Karen Caldwell with the NC Tobacco Prevention and Control Branch and Moffit Media, \$10,000 in digital media ads were placed and viewed by the target population of McDowell adults. NC Quitline calls increased by 10% as a result. 50 Tobacco prevention posters and Quitline NC Brochures were distributed to all local partners.

4.RPMHD's Healthy Communities Program held a Triangulum Seminar for Educators to increase skills among Middle School and High School teachers and administrators to deliver tobacco prevention programs.

Outcomes: 42 Health and Physical Education Teachers, School Resource Officers, School Nurses and Administrators attended an extensive training about tobacco products including up to date information about e-cigarettes and vapor products. New evidence-based curriculum was distributed to all Middle and High Schools in McDowell County. 60 Tobacco prevention posters were distributed to schools.

5.Brief Cessation Counseling (5As) Training was provided to clinicians and mid-level staff at three McDowell partnering agencies in 2016.

Outcomes: 23 people received 5As Brief Cessation Training in 2016.

<b>I</b>	Percent of births to mothers who smoked while pregnant McDowell County	2013	23.6%	—	↗ 1	9% ↗
<b>I</b>	<b>wnc</b> Percent of births to mothers who smoked while pregnant (WNC)	2013	19.4%	—	↗ 1	-3% ↘
<b>I</b>	Percent of employees who breathed someone else's cigarette smoke at work in the past week McDowell County	2015	36.6%	—	↗ 1	106% ↗
<b>I</b>	<b>wnc</b> Percent of employees who breathed someone else's cigarette smoke within the last week (WNC)	2015	24.1%	—	↗ 1	70% ↗



## 100% Tobacco-Free Schools

Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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### What Is It?

100% Tobacco-Free School was identified by RPMHD as an action, that when combined with other actions in our community, that has a reasonable chance of making a difference in Tobacco Use in our community. This is a new program in our community.

The audience for this Tobacco Free School initiative are pregnant women in school, and the program aims to make a difference at the organizational/policy; and environmental change levels. Implementation will take place in schools.

### Partners

The partners for this intervention include:

- Lead Agency: RPMHD Role: Convener/Implementer
- Target population representative: School Health Advisory Council (SHAC) represents children and families. Role: Program guidance and support
- Rutherford County Schools will enforce 100% TF Schools
- Tobacco and Control Branch will provide guidance
- Health Coalition Role: program support
- WNC Healthy Impact Role: Evaluation support



## Mass Media Campaign to Promote Quitline NC

Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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### What Is It?

Mass Media Campaign to Promote Quit Line NC with ads that relate to pregnancy was identified by RPMHD as an action, that when combined with other actions in our community, that has a reasonable chance of making a difference in Tobacco Use in our community. This is a ongoing program in our community.

The audience for this Mass Media Campaign are the general population, especially low income, low educational status, women ages 18-39 and pregnant women. The program aims to make a difference at the individual/interpersonal behavior; and environmental change levels. Implementation will take place in Mobile Devices Schools, Community Colleges, Clinics, Social Services, Libraries, Mental and Behavioral Health Agencies.

**Partners**

The partners for this strategy include:

- Lead Agency: RPMHD Role: Project Coordinator
- Target population representative: Health Department Clients, WIC Staff and Maternity Clinicians, general population, Spanish speaking clients and staff from Health Department will test messages in Spanish. Role: Market test media messages, Promote Quitline, Access Quitline Coaching for Cessation
- NC Tobacco and Control Branch will provide Technical Assistance.
- Moffit Media will place digital ads and monitor success rates, provide reports to RPMHD.
- McDowell Health Coalition Board and members will promote campaign
- McDowell Hospital will promote campaign and provide cessation resources, participate in Quitline referrals wherever appropriate. Role: Promote Quitline. Refer smokers for cessation resources to quit tobacco use.



**Implementation of the 5As Brief Cessation Counseling through the Maternal Child Health Initiative (MCHI)**

Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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**What Is It?**

Implementation of the 5As Brief Cessation Counseling through the Maternal Child Health Initiative (MCHI) was identified by RPMHD as an action, that when combined with other actions in our community, that has a reasonable chance of making a difference in Tobacco Use in our community. This is an ongoing program in our community.

The audience for this Cessation Counseling program are clinicians who are current smokers: WIC and Nurse Family Partnership Staff at Health Department, Maternal Clinical Staff, Mental Health and Behavioral Health Staff in local clinics, and pregnant women who smoke. The initiative aims to make a difference at the individual/interpersonal behavior level. Implementation will take place in Staff Meetings and Collaborative Meetings for Train the Trainer sessions. Trained Clinicians will deliver 5As Counseling to current smokers in clinical settings.

**Partners**

The partners for this initiative include:

- Lead Agency: RPMHD Role: Provide 5As Training to Staff and to patients who are pregnant.
- Target population representative: Behavioral Health Clients and Staff represent the intended population of current smokers. Role: Program guidance and participation in referring smokers to cessation resources.
- McDowell Hospital will provide cessation resources.
- McDowell Health Coalition will provide program promotion to local Clinics.
- NC Tobacco and Control Branch will provide technical assistance and assistance with training as needed.



**Triangulum Seminar for Educators**

Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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**What Is It?**

Triangulum Seminar for Educators was identified by RPMHD as an action, that when combined with other actions in our community, that has a reasonable chance of making a difference in Tobacco Use in our community. This is a new program in our community. The audience for this Seminar are Educators, school nurses, SROs, Counselors, ultimately MS and HS students, and the program aims to make a difference at the individual/interpersonal behavior level. Middle School and High School students are an indirect intended population – they will receive education via their teachers and others listed above. Implementation will take place in schools and the community.

**Partners**

The partners for this intervention include:

- **Lead Agency: RPMHD Role:** Project Coordinator
- **Target population representative:** Polk School Administrators, Educators, school nurses, SROs, Counselors, ultimately MS and HS students. **Role:** Attend Seminar, use new curriculum to deliver Tobacco Prevention Education to MS and HS students.
- NC Tobacco and Control Branch will provide training
- RHA Prevention Services will delivery best practices and curriculum updates for Tobacco Prevention Education.
- Schools will provide space and give Teachers time to attend Seminar.
- Sheriff's Department will provide SRO to attend Seminar and apply new information when working with students. **Role:** Attend and Promote Seminar. Extend new research on ENDS to appropriate intended audiences. Use new curriculum and related information to prevent use of e-cigarettes and other harmful substances among youth and adults.

## Priority 2- Built environment and active living

R	M	Easy access to healthy foods and spaces for all	Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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### Progress Made in Last Year

The following progress was made in 2016 on the Built Environment and Active Living in McDowell County:

- 4 Worksites are using the CDC Scorecard to improve employee health and wellness.
- 276 McDowell County workers have participated in Health and Wellness Interventions hosted at their worksite.
- 25 McDowell County workers completed the Diabetes Prevention Program at their worksite.
- 12 McDowell County workers now have mental/behavioral health support.
- McDowell Hospital is partnering with McDowell Health Coalition's WorkForce Wellness Program to offer health screenings at worksites.
- Physical activity opportunities have increased by expanding Greenways, parks and outdoor recreation spaces.
- Promotions for events to increase physical activity have expanded.
- Plans for 2017 include offering wellness programs at greenways and parks.
- Engaging more faith communities around active living events and opportunities.
- A shared goal is to increase the number of ongoing programs that encourage walking and biking to or at school. To that end, Walk to school day events were held at five McDowell Elementary Schools and two McDowell Middle Schools. Participation in Walk to School Events increased by 55% in 2016 in our Region 2. 324 people participated in 2016.
- Elementary Schools in McDowell are teaching "Let's Go NC!" Bicycle Safety Classes in 2017.
- Active routes to School & Let's Go! NC biking curriculum improvement and expansion is planned for 2017.

I		Percentage of adults meeting recommended physical activity requirements McDowell County	2015	461	—	↘ 1	-13% ↓
I	wnc	Percentage of adults meeting recommended PA reqs (WNC)	2015	49.8%	—	↘ 1	-6% ↓
I		Percentage of adults at a healthy weight (BMI between 18.5 and 24.9)	2015	24.6%	—	↘ 1	-16% ↓
I	wnc	Percentage of adults at a healthy weight (WNC)	2015	33.5%	—	↘ 1	-1% ↓

P	Worksite Wellness Programs	Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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### What Is It?

Workforce Wellness Program was identified by McDowell Health Coalition, as an action, that when combined with other actions in our community, that has a reasonable chance of making a difference in Physical Activity/Healthy Living in our community. This is a new program in our community.

The audience for this Workforce Wellness are Working Adults, and the program aims to make a difference at the individual/interpersonal behavior; organizational/policy; and environmental change levels. Implementation will take place in worksites.

**Partners**

The partners for this intervention include:

- Lead Agency: McDowell Health Coalition Role: Workforce Wellness Programs
- Target population representative: Local employers and Safety Committees will help with program design and implementation. Role: Program guidance and implementation
- McDowell Trails will help to develop funds to promote recreation spaces
- Chamber of Commerce will help to identify worksites and promote programs
- RPMHD, will provide program support through the Healthy Communities Program
- HEAL Catalyst, will provide program support
- McDowell Hospital will provide screenings and other program support
- NC Worksite Wellness and School Coordinator will give program guidance
- CDC Scorecard Partner: WNC Healthy Impact., support for evaluation
- Other Partner Roles: Increase capacity, sustainability and participation

<b>P</b>	<b>Build Active Living Communities</b>	Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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**What Is It?**

Build Active Living Communities was identified by McDowell Health Department as an action, that when combined with other actions in our community, that has a reasonable chance of making a difference in Healthy Living in our community. This is an ongoing program in our community.

The audience for this program are inactive adults and children, and the program aims to make a difference at the organizational/policy; and environmental change levels. Implementation will take place in the community, public grounds, parks, schools, and recreation spaces.

**Partners**

The partners for this intervention include:

- Lead Agency: McDowell Health Coalition and Active Routes to Schools Program Role: Convene partners and coordinate collective impact
- Target population representative: School staff and parents Role: Program guidance
- Active Routes to Schools Region 2, City of Marion,
- McDowell Trails will provide funding support
- McDowell Schools will provide space and participate in programs
- HEAL Catalyst for program support
- RPMHD supplies facilities, program support
- WNC Healthy Impact will provide evaluation support
- Role of all partners: To promote community events and spaces to be active

<b>P</b>	<b>Offer evidence-based clinical preventive screening, counseling and treatment guidelines</b>	Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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**Partners**

The partners for this evidence-based strategy include:

- Lead Agency: RPMHD Role: Convene and organize partners engaged in this intervention
- Target population representative: Clinics and inactive adults. Role: Program and marketing guidance, program implementation and participation.
- Partners: McDowell Health Coalition Staff, including Workforce Health Advisor, MATCH Program Staff will

provide program support.

- RPMHD Clinics, McDowell Hospital System, local clinics will implement program. Role: Offer evidence-based clinical preventive screening, counseling and treatment guideline

### What We Do

Clinical Guidelines was identified by McDowell Health Coalition as an action, that when combined with other actions in our community, that has a reasonable chance of making a difference in Healthy Living in our community. This is an ongoing program in our community.

The audience for Clinical Guidelines are inactive adults, and the program aims to make a difference at the individual/interpersonal behavior change levels. Implementation will take place in clinics.

## Priority 3-Substance Abuse

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### Addiction-free lifestyles

Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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#### Progress Made in Last Year

The following progress was made in 2016 on Substance Abuse Prevention in McDowell County

- Ongoing Medicine Take Back Events are well publicized and well attended. Two Medicine Take Back Events were held in 2016.
- The local Substance Abuse Action Team received new training related to addiction recovery. Currently there is in discussion about creating a "Face It TOGETHER" addiction recovery center in McDowell County.
- WorkFORCE Wellness is working to create a stigma-free environment in worksites where employees who struggle with mental illness or addiction can openly discuss with their employer and be linked to the appropriate rehabilitative resources and services without fear of judgment or losing their job.
- S.A. Action Team is exploring on-site counseling at worksites.
- Youth Subcommittee is pursuing grant funding for the pride surveys for youth.
- Coordinated an Attendance Reward Program for three local schools significantly improving school attendance numbers
- Supported Red Ribbon Week at McDowell County Schools, reaching hundreds of children and families
- Plans are underway to recruit regional and state contacts to get a Substance Abuse Prevention speaker to present at area schools

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Percent of births to mothers who smoked while pregnant McDowell County

2013	23.6%	—	↗ 1	9% ↑
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I

wnc Percent of births to mothers who smoked while pregnant (WNC)

2013	19.4%	—	↗ 1	-3% ↓
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Substance Abuse Prevention Programs

Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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100% Tobacco-Free Schools

Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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Implementation of the 5As Brief Cessation Counseling

Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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Mass Media Campaign to Promote Quitline NC

Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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## New and Emerging Issue & Initiatives

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Monitor New and Emerging Issues

Time Period	Actual Value	Target Value	Current Trend	Baseline % Change
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Narrative

These are the new or emerging issues in our community that were not identified as priorities in our 2015 CHA.

- **West Marion Project:**

A team of community leaders from West Marion was formed, with the help of the Built Environment POD chair and Rural Support Partners, and became the Planning Team for the West Marion Project. The Planning Team scheduled forums in which the entire community was encouraged to attend to learn about resources that are available in the county and to share the needs and concerns that they had about health and social determinants of health. The community members (about 40 in attendance at each forum) identified transportation, housing, youth leadership, childcare and healthy food access as their “top” major concerns. Forums were held on each major topic and action plans were developed. New leadership rose out of these community forums.

Actions that have occurred because of the forums:

- A transportation grant was requested and received to provide transportation to and from key locations (doctor offices, grocery stores, etc.) for the West Marion area.
- Free lunches were served to children (under 18) in the West Marion community during the summer 2016 (about 90 meals were served).
- A food pantry hub is planned the West Marion area. The members of the community also plan to plant a community garden.
- The community members served a Thanksgiving meal to community members and shared the information/resources that they had received at the forums.
- A youth group was formed, called Project Revive, with leadership from the West Marion young adults. They held a Back to School event where they gave out about 90 book bags filled with donated items. They also collected and delivered about 10 boxes of needed items for the McDowell Mission (homeless shelters) during the Christmas season.
- The West Marion Project group and leaders from the Built Environment POD are in the process of writing a grant to continue the forums and work towards a better community for the next three years.
- A housing committee was formed (will report to the Built Environment POD) mainly because of the results of these forums to investigate the possibility of getting a group like Habitat for Humanity back in the county. This committee is in the process of writing a grant for \$100,000 for urgent repairs to houses owned by the elderly, disabled, and at-risk population. This grant would be for the entire county, not just the West Marion area
- A Project Coordinator was hired for the West Marion Project.
- Child care solutions are being explored.
- A \$100, 000 grant from NC Housing Finance Agency will be submitted in early 2017 to help with emergency repairs for low-income residents. Each household can receive up to \$8000.

### **McDowell County 2015 Leading Causes of Death**

<b>Cause of Death</b>	<b>Number%</b>	
Diseases of the heart	120	24.2
Cancer	115	23.2
Chronic LRD	40	8.1
Alzheimer’s Disease	33	6.7
Cerebrovascular Disease	18	3.6
All other unintentional injuries	15	3.4
Diabetes Mellitus	17	2.8
Intentional self-harm (suicide)	11	2.2
Influenza	10	2
All other causes (Residual)	109	22
All Causes (some not listed)	485	100



## Narrative

The following are new initiatives or changes in our community in 2016 or 2017.

### Example 1 – Hold Community Forums in underserved areas.

The Built Environment POD is in the process of applying for a grant that will expand the number of areas that will have community forums. We plan is to move into four communities in the county. We will start with the East Marion area and then move on to Old Fort. These will be followed in the latter part of the year with Nebo and Glenwood. The grant would help pay for “Train the Training” sessions where leaders from the POD and the communities will be trained to facilitate and organize the forums. The grant would also pay for consultants, support, and materials that would be needed to carry out these forums. Information about available resources will be shared with the communities and their needs for healthier options and services will be addressed.

The goal is to gather information from these communities that will help to generate a Healthy Places master plan for the county that will be given to the McDowell County Commissioners for their consideration.

### Example 2 – Access to healthy foods

Access to healthy foods has emerged as series of new initiatives through the work of the Local Food Access and Awareness POD’s Food & Health Hub. A new Feasibility Study is underway to guide the work and priorities. The Catalyst for Healthy Eating and Active Living coordinated two gleaning opportunities at a local farm. More events like this are planned for the 2017 growing season using local volunteers.

The NC Cooperative Extension provides leadership for the Local Food Policy Council. The Extension also offers programs to increase access to healthy food such as: Apple Pruning Workshops, Bee Keeping, Vermicomposting, Canning Classes and more.

### Example 3 – Community Food and Health Hub

Goals: Coordinate food pantries to better support food insecure community members.

Offer healthy cooking demonstrations and food preservation classes at churches, farmers markets, schools, and community events.

Support local food options in Lunch Bunch, soup kitchens, and food pantries.

Encourage SNAP recipients to purchase local food at the farmers market.

#### *Accomplishments:*

- Coordinated meetings for food pantry leaders to find ways to work together and improve communication
- Created a Local Food Advisory Council (LFAC) to strengthen our local food system
- Supported the Marion Tailgate Market by communicating with the public about the Fresh Bucks program and ultimately increased EBT usage at the market
- Awarded a grant for a feasibility study for the Community Food and Health Hub, hired consultant to complete the study, and organized an advisory group to oversee the work
- Coordinated two days of gleaning at a local farm (Irma’s Produce) to gather produce for local pantries
- Surveyed the community(consumers) producers(farmers) to understand the demand and supply for local food in McDowell County

### Example 3 – Expansion of Greenways and Trails

The Fonta Flora Trail is now under construction. It is a loop around the 6,800-acre Lake James, nestled in the foothills of the Pisgah National Forest, with views into the Linville Gorge Wilderness.

The plan is to build trails sustainably to withstand weather, heavy use and time, including a mix of paved greenway and natural trail, connecting towns by trails already built and some that need to be created.

### Example 4- McDowell Access to Care and Health (MATCH)

McDowell Access to Care and Health (MATCH) Program began serving clients in 2106. MATCH is a community-centered network designed to improve access to care, engage its participants in their physical, behavioral, and social health, and utilize community resources in the best way possible.

MATCH provides comprehensive support to many of McDowell's most vulnerable residents who are uninsured and struggling with chronic disease and poor health. Participants' physical, behavioral, and social health needs are met through these wrap around services:

- Health insurance navigation
- Assistance with accessing primary and specialty health care services, regardless of ability to pay
- Complete needs assessments with regards to all aspects of each participant's health and well-being
- Chronic disease management
- Assistance navigating both the health care system and community programs/resources
- Initiating and following-up on referrals to beneficial programs and resources
- One-on-one support and personalized care plans

*Outcomes:*

- 590 individuals served in our first year, of which 376 qualified and were enrolled into the MATCH Program.
  - 3,816 individual instances of community navigation which resulted in 533 completed referrals and 251 of our clients connected to at least one additional service like transportation, dental care, and job training
  - Through donated care from the McDowell Hospital and Carolinas Health Care System our clients accessed over \$100,000 in free primary care in order to gain access to preventative care and chronic disease management
  - 64 uninsured individuals obtained ACA Health Insurance Marketplace coverage, education or assistance from MATCH enrollment specialist
  - 65% of individuals with diabetes who were enrolled in the program for at least 3 months being well-controlled
  - 56% reduction in ED utilization, when comparing pre and post visits of those enrolled in the program for at least 6 months
  - 51% of MATCH enrollees improved in at least one goal (ex: keeping appointments, adhering to a care plan, or reduced # of days experiencing medical, social, or mental health crisis.)
-