

2013

Yancey County Community Health Improvement Plan



**2013 Yancey County
COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)**

ACKNOWLEDGEMENTS

The Toe River Health District as part of a community-wide action planning process developed this document.

This CHIP format draws heavily on the work of the Wisconsin Association of Local Health Departments and Boards (WALHDAB), particularly their Template Implementation Plan, as well as actual examples from Bexar County, Texas. This product was also informed many other organizations, which can be found in the [reference section](#) at the end of this document.

Our collaborative action planning process and community health improvement plan (CHIP) product were also supported by the technical assistance and tools available through our participation in [WNC Healthy Impact](#), a partnership between hospitals and health departments in Western North Carolina designed to improve community health.

The principal source of secondary health data for this report was the NC State Center for Health Statistics (NC SCHS), including its County Health Data Books, Behavioral Risk Factor Surveillance System, and Vital Statistics unit. Other health data sources included: NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services; National Center for Health Statistics; NC DETECT and the NC DPH Oral Health Section.

Please contact Jessica Farley, Health Promotions Coordinator, for Toe River Health District jessica.farley@trhd.dst.nc.us if you have any questions or would like to discuss more about how to get involved in moving forward the strategies outlined in this community health improvement plan (CHIP).

Executive Summary

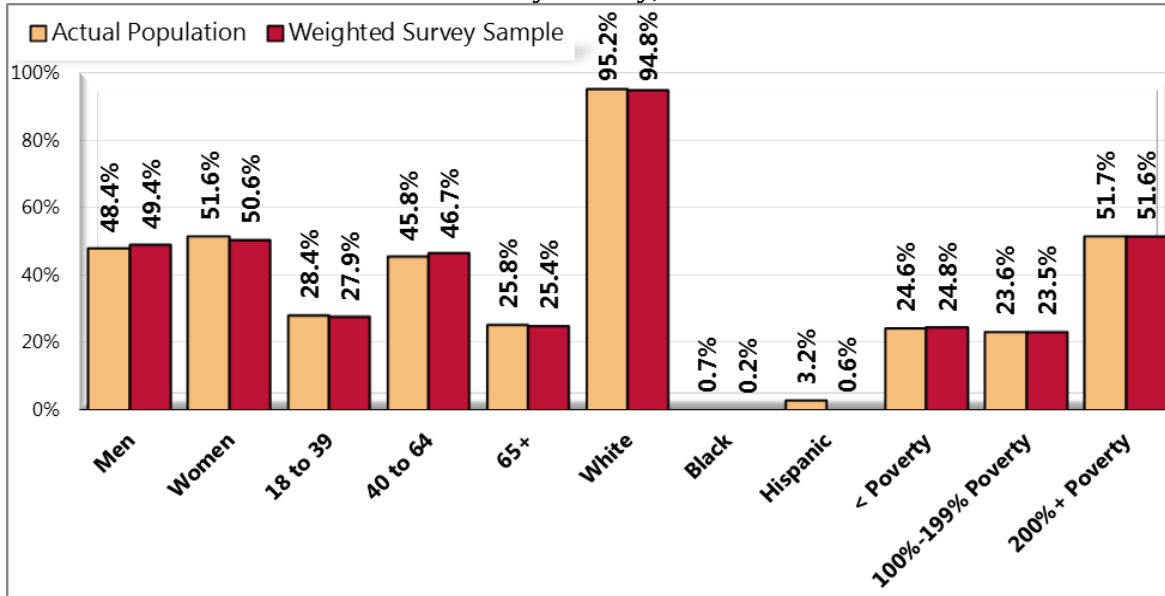
Overview of Process and Purpose

The purpose of the Community Health Improvement Plan, or CHIP, is to help focus and solidify, each of our partners' agency's commitment to improving the health of the community through key health issues. The goal is that with sustained and focused effort, a wide range of public health partners and stakeholders engaged in assessment, planning, and action will be able to document measured improvement in the identified health priorities over the coming years. This CHIP in no way is meant to detail all the health issues facing Yancey County and its residents nor is it able to provide information on all the great programs and initiatives that are taking place in our community. This CHIP is, however, an action-oriented strategic plan outlining the priority health issues identified for Yancey County in the 2013 Community Health Assessment, and an overview of how these issues will be addressed in the next three years.

The 2013 Yancey County CHA (Community Health Assessment) was conducted by Professional Research Consultants, Inc. (PRC). PRC is a nationally recognized healthcare consulting firm with extensive experience conducting Community Health Needs Assessments such as this in hundreds of communities across the United States since 1994.

As part of this community health assessment, 200 community members completed a questionnaire regarding their health status, health behaviors, interactions with clinical care services, support for certain health-related policies, and factors that impact their quality of life. To accurately represent the population studied, PRC worked to minimize bias through application of a proven telephone methodology and random-selection techniques. While this random sampling of the population produces a highly representative sample, it is a common and preferred practice to "weight" the raw data to improve this representativeness even further. This is accomplished by adjusting the results of a random sample to match the geographic distribution and demographic characteristics of the population surveyed (poststratification), so as to eliminate any naturally occurring bias. Specifically, once the raw data are gathered, respondents are examined by key demographic characteristics (namely gender, age, race, ethnicity, and poverty status) and a statistical application package applies weighting variables that produce a sample which more closely matches the population for these characteristics. Thus, while the integrity of each individual's responses is maintained, one respondent's responses may contribute to the whole the same weight as, for example, 1.1 respondents. Another respondent, whose demographic characteristics may have been slightly oversampled, may contribute the same weight as 0.9 respondents. In order to determine WNC regional estimates, county responses were weighted in proportion to the actual population distribution so as to appropriately represent Western North Carolina as a whole.

Population and Sample Characteristics Yancey County, 2012



After the 2012 Yancey County CHA was completed, a public forum was held on April 16, 2013 at the Yancey County Public Library to present the results. Amy Sheele of Director of Healthy Yancey and Graham’s Children’s Health welcomed the attendees and gave an overview of the Community Health Assessment Process. Jessica Farley, Health Promotions Coordinator for the Toe River Health District, gave a brief history of how the last Yancey County CHA was completed. Allison Grindstaff, Marketing and Communications Director of Blue Ridge Regional Hospital presented the primary data (random surveys completed by community members) and secondary data (statistical data compiled from hospitals and death certificates) from the CHA. The top ten health concerns identified in the CHA were:

1. Substance Abuse (Prescription & Recreational Drugs, Alcohol...Addressing Chronic Drinking)
2. Cancer (All types)
3. Healthy Living Behaviors/Lifestyles
(Obesity, Poor Nutrition, Physical Inactivity, Consumption of Fruits and Veggies, Use of Tobacco Products)
4. Chronic Disease (Heart Disease, Respiratory Disease, Alzheimer’s, Diabetes, Hypertension)
5. Access to Healthcare (Lack of Health Insurance, Lack of Healthcare/Healthcare Providers)
6. Inability to Get Mental Health Services
7. Economy/Unemployment
(Assistance for Low-Income Households, Food Assistance, Heating Oil Assistance, Expenses of Everyday Life)
8. Teen Pregnancy
9. Aging Problems & Care For Elderly
10. Radon

Through a voting process, the “the top ten list” was narrowed to three priorities to focus on over the next three years.

List of Health Priorities

The top three health priorities of the Yancey Health District as determined by the 2012 CHA process are:

1. Substance Abuse Prevention and Increasing Availability/Access of Mental Health Services
2. Cancer
3. Healthy Living Behaviors and Lifestyles

The tables on the following pages provide an overview of indicators in Yancey County, grouped to correspond with the Focus Areas presented in Healthy People 2020.

General Review of Data and Trends

County Health Ranking

The table below presents the health outcome and health factor rankings for Yancey County in comparison to other 99 counties in the state of North Carolina.

Geography	County Rank (Out of 100)						Overall Rank
	Health Outcomes		Health Factors				
	Mortality	Morbidity	Health Behaviors	Clinical Care	Social & Economic Factors	Physical Environment	
Yancey County	11	40	13	76	52	44	16

Source: *County Health Rankings and Roadmaps, 2012.*

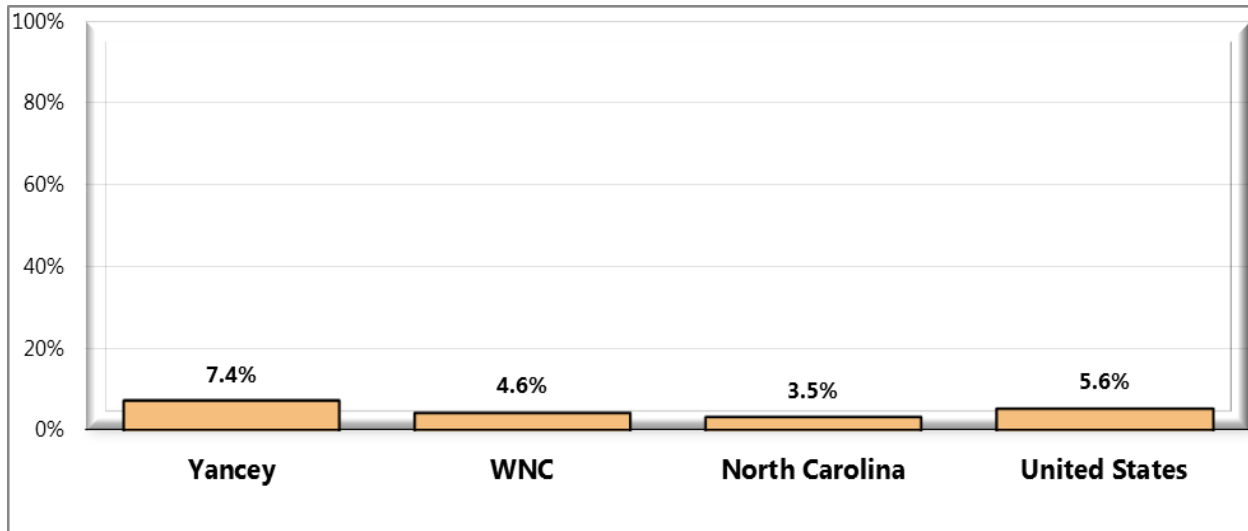
Available at <http://www.countyhealthrankings.org/app/north-carolina/2012/rankings/outcomes/overall>

Substance Abuse

Substance abuse can include a number of substances, including alcohol, prescription drugs and illicit drugs. The 2012 CHA surveyed Yancey County residents on behaviors that can lead to substance abuse.

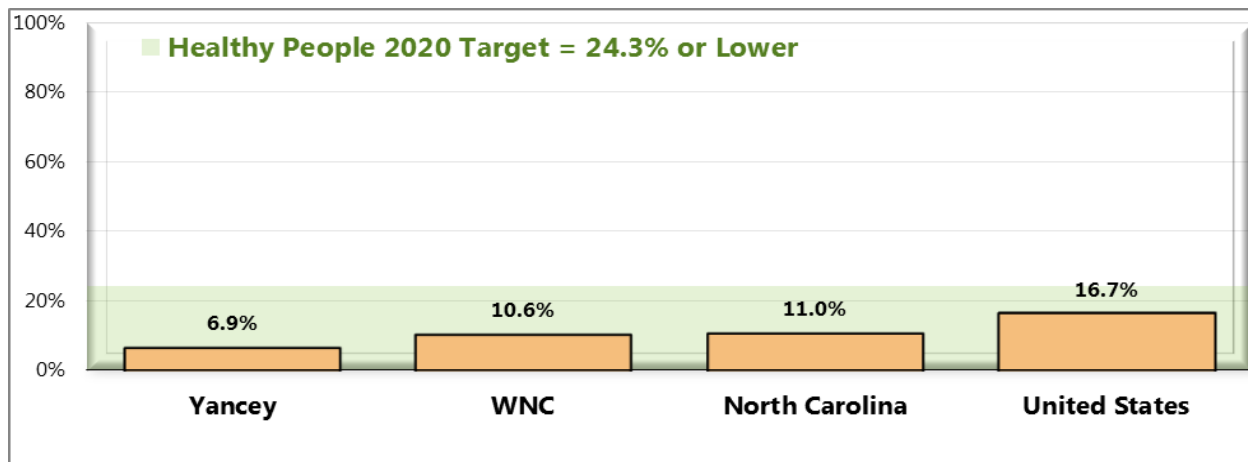
Chronic Drinking

A total of 7.4 percent of area adults averaged two or more drinks of alcohol per day in the month prior to the survey, more than Western North Carolina, North Carolina and national averages.



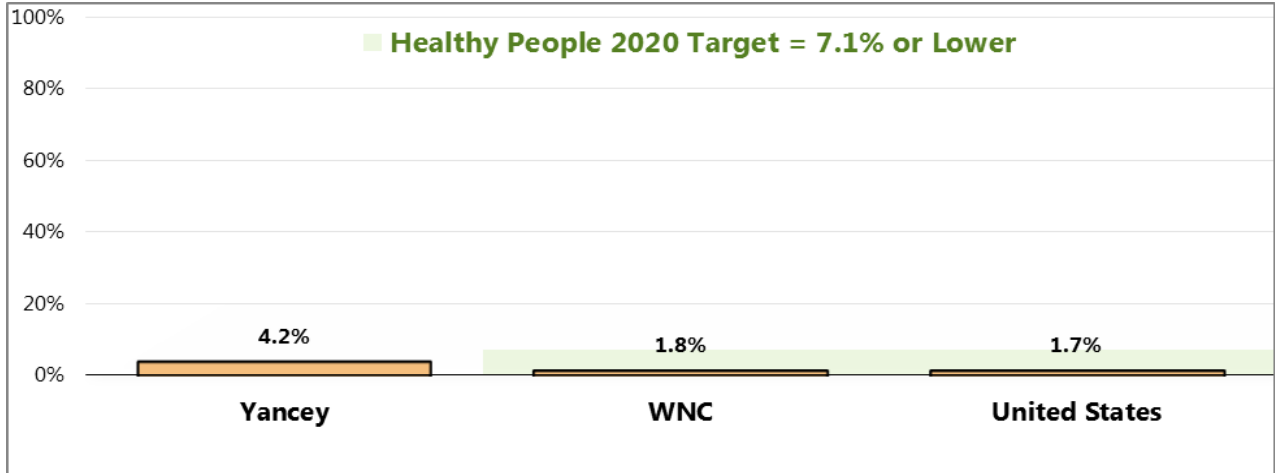
Binge Drinking

A total of 6.9 percent of Yancey County adults report binge drinking. This is lower than the WNC and NC averages, and well below the US average.



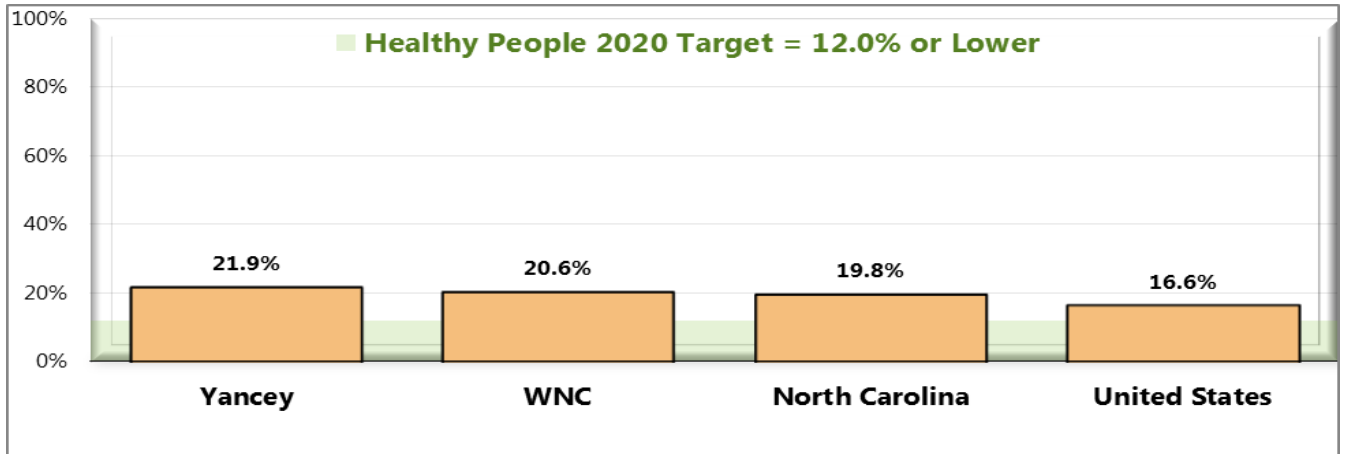
Illicit Drug Use Among Adults

A total of 4.2 percent of Yancey County adults acknowledged using illicit drugs in the month prior to the survey, larger than the regional and national averages.



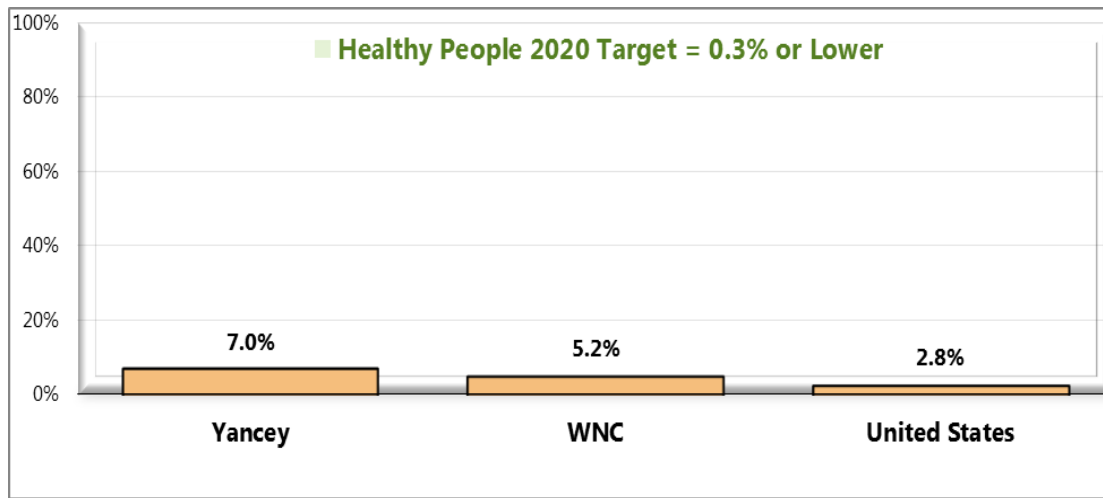
Cigarette Smoking

A total of 21.9 percent of Yancey County adults currently report smoking cigarettes, either regularly higher than the Western North Carolina, North Carolina and US averages.



Other Tobacco Use

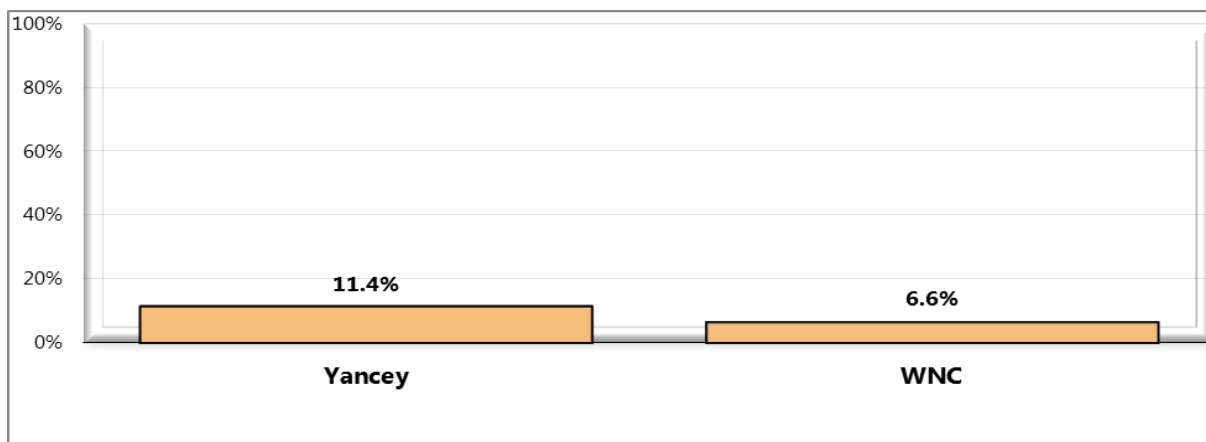
A total of 7 percent of Yancey County adults use some type of smokeless tobacco every day or on some days, higher than Western North Carolina and US averages.



Access to Mental Health Services

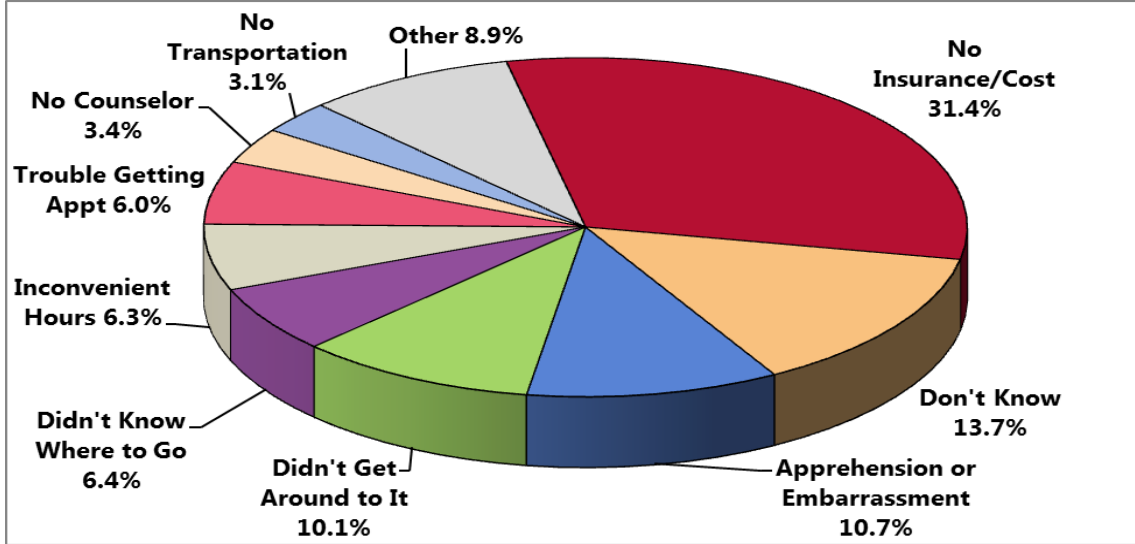
Compared to the state and its peer counties, Yancey has half the number of psychologists and counselors per 10,000 population. Western Highland Network LME, which includes Yancey has the highest hospital emergency room mental health admissions rate in the state. Blue Ridge Regional Hospital reports an increase in emergency room use and admissions for the psychologically unstable, often without ability to pay and the hospital has no psychiatric beds. Law enforcement reports spending much of their time detaining, responding, and supervising emergency MH situations due to lack of local psychiatric support/resources.

Among Yancey County survey respondents, 11.4 percent acknowledge that there was a time in the past 12 months when they needed mental health care or counseling but did not get it at that time. Over 30 percent of respondents reported that lack of insurance prevented them from getting needed mental health services.



Primary Reason for Inability to Access Mental Health Services

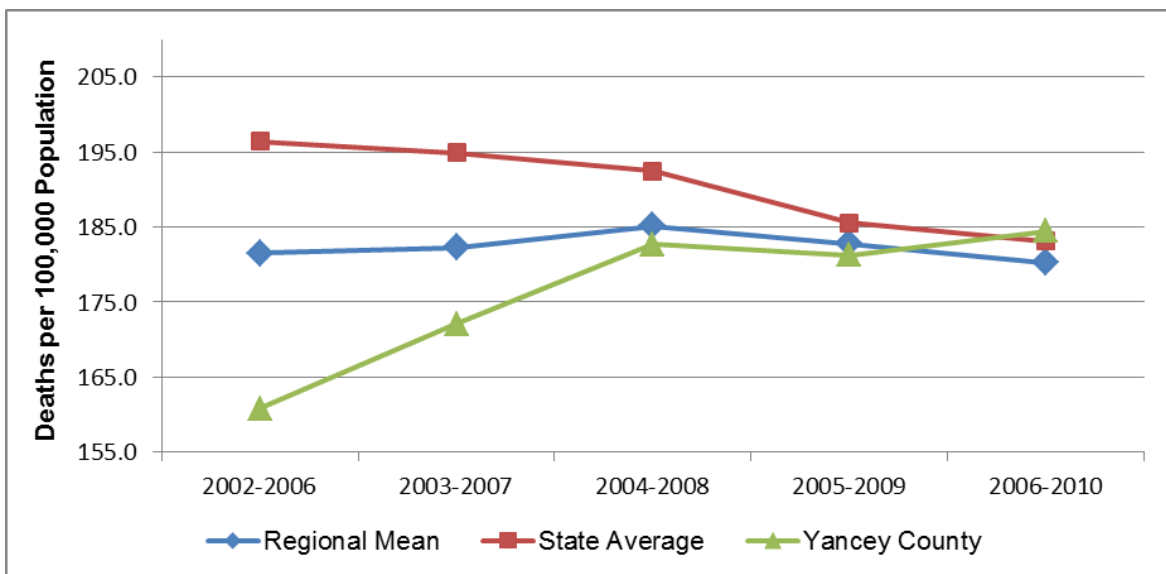
Adults Unable to Get Needed Mental Health Care in the Past Year



Cancer

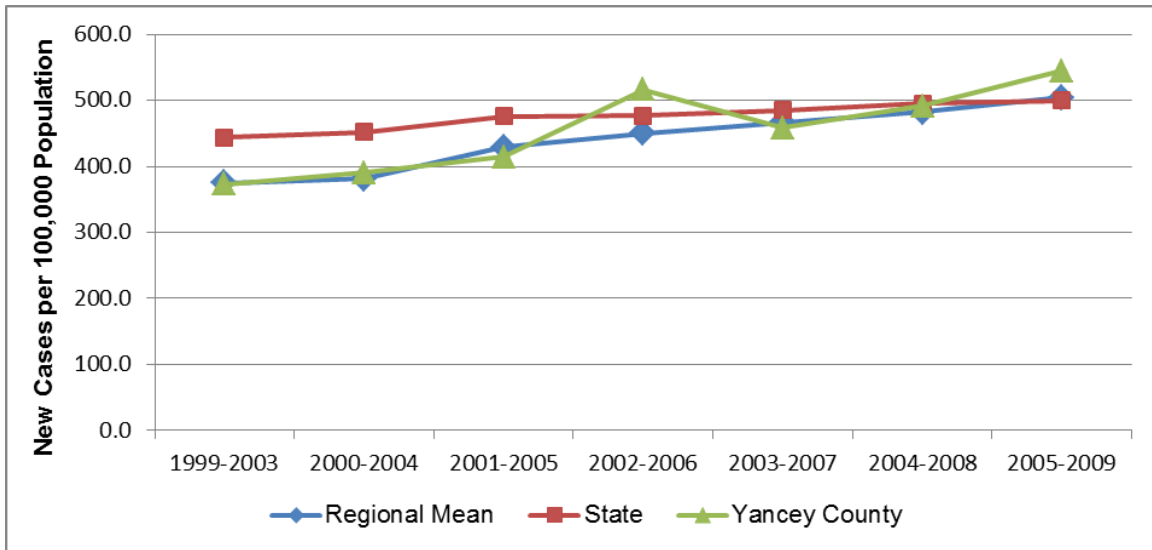
Taken together, cancers of all types compose the second leading cause of death in WNC, but the first leading cause of death in Yancey County in 2006-2010. The total cancer mortality rate in Yancey County rose from 160.8 in 2002-2006 to 184.5 in 2006-2010, an increase of 14.7percent. The total cancer mortality rate for the state as a whole fell 6.8percent (from 196.4 to 183.1) over the period cited, while the comparable rate for the region fell from 181.5 to 180.3. In the last two aggregate periods the total cancer mortality rate in Yancey County exceeded the comparable rates for both the region and the state.

Total Cancer Mortality Rate, Deaths per 100,000 Population



While total cancer incidence rates in Yancey County, WNC, and NC as a whole all increased over the period cited, the slope of increase was greater in Yancey County than in the other two jurisdictions.

Total Cancer Incidence Rate, New Cases per 100,000 Population



In Yancey County, as throughout both Western North Carolina and the state, there are four site-specific cancers that cause most cancer deaths: breast cancer, colon cancer, lung cancer, and prostate cancer.

Age-Adjusted Mortality Rates for Major Site-Specific Cancers (2006-2010)

Geography	Deaths per 100,000 Population			
	Lung Cancer	Breast Cancer	Prostate Cancer	Colon Cancer
Yancey County	53.9	n/a	n/a	21.0
Regional Mean	54.7	24.3	22.9	16.6
State	55.9	23.4	25.5	16.0

For the 2005-2009 aggregate period in Yancey County, prostate cancer was the site-specific cancer with the highest incidence rate, followed by breast cancer, lung cancer, and colon cancer. The Yancey County incidence rates for prostate cancer, lung cancer and colon cancer were higher, and the county incidence rate for breast cancer was lower, than the comparable rates region-wide and statewide.

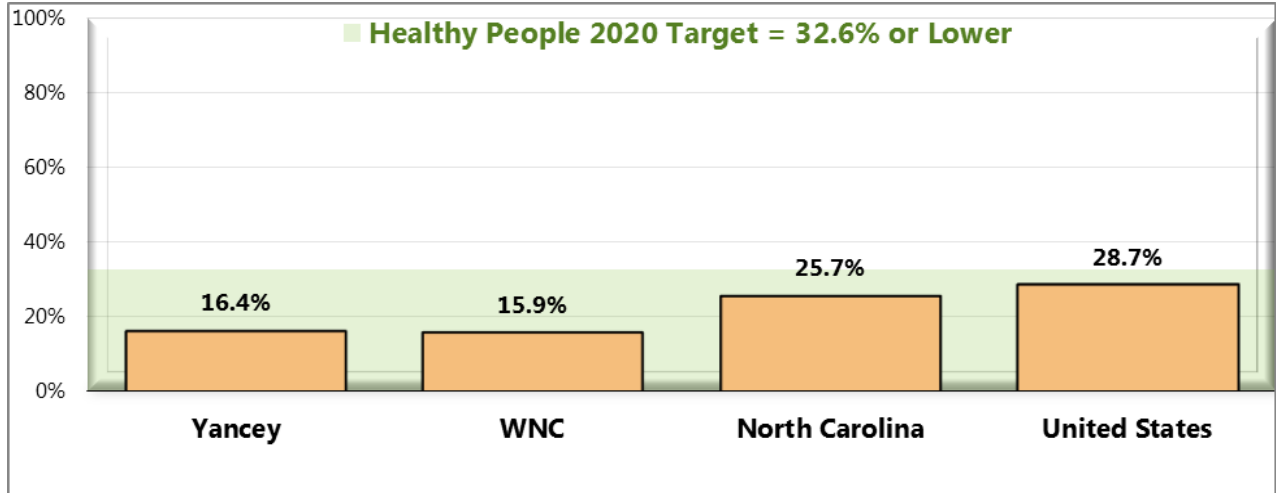
Age-Adjusted Incidence Rates for Major Site-Specific Cancers (2005-2009)

Geography	New Cases per 100,000 Population			
	Breast Cancer	Prostate Cancer	Lung Cancer	Colon Cancer
Yancey County	150.0	166.0	76.8	57.5
Regional Mean	154.0	139.2	75.4	46.0
State	154.5	158.3	75.9	45.5

Healthy Living Behaviors and Lifestyles

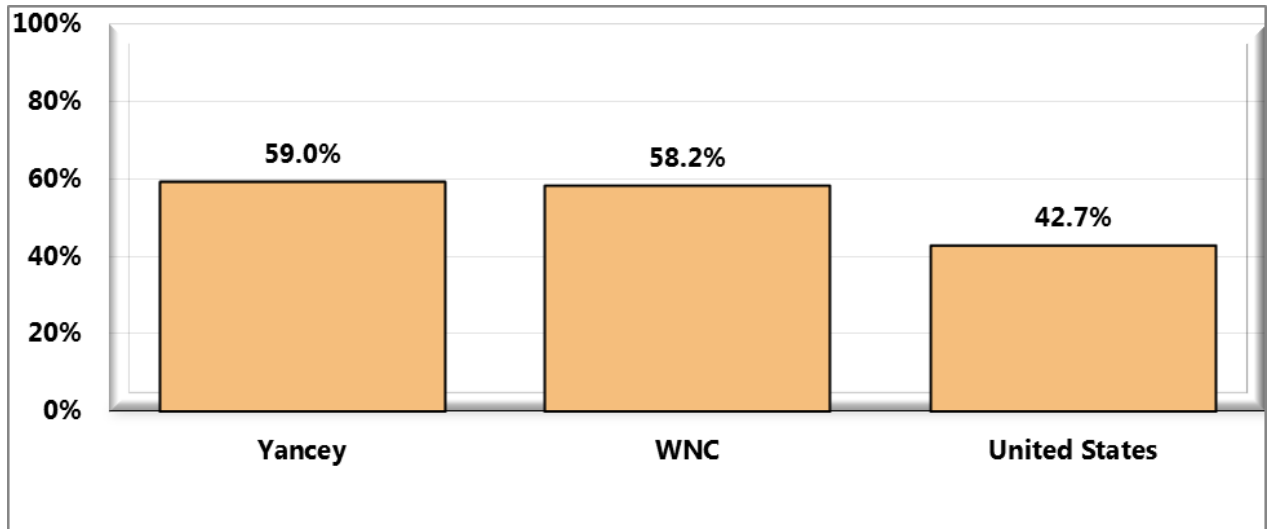
Healthy Living Behaviors and Lifestyles include exercise, diet and nutrition. Yancey County respondents were surveyed about their behaviors in relation to these issues. In the survey, 16.4 percent of Yancey County residents reported getting no leisure-time physical activity.

No Leisure-Time Physical Activity in the Past Month



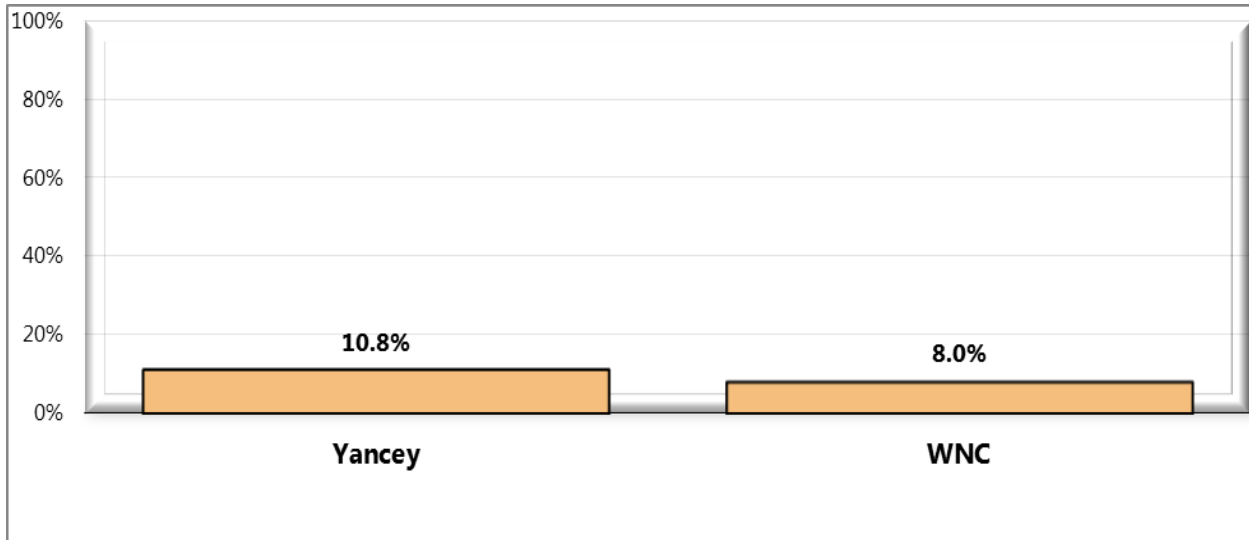
Nearly 60 percent of Yancey County survey respondents met physical activity recommendations, greater than the national average and slightly high for the region.

Meets Physical Activity Recommendations

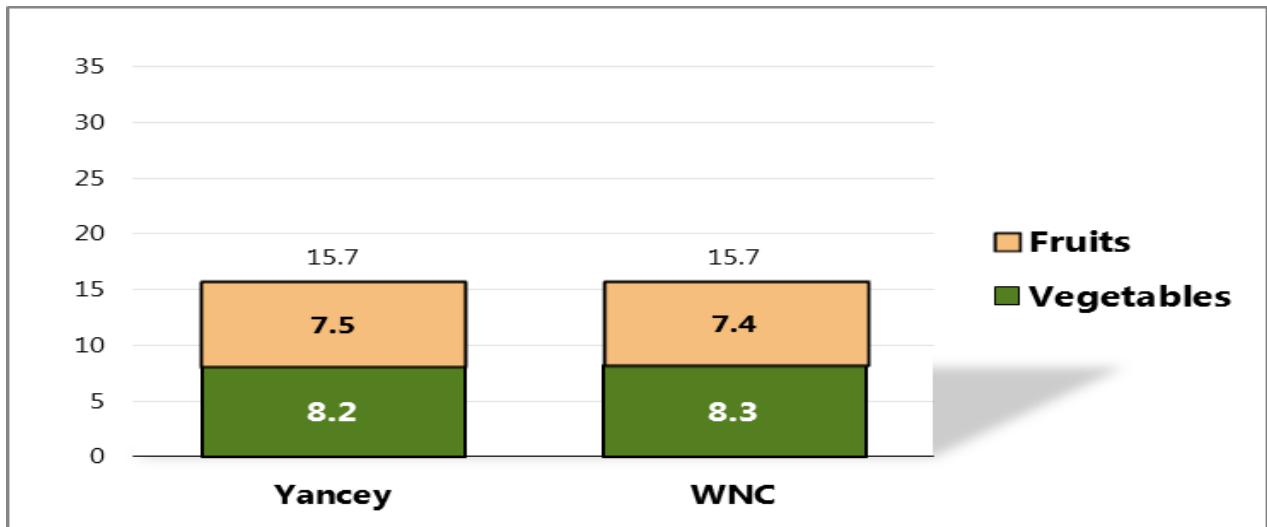


To measure fruit and vegetable consumption, survey respondents were asked how many one-cup servings of fruit and one-cup servings of vegetables (not counting lettuce salad or potatoes) they ate over the past week.

Had an Average of Five or More Servings of Fruits/Vegetables per Day in the Past Week



Average Servings of Fruits/Vegetables in the Past Week



Summarized Action Plan

Community health action plans have been developed to address identified health priorities. Each action plan will include evidence-based strategies that focus on system or policy change, target specific disparate groups, and promote individual, family, or community change.

Monitoring and Accountability

The Community Health Improvement Plan (CHIP) will be monitored bi-monthly by the committees that are addressing the identified health priorities. Frequent monitoring will allow for modifications of actions as needed to improve overall results. Committee chairs will report any needed modifications to the Health Promotion Coordinator of the Yancey County Health Department when they are identified. The CHIP will be reviewed on a quarterly basis and will be revised as needed. Shared responsibility throughout the monitoring process will allow for joint responsibility for the actions to be carried out in the plan.

Yancey County Health Department works closely with the Blue Ridge Regional Hospital to monitor Community Health Improvement Plans. Action Teams reflect a diverse cross sector of community members working together to achieve shared measures. Quarterly Board meetings serve to monitor activities and provide accountability toward meeting objectives.

CHAPTER 1 - INTRODUCTION

What is a Community Health Improvement Plan (CHIP)?

A Community Health Improvement Plan, or CHIP, is an action-oriented strategic plan outlining the priority health issues for a defined community, and how these issues will be addressed, including strategies and measures, to ultimately improve the health of the community. CHIPs are created through a community-wide, collaborative action planning process that engages partners and organizations to develop, support, and implement the plan. A CHIP is intended to serve as a vision for the health of the community and a framework for organizations to use in leveraging resources, engaging partners, and identifying their own priorities and strategies for community health improvement.

This CHIP is intended to help focus and solidify each of our key partner agency's commitments to improving the health of the community in specific areas. The goal is that through sustained, focused effort on this overarching framework, a wide range of public health partners and stakeholders engaged in assessment, planning, and action will be able to document measured improvement on these key health issues over the coming years.

The next phase will involve broad implementation of the action plan details included in this CHIP, and monitoring/evaluation of the CHIP's short-term and long-term outcomes and indicators.

This 2013 CHIP is focused on creating plans within a six month to three-year timeline. The community health improvement process is iterative and involves continuous monitoring; we plan to release an annual update of this document in December 2013, and again in December 2014. The next community health assessment will be conducted in 2015.

How to Use this CHIP

This CHIP is designed to be a broad, strategic framework for community health, and will be a "living" document that will be modified and adjusted as conditions, resources, and external environmental factors change. It has been developed and written in a way that engages multiple voices and multiple perspectives. We are working towards creating a unified effort that helps improve the health and quality of life for all people who live, work, and play in our county.

We encourage you to review the priorities and goals, reflect on the suggested intervention strategies, and consider how you can join this call to action: individually, within your organizations, and collectively as a community. To get involved or for questions about the purpose of this document, please contact Jessica Farley, Toe River Health District, jessica.farley@trhd.dst.nc.us.

Connection to the 2012 Community Health Assessment (CHA)

Community health assessment (CHA) is the foundation for improving and promoting the health of a community. Community health assessment, as a process and product, is a key step in the continuous community health improvement process. The role of CHA is to identify factors that affect the health of a population and determine the availability of resources within the county to adequately address these factors.

The 2012 Yancey County Community Health Assessment process and products were designed to provide a rich set of data for our county and its partners to use in identifying major health concerns and issues. The information collected through this process, and the priorities identified, were considered in setting the priorities for our county, which are included in this CHIP.

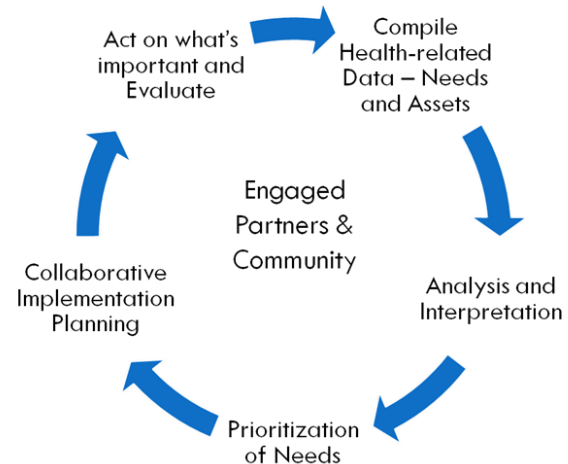
WNC Healthy Impact

WNC Healthy Impact is a partnership between hospitals, health departments, and their partners, in Western North Carolina designed to improve community health. As part of a larger, and continuous, community health improvement process, these partners are collaborating to conduct community health (needs) assessments across western North Carolina. See www.WNCHealthyImpact.com for more details about the purpose and participants of this regional effort. The regional work of WNC Healthy Impact is supported by a steering committee, workgroups, local agency representatives, and a public health/data consulting team.

CHAPTER 2 – COMMUNITY HEALTH ASSESSMENT PROCESS

Community health assessment (CHA) is the foundation for improving and promoting the health of county residents. Community-health assessment is a key step in the continuous community health improvement process. The role of CHA is to identify factors that affect the health of a population and determine the availability of resources within the county to adequately address these factors.

A community health assessment (CHA), which refers both to a process and a document, investigates and describes the current health status of the community, what has changed since a recent past assessment, and what still needs to change to improve the health of the community. The *process* involves the collection and analysis of a large range of secondary data, including demographic, socioeconomic and health statistics, environmental data, as well as primary data such as personal self-reports and public opinion collected by survey, listening sessions, or other methods. The *document* is a summary of all the available evidence and serves as a resource until the next assessment. Together they provide a basis for prioritizing the community's health needs, and for planning to meet those needs.



Local health departments are required to conduct a comprehensive community health assessment at least every four years. As a part of the Affordable Care Act, non-profit hospitals are now also required to conduct a community health needs assessment at least every three years. In order to better meet both health department and hospital needs and to align with both requirements, Yancey County Health Department decided to submit another complete CHA in 2013, operating on the same schedule as the local hospital.

As part of WNC Healthy Impact, a regional data workgroup of public health and hospital representatives and regional partners (with support of a consulting team) made recommendations to the steering committee on the data approach and content used to help inform regional data collection. From data collected as part of this core dataset, the consulting team compiled secondary data for each county in the region. This data was then compared to the data collected in the 2009 Yancey County CHA to look for similarities and differences.

In addition, primary data was also collected in a community health survey of the 16-county region via telephone. 200 community members completed the random-sample survey.

The Yancey County community was engaged in the health assessment process via local data interpretation and priority setting as well.

CHAPTER 3

Substance Abuse Prevention/Access to Mental Health Services

Situational Analysis

Substance abuse refers to a set of related conditions associated with the consumption of mind and behavior-altering substances that have negative behavioral and health outcomes. In 2005, an estimated 22 million Americans struggled with a drug or alcohol problem. Almost 95percent of people with substance use problems are considered unaware of their problem. Of those who recognize their problem, 273,000 have made an unsuccessful effort to obtain treatment. These estimates highlight the importance of increasing prevention efforts and improving access to treatment for substance abuse and co-occurring disorders.

Substance abuse has a major impact on individuals, families, and communities. The effects of substance abuse are cumulative, significantly contributing to costly social, physical, mental, and public health problems.

Mental disorders are health conditions that are characterized by alterations in thinking, mood, and/or behavior that are associated with distress and/or impaired functioning. Mental disorders contribute to a host of problems that may include disability, pain, or death. Mental illness is the term that refers collectively to all diagnosable mental disorders. According to the national Institute of Mental Health (NIMH), in any given year, an estimated 13 million American adults (approximately 1 in 17) have a seriously debilitating mental illness. Mental health intervention implementation is complex, and it is important that intervention be relevant to the target audiences.

The Toe River Health District, Yancey County agencies and local and regional hospitals and other groups are taking proactive steps to address substance abuse and lack of access to mental health services in the county. Collaborative action plans have been developed that will help the county achieve progress towards addressing these issues for Yancey's effected population.

“Substance abuse has a major impact on individuals, families, and communities. The effects of substance abuse are cumulative, significantly contributing to costly social, physical, mental, and public health problems. “

Spotlight on Success

The Mitchell-Yancey Substance Abuse Task Force



In 2011, Graham Children’s Health Services received funding from The North Carolina Coalition Initiative. The North Carolina Coalition Initiative (NCCI) is a program funded with Cross Area Service Program (CASP) funds through the NC Department of Health and Human Services, Division of Mental Health, Developmental Disabilities and Substance Abuse Services, with direction and technical assistance provided by the NCCI Coordinating Center at Wake Forest School of Medicine.

“We are so excited about this grant. This funding will support the hiring of a part-time coordinator for the Mitchell Yancey Substance Abuse Task Force” said Amy Sheele, Executive Director of Graham Children’s Health Service.

The Mitchell Yancey Substance Abuse Task Force has been meeting since a community forum back in June 2009. The Task Force has been instrumental in many prevention and intervention activities such as the Drug take back days, drug and alcohol free teen events (including Red Ribbon week), creation of summer resource guide, partnership with the medical community to address chronic pain management, community education and awareness around the substance abuse problem and currently the group is exploring a jail diversion program.

“The grant will enable the task force to have an even greater community impact” said Dr. Jim Haaga, Former Task Force Chairperson.

Since receiving the grant, the task force has conducted several successful drug take back days, helping to remove prescription drugs from homes where they may be stolen or abused. This event makes an impact on reducing prescription drug abuse in our county.

Partners

The Toe River Health District and Yancey County Health Department have partnered with a variety of agencies to address substance abuse prevention and to increase access to mental health care in the county.

Organizations:	Primary Focus or Function	Website or Contact Information
Project Lazarus	Believes that communities are ultimately responsible for their own health and that every drug overdose is preventable.	http://projectlazarus.org
Yancey County Schools	Provides a safe and nurturing environment to empower all students to achieve their full potential as life-long learners and global citizens.	http://www.yanceync.net/
Yancey County Sheriff's Department	Enforcing the laws of North Carolina and Yancey County	http://www.yanceycountync.gov/sheriffs-department
Yancey County Cooperative Extension	Partners with communities to deliver education and technology that enrich the lives, land and economy of North Carolinians.	http://yancey.ces.ncsu.edu/about/
Blue Ridge Regional Hospital	Identify and respond to the health and wellness needs of the region, partnering with patients, families and friends through a comprehensive approach to healing that ministers to the mind, body and spirit.	www.blueridgehospital.org
Graham Children's Health Services	Collaborating effort that involves, educates and unites the community for the design and implementation of strategies that will improve the health of children now and in the future.	http://healthyancey.org/graham-childrens/
Western Highlands Network	Ensuring the provision of high quality, consumer responsive, culturally sensitive, and cost-effective services to those who are living with mental illness, developmental disabilities, and substance abuse.	http://westernhighlands.org
AMY Regional Library System	To help communities create and maintain a foundation for literacy, economic development and democracy.	www.amyregionallibrary.org
Local Pharmacies/ Pharmacist	Plays a key role in helping and assisting concerned citizens understand what can be done to create awareness and prevention in the community.	Mechelle Akers familyakers@hotmail.com
Coalitions / Groups:		
Mitchell-Yancey Substance Abuse Task Force	Provide facilitation of community assessment, public education and substance abuse treatment and prevention programs by coordinating various agencies, organizations and segments of our community.	http://healthyancey.org/substance-abuse-task-force/
Mitchell Community Health Partnership	Functioning together to improve the health of people of Mitchell County by way of teamwork from citizens and agencies.	Ronald & Libby McKinney ronmck@frontier.com
Healthy Yancey	Partnering with concerned citizens working together to improve the quality of health for all people in Yancey County.	http://healthyancey.org/healthy-yancey/
Community Volunteers	To create, nurture, and sustain the wellbeing of the community on so many levels	n/a

Substance Abuse Prevention & Access To Mental Health Services Action Plan

Vision of Impact

Substance abuse has repeatedly been identified as a priority health concern through our extensive community health assessments. Due to the complex nature of the substance abuse and prevention, implementation of effective, evidenced-based interventions in our small, rural, low wealth communities has been challenging.

We envision a community where substance abuse is no longer on the rise and those who need mental health services and treatment know how to access them and are able to receive them.



<u>Community Objectives</u>	Baseline/Indicator Source
By June 2015, the percent of survey respondents reporting that it is 'very or somewhat easy' to get the same prescription from several different doctors will decrease by 10% from 61% to 54.9% of the respondents.	2015 Mitchell-Yancey Community Survey
By June 2014, the number of practitioners enrolled in and utilizing the NCCSRS will increase by 20% from 44.2% to 64.2% in Yancey County as evidenced by.	NCCSRS enrollment data
By June 2015, the number of arrests related to controlled substances will decrease by 10% in each county—from 50% to 45% in Yancey.	2014-2015 arrest data
By June 2015, the percent of respondents reporting that people can obtain prescription drugs if they don't have a prescription from a friend or acquaintance-will decrease by 5% from 82.3% to 77.3% of the respondents.	2015 Mitchell-Yancey Community Survey
Related Healthy NC 2020 Objective: Reduce the percentage of individuals aged 12 years and older reporting any illicit drug use in the past 30 days.	BRFSS 2015 Mitchell-Yancey Community Survey

Strategy 1 – Address the growing problem of prescription drug abuse among Mitchell and Yancey County residents.

Goal: *Decrease substance abuse and misuse by reducing access to prescription drugs in Yancey County.*

Strategy Background

Source: www.lockyourmeds.org and www.drugabuse.gov

Evidence Base: Not only does reduction efforts help keep prescription drugs out of the wrong hands, but it helps create awareness for a problem that continues to grow in our country. By making adults aware that they are the “unwitting suppliers” of prescription medications being used in unintended ways, especially by young people, it has proven to reduce prescription drug abuse.

Type of Change: Community & System Change, Environmental & Policy Change

Partner Agencies

Lead: Mitchell-Yancey Substance Abuse Task Force Executive Committee

Collaborating: Yancey County Sheriff’s Department, Blue Ridge Regional Hospital, Healthy Yancey, Yancey County Health Department

Supporting: All members of the Mitchell-Yancey Substance Abuse Task Force

Strategy Objective #1: By June 2015 the percentage of residents surveyed reporting keeping unused prescription meds around the house or in the medicine cabinet will decrease 5%.

Indicator: Results of the Mitchell-Yancey Substance Abuse Task Force Community Assessment 2015 compared to the assessment completed in 2012

Action Plan:

Activity <i>(what is being done?)</i>	Resources Needed <i>(who? how much?)</i>	Anticipated Result <i>(what will happen?)</i>	Result Verification <i>(how will you know?)</i>	Target Date <i>(by when?)</i>
Establish policy/guidelines for residents to properly secure prescription drugs and dispose of outdated/unused drugs	Coalition members to: review current pharmacy and clinic procedures and practices; draft guidelines for residents to follow	Written policy and best practices for residents follow	2015 MYSATF Community Assessment	September 2014
Develop and prominently display signage in local pharmacies and clinics	Coalition members to: design educational materials; arrange for printing; contact	Inform residents of the importance of proper storage and disposal of prescription drugs	2015 MYSATF Community Assessment	December 2014

	local pharmacies/clinics and delivery of signage			
Provide opportunities at regular family-oriented events for families to sign a pledge to properly secure and dispose of prescription drugs	Coalition members to: design and produce a pledge; contact and submit public announcements promoting the pledge prior to the events; recognize families for their support by offering incentives	Educate parents to become more mindful of the problem	2015 MYSATF Community Assessment	February 2015
Offer cabinet locks and/or medication lock boxes	Med locks and/or medication lock boxes; research potential vendors to distribute locks and boxes; and develop promotional materials	Make it easier for residents to safely store prescription medications and dispose of outdated/unused medications	2015 MYSATF Community Assessment	July 2015
Launch media campaign to inform residents of benefits to everyone safely storing medications and protecting the environment through proper disposal of outdated and unused medications.	Coalition members will draft articles and submit to local media outlets on a quarterly basis throughout the year	Create awareness in the community using positive reinforcement	2015 MYSATF Community Assessment	July 2014

Strategy 2 – Reduce Youth Substance Abuse

Goal: Increase collaboration between youth and agencies in the community

Strategy Background

Source: www.youthempoweredolutions.org and <http://beta.samhsa.gov/>

Evidence Base: We know that empowered youth, working in partnership with adults, have great power to create lasting, positive change in their communities. Evidence-based strategies we talk of are dedicated to enhancing the evaluation capacity of innovative programs and practices that address critical substance abuse prevention and related behavioral health needs. While these resources focus on assisting local program developers, implementers, and evaluators in applying more rigorous evaluation methodologies to our work. Local coalitions are planning prevention activities to help individuals develop the intentions and skills to act in a healthy manner and focusing on creating an environment that supports healthy behavior.

Type of Change: Behavioral and Environmental Change

Partner Agencies

Lead: Mitchell-Yancey Substance Abuse Task Force Executive Committee

Collaborating: Healthy Yancey, Yancey County Health Department, Yancey County Schools, Faith Community

Supporting: All members of the Mitchell-Yancey Substance Abuse Task Force

Strategy Objective #1: By December 2015, maximize collective impact by increasing the total number of formal and written partnerships with appropriate agencies, community groups, or businesses who represent the diversity of the community, and also have a vested interest in reducing youth substance abuse (specifically, prescription drugs).

Indicator: Number of new partnerships who represent diversity and youth in the community contacted and/or attended monthly MYSATF meetings recorded in meeting minutes.

Action Plan

Activity (<i>what is being done?</i>)	Resources Needed (<i>who? how much?</i>)	Anticipated Result (<i>what will happen?</i>)	Result Verification (<i>how will you know?</i>)	Target Date (<i>by when?</i>)
Develop formal written partnerships or resolutions between groups and agencies working with youth or substance abuse prevention efforts	Convene Leaders; Draft agreement; Adopt and sign agreement; Create annual meeting schedule	Increase impact and reduce fragmented implementation of environmental strategies	Meeting Minutes	November 2014

Identify under-represented groups and sectors and identify potential barriers for participation in order	Cultural competency training; Identify under represented sectors and barriers; Recruit sector members by reducing barriers and obstacles to participation	Create a culturally competent collaborative that truly presents the youth and community	Meeting Minutes	January 2015
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Strategy Objective #2: By December 2015, reduce past 30 days use of prescription drugs by at least 1% among youth.

Indicator: Youth Risk Behavior Survey (survey one high school and one middle school in county) and Community Health Assessment measures

Action Plan

Activity <i>(what is being done?)</i>	Resources Needed <i>(who? how much?)</i>	Anticipated Result <i>(what will happen?)</i>	Result Verification <i>(how will you know?)</i>	Target Date <i>(by when?)</i>
Host an after school program for at-risk middle school students	Compassionate Volunteers; Coordinator; Healthy Snacks; Physical Activity and crafty activities	Direct curiosity toward positive outcomes and assist students in finding individual assets	Key Interviews with parents and testimonials from participating students	August 2014
Schedule and offer at least four youth activities in the community	Volunteers; Schedule Live Concerts/Local Bands, Drive in Movies, Pool Parties, Guest Speakers, Bon Fires before school athletics	Eliminate boredom at home, channeling energy toward more traditional youth activities	Student participation rates (and how many of those have track records for misbehaving) and On-site observation	August 2014
Continue Drug Take Back Days and Drug Drop Box Program	Middle and High School Students; Planning meetings with MYSATF members; materials	Student involvement in publicity and advocacy for events/programs	Number of prescription drugs taken back from residents; especially number of narcotics	September 2014

CHAPTER 4

Cancer

Situational Analysis

Cancer is a term for diseases in which abnormal cells divide without control and can invade nearby tissues. Cancer cells also can spread to other parts of the body through the blood and lymph systems. If the disease remains unchecked, it can result in death (National Cancer Institute). Continued advances in cancer research, detection, and treatment have resulted in a decline in both incidence and death rates for all cancers. Among people who develop cancer, more than half will be alive in 5 years. Yet, cancer remains a leading cause of death in the United States, second only to heart disease. Many cancers are preventable by reducing risk factors such as use of tobacco products, physical inactivity and poor nutrition, obesity, ultraviolet light exposure. Screening is effective in identifying some types of cancers including: breast cancer, cervical cancer colorectal cancer and prostate cancer.

Taken together, cancers of all types compose the second leading cause of death in WNC, but the first leading cause of death in Yancey County in 2006-2010. The total cancer mortality rate in Yancey County rose from 160.8 in 2002-2006 to 184.5 in 2006-2010, an increase of 14.7 percent. The total cancer mortality rate for the state as a whole fell 6.8 percent (from 196.4 to 183.1) over the period cited, while the comparable rate for the region fell from 181.5 to 180.3. In the last two aggregate periods, the total cancer mortality rate in Yancey County exceeded the comparable rates for both the region and the state.

Yancey County Health Department is working with the American Cancer Society and other partners to develop and implement programs that decrease the risk of cancer for county residents, including access to screenings for a variety of cancers to increase the chance of early detection, which will in turn increase survival rates for those who are diagnosed with a number of different cancers.

In 2012 there were approximately 13.7 million Americans with a history of cancer alive.

Approximately 580,350 Americans are expected to die of cancer in 2013. That's almost 1,600 people a day.

Cancer is the second most common cause of death in the U.S. It accounts for nearly 1 in 4 deaths.

Among people who develop cancer, more than half will be alive in 5 years.

Spotlight on Success



Yancey, Mitchell and Madison, as well as Jackson, Swain and Macon counties have lower than average breast and colorectal cancer screening rates, higher than average cancer mortality rates and higher than average percent of families in poverty. These communities traditionally have a higher risk of death due to cancer because of their limited access to health care, resources and socioeconomic status.

“If someone has to choose between paying their utilities and feeding their family or paying for a doctor’s visit for a cancer screening because they do not have adequate medical insurance, people will often forego their cancer prevention and early detection screenings,” said Kathleen Stith, the American Cancer Society’s Community Health Advisor for the Appalachian region. “Our Community Health Advisors help these individuals understand the importance of cancer screenings and may help them find access to free or low-cost screenings in their community so they don’t have to choose between their health and home.”

Regular screening examinations by health care professionals can result in the early detection and removal of precancerous growths, as well as the diagnosis of cancers at an early stage, when they are the most treatable. Cancers of the cervix, colon and rectum can be prevented by removal of precancerous tissue. Cancers that can be diagnosed early through screening include cancers of the breast, colon, rectum, cervix, prostate, oral cavity and skin. However, screening is known to reduce mortality only for cancers of the breast, colon, rectum and cervix, the cancer sites volunteers in the CHA program will focus on with education and access to resources.

Working with our regional American Cancer Society Community Health Advisor is one way that the Blue Ridge Regional Hospital and Yancey County Health department is helping to lower the incidences of cancer in our county.

Partners

The Toe River Health District and Blue Ridge Regional Hospital have partnered with a variety of agencies to improve cancer incidences in a number of ways, such as access to primary care to address chronic disease and educational campaigns in effort to expand prevention awareness.

Organizations:	Primary Focus or Function	Website or Contact Information
American Cancer Society	Transforming cancer from deadly to preventable	www.cancer.org
Yancey County Health Department	Dedicated to protect and improve the health conditions of people and maintaining a healthy environment in Yancey County; enabling them to be healthy, by working through an organized community effort focusing on: health promotion, disease prevention, education and awareness, access to and provision of care, and quality and value of life	www.toeriverhealth.org
Graham’s Children Health Services	Collaborating effort that involves, educates and unites the community for the design and implementation of strategies that will improve the health of children now and in the future.	http://healthyyancey.org/graham-childrens/
Blue Ridge Regional Hospital	Identify and respond to the health and wellness needs of the region, partnering with patients, families and friends through a comprehensive approach to healing that ministers to the mind, body and spirit.	www.blueridgehospital.org
Local Media	Serves as a mass communication to inform community members of local news	n/a
Yancey County Senior Center	Promote quality of life and successful aging for the senior citizen population of Yancey County	www.main.nc.us/yancey/ycsc.htm
MY Healthy-E-Schools Initiative	Allows school nurses to connect ill students with health care providers. School-based health centers have been shown to improve attendance and reduce barriers to learning. MY Health-e-Schools increases classroom attendance for students and decrease time spent away from work for the parent or care giver of the student	http://crhi.org/MY-Health-e-Schools/index.html
Yancey County Cooperative Extension	Partner with community to deliver education and technology that enrich the lives, land and economy of Yancey County residents	www.yancey.ces.ncsu.edu
Coalitions / Groups:		
Healthy Yancey	Partnering with concerned citizens working together to improve the quality of health for all people in Yancey County.	http://healthyyancey.org/healthy-yancey/

Cancer Prevention Action Plans

Vision of Impact

Several Yancey County residents feel more education, support, and outreach to the community is needed regarding preventative annual screenings, as well as about programs that can help with payment plans. Cancer, specifically, has been deemed a health concern among residents in Yancey County particularly because county-level trend data, incident rates, and death rates tend to be higher than those of the region and state. Improving and increasing access to healthcare services leads to prevention; preventing illness by detecting early warning signs and symptoms before they develop into a disease, or detect a disease at an easier, and often more treatable, stage.



We envision a community where access to cancer prevention and treatment services are widely available and familiar. Preventative care is critical in the prevention of cancer related illnesses and education is key.

<u>Community Objectives</u>	Baseline/Indicator Source
By December 2015, decrease mortality trend data for total cancer by 5% (from 184.5 to approximately 175 deaths per 100,000 people) in Yancey County becoming more comparable to region and state rates.	WNC Healthy Impact
By December 2015, decrease the percentage residents in Yancey County who reported they lack health insurance by 5% (from 27.9% to approximately 23%).	Community Health Assessment Data
Related Healthy NC 2020 Objective: Increase the percentage of adults reporting good, very good, or excellent health.	WNC Healthy Impact
Reduce the percentage of non-elderly uninsured individuals (aged less than 65 years)	Community Health Assessment Data

Strategy 1 – Provide educational opportunities for the community to learn about cancer prevention, treatment and access to care.

Goal: Strengthen awareness among resident of Yancey County about the growing problem of cancer.

Strategy Background

Source: www.cancer.org

Evidence Base: Community members coming together to help fight back, get involved and make a difference in the fight against cancer makes a difference in the level of awareness. There are many ways residents can to show support such as volunteer opportunities and life-changing events (Relay for Life is one).

Type of Change: Community & Individual Change

Partner Agencies

Lead: Blue Ridge Regional Hospital

Collaborating: Yancey County Health Department, American Cancer Society

Supporting: Healthy Yancey, Yancey County Cooperative Extension

Strategy Objective #1: By December 2015, a variety of educational materials, public relation messages, and face-to-face presentations will be disseminated/hosted through local media and community events.

Indicator: Number of occasions (from local media outlets to classes or presentations) when cancer prevention is promoted

Action Plan

Activity <i>(what is being done?)</i>	Resources Needed <i>(who? how much?)</i>	Anticipated Result <i>(what will happen?)</i>	Result Verification <i>(how will you know?)</i>	Target Date <i>(by when?)</i>
Promote awareness campaigns throughout the year	BRRH Staff; Staff Time	To inform citizens of the area of cancer related topics	Log total number of outreach efforts	December 2015
Hosts monthly classes focusing on a specific health topic	BRRH Staff; Staff Time; Healthcare Professionals; Participants	Educate community members about the newest treatments as well as preventative care for specific health care issues	Total number of classes offered and attendance sign in sheet; evaluation forms with opportunity for feedback	December 2015

Publish and distribute local Health and Human Service Directory	Yancey County Health Department; Materials; Printing	Raise awareness of services offered locally	Number of directories distributed and documentation of feedback	April 2015
Use local newspaper to submit articles	American Cancer Society; Staff Time; Materials	Encourage preventative actions such as annual mammograms	Actual publication of articles and feedback from resource contacts	June 2015
Conduct PSA's with local radio station	American Cancer Society; Staff Time	Educate and connect citizens in the community with local healthcare providers	Prove of PSA's and total follow up calls/eval from resource contacts	June 2015
Host a series of Billboards to display public messages related to cancer prevention	Blue Ridge Regional Hospital; Materials; Funding	Create Awareness of local resources and agencies	Evaluation from resource contacts: <i>"How did you hear about us?"</i>	December 2015
Use agency newsletters/forms to include educational information	Yancey County Health Department; Staff Time; Materials; Printing	Outreach to low-income parents, children, and families	Number of newsletters/forms	December 2015
Display messaging on community bulletin boards, public signs, and website/Facebook pages	Healthy Yancey Members	Residents to become familiar with local resources and providers to offer cancer screenings and education throughout the population	Number of boards and signs displayed and number of website views	December 2015
Support Relay for Life efforts in county	American Cancer Society; Healthy Yancey Members; Time; Fundraising	Honor those who have lost their life to cancer and fight for those who have or will be diagnosed	Number of team members; amount of money raised for awareness	July 2014; July 2015

Strategy Objective #2: By December 2014, the local hospital, along with several other agencies, will explore the possibility of providing state-of-the art cancer care and awareness for patients, families, friends, and the community at-large.

Indicator: Creation on a cancer care center, number of resources utilized, number of patient and non-patient visits to cancer care center daily

Action Plan

Activity <i>(what is being done?)</i>	Resources Needed <i>(who? how much?)</i>	Anticipated Result <i>(what will happen?)</i>	Result Verification <i>(how will you know?)</i>	Target Date <i>(by when?)</i>
Provide a cancer care center at local hospital	BRRH consent and staff; funds	Citizens can receive treatment close to home	Number of Patients/Non-patients who come to center for care	January 2014
Make available an educational resource room	BRRH consent and staff; Educational resources; funds	Address the mind, body and soul of cancer patients, their families, and our community	Number of people who use the resource room	July 2014
Offer support groups and educational classes at center making them available to all patients, families, and friends.	BRRH Staff; American Cancer Society staff and resources; Time; Participants	Teach community members about preventative care and latest treatment for specific health care issues, specifically related to cancer	Number of classes, support groups, and attendees; evaluation forms; verbal feedback	December 2015

CHAPTER 5

Healthy Living Behaviors and Lifestyles

Situational Analysis

Regular physical activity can improve the health and quality of life of Americans of all ages. Among adults and older adults, physical activity can lower the risk of: early death; coronary heart disease; stroke; high blood pressure; type 2 diabetes; breast and colon cancer; falls; and depression. Among children and adolescents, physical activity can: improve bone health; improve cardiorespiratory and muscular fitness; decrease levels of body fat; and reduce symptoms of depression. For people who are inactive, even small increases in physical activity are associated with health benefits.

Factors **positively** associated with adult physical activity include: postsecondary education; higher income; enjoyment of exercise; expectation of benefits; history of activity in adulthood; and social support from peers, family. Factors **negatively** associated with adult physical activity include: advancing age; low income; lack of time; low motivation; rural residency; perception of great effort needed for exercise.

Adults (age 18–64) should do 2 hours and 30 minutes a week of moderate-intensity, or 1 hour and 15 minutes (75 minutes) a week of vigorous-intensity aerobic physical activity, or an equivalent combination of moderate- and vigorous-intensity aerobic physical activity. Additional health benefits are provided by increasing to 5 hours (300 minutes) a week of moderate-intensity aerobic physical activity, or 2 hours and 30 minutes a week of vigorous-intensity physical activity, or an equivalent combination of both. Older adults (age 65 and older) should be as physically active as their abilities allow. They should avoid inactivity. Older adults should do exercises that maintain or improve balance if they are at risk of falling.

The Toe River Health District, Yancey County agencies and local and regional hospitals and other groups are taking proactive steps to address healthy living behaviors and lifestyles in the county. Collaborative action plans have been developed that will help the county achieve progress towards addressing these issues for Yancey’s effected population.

Physical activity and healthy eating are both critical parts of maintaining good health. Everyone—children and adults—benefits from being physically active and eating a variety of fresh, healthy foods every day.

Regular physical activity and good nutrition can reduce a person’s risk of obesity and chronic disease and may prevent certain health conditions from worsening over time.

For people who are inactive, even small increases in physical activity are associated with health benefits.

(DHHS, 2010)



Spotlight on Success

TRACTOR: The Yancey-Mitchell AG Center, known as TRACTOR (Toe River Aggregation Center Training Organization Regional)

TRACTOR (the Toe River Aggregation Center and Training Organization Regional) aims to increase sales and economic opportunity for farmers. The project coordinates the aggregation, distribution and marketing of locally grown fruits and vegetables from small producers. The facility, located in Burnsville, opened in May of 2012 and offers processing, packaging and distribution as well as GAP (Good Agricultural Practices) training and technical assistance.

“The TRACTOR project meets many of the goals of our Food and Farming strategy and is a great example of how a focused approach can produce results,” said CFWNC President Elizabeth Brazas. “We invested time in understanding the issue and collaborated with engaged stakeholders to help move this project from concept to realization. We worked in partnership with our affiliates, the Yancey Foundation and the Foundation for Mitchell County, and together we are pleased to provide this funding.”

The funding allowed the purchase of shared field equipment to be used by farmers in Mitchell and Yancey counties for the 2012 growing season and beyond. Vegetable and fruit production requires specialized machinery, needed once or twice a year, representing a cost-prohibitive investment for a small farm. It is anticipated that a second set of equipment will be purchased in the years to come to enable each county’s Cooperative Extension Office to assist new and transitioning farmers.

There are many challenges facing small farmers across Western North Carolina. A strong alliance between Mitchell and Yancey counties addresses several of these by creating a food hub for the region that provides a shared aggregation facility, expanded access to customers, joint marketing and now, through a \$25,000 grant from The Community Foundation of Western North Carolina, rental access to key field equipment necessary for small or transitioning farmers.

Part of a comprehensive two-county plan to support farmers through a leased post-harvest facility,

“The future of farming in rural counties like Mitchell and Yancey depends on the farmers’ ability to remain profitable in a changing marketplace,” said CFWNC Program Officer Tim Richards. “In vetting this project, we were impressed with the strong multi-level collaboration and the cross county partnerships. A great deal of work has gone into TRACTOR that will help to revitalize a sustainable local food system in this part of Western North Carolina.”

The TRACTOR project has been in development for the past few years. A feasibility study in 2011 confirmed that there is sufficient demand from farmers and broad support from the community. Working with both counties will achieve economies of scale to meet buying needs of more retailers and institutions, consolidate quality control and technical assistance and ensure that efforts are not duplicated.

In laying the groundwork for TRACTOR, Cooperative Extension collaborators Jeff Vance of Mitchell County and Tres Magner of Yancey County brought together funders whose collective support is crucial.

Tractor food and farms is a coop between Mitchell and Yancey country to provide services, sales and distribution of local foods and products to local consumer, wholesalers and retail outlets. We bring local foods and farmers to your dinner table.

Partners

Improving healthy living behaviors and lifestyles in our county is complex and will require the collaborative planning, action, and coordination of multiple partners in our community. The following partner agencies and organizations are engaged in efforts to improve oral health in our community.

Organizations:	Primary Focus or Function	Website or Contact Information
Yancey County Health Department	Dedicated to protect and improve the health conditions of people and maintaining a healthy environment in Yancey County; enabling them to be healthy, by working through an organized community effort focusing on: health promotion, disease prevention, education and awareness, access to and provision of care, and quality and value of life	www.toeriverhealth.org
Yancey County Schools	Provides a safe and nurturing environment to empower all students to achieve their full potential as life-long learners and global citizens.	http://www.yanceync.net/
Yancey County Cooperative Extension	Partner with community to deliver education and technology that enrich the lives, land and economy of Yancey County residents	www.yancey.ces.ncsu.edu
Graham Children's Health Services	Collaborating effort that involves, educates and unites the community for the design and implementation of strategies that will improve the health of children now and in the future.	http://healthyyancey.org/graham-childrens/
Mitchell-Yancey Partnership for Children	Enhance the lives of children birth to five and their families, through collaborative efforts that provide expanded and continuing opportunities for optimal growth and development	www.mypartnershipforchildren.org
Coalitions / Groups:		
Community Transformation Grant	Support tobacco-free communities, active living, and healthy eating while promoting clinical and community supports to reduce chronic disease	Alphie Rodriguez ctcymac@gmail.com
Healthy Yancey	Partnering with concerned citizens working together to improve the quality of health for all people in Yancey County.	http://healthyyancey.org/healthy-yancey/

Healthy Living Behaviors and Lifestyles Action Plan

Vision of Impact

To make healthy choices easier by improving access to physical activity and healthy food options where community members live, learn, work, and play.

We envision a community in Yancey working together to support healthy lifestyles for adults and teens



Community Objective:	Baseline/Indicator Source
<p>By December 2015, increase access to, and consumption of fresh fruits and vegetables; as well as create environments that promote physical activity and healthy lifestyles for families throughout the year.</p>	<p>2012 CHA Survey; 45% thought recreational options available to community were fair to poor. 58% agreed children and youth had the facilities and programs needed to be healthy 59% claimed to engage in moderate physical activity (slight increase in breathing/heart rate and light sweating 5 times a week for 30 minutes) 95% thought it was at least somewhat important/very important to have access to Farmers' Markets 98% believed it was at least somewhat important/very important that community organizations make PA spaces available for public use after hours 97% said it was at least somewhat important/very important that communities improve access to trails, parks, and greenways</p>
<p>Related Healthy NC 2020 Objectives: Increase the percentage of adults (families) getting the recommended amount of physical activity. Increase the percentage of adults (families) who consume 5 or more servings of fruits and vegetables per day.</p>	<p>2015 CHA Survey Results Success Stories On-Site Observation</p>

Strategy 1 – Increase the number of safe places for people to be physically active.

Goal: Increase the number of people who are getting their CDC-recommended amount of daily physical activity.

Strategy Background

Source: www.thecommunityguide.org

Evidence Base: Environmental and policy approaches are designed to help people adopt healthier behaviors. The creation of healthful physical and organizational environments is attempted through development of public policy that supports healthy practices, creation of supportive environments, and strengthening of community action. Correlational studies have shown that the availability of exercise equipment in the home and the proximity and density of places for physical activity within neighborhoods are associated with physical activity levels.

Type of Change: Environmental and Policy Approaches to Increasing Physical Activity

Partner Agencies

Lead: Graham’s Children Health Services and Healthy Yancey

Collaborating: Yancey County Health Department, Mitchell-Yancey Partnership for Children

Supporting: Yancey County Cooperative Extension, Yancey County Schools, Community Transformation Program

Strategy Objective #1: By May 2015, there will be at least two public places open for adults and children to use for physical activity.

Indicator: Number of residents who live within ten miles of a place to engage in physical activity, who did not have this opportunity before opening the places up for public use.

Action Plan:

Activity (<i>what is being done?</i>)	Resources Needed (<i>who? how much?</i>)	Anticipated Result (<i>what will happen?</i>)	Result Verification (<i>how will you know?</i>)	Target Date (<i>by when?</i>)
Develop partnership with key decision makers for JUAs with schools	Networking and Staff Time; Signed agreement from school superintendent; Signage at all participating schools	Increase accessibility for families to safe physical activity	Plan meetings and make decisions; number of residents using school facilities	September 2014
Creation of Disc Golf Course at local high school	Planning meetings; Staff Time; Funding	Funding will be granted	Construction will begin and supplies will be ordered	October 2014

Expand local park (<i>with picnic shelter, volleyball, tennis courts, handicapped accessible fishing platform, and an outdoor stage</i>)	Planning Committee; Funding; Community Volunteers	Add variety and opportunity for all citizens to feel more comfortable engaging in physical activity doing what they enjoy	Construction of park expansion; Number of new comers who visit the park who use the expansion	June 2015
Plan a Campaign Day, "It's Okay to Play" to promote construction of disc golf course, expansion of park, and local JUA's	Volunteers; Planning Committee; Donations from local businesses; Time	Engage both youth and adults in physical activities that are not interested in traditional sports	Number of community members who attend; Encourage using the shared space that will be open for the community and the school	October 2015

Strategy Objective #2: By December 2015, continue to support and promote ongoing activities, events, and efforts related to physical activity in Yancey County.

Indicator: Number of participants increasing year after year because events are annually anticipated and well attended by community members.

Action Plan:

Activity (<i>what is being done?</i>)	Resources Needed (<i>who? how much?</i>)	Anticipated Result (<i>what will happen?</i>)	Result Verification (<i>how will you know?</i>)	Target Date (<i>by when?</i>)
Distribute Activity Guides specific to Yancey County	Staff Time; Printing; Volunteers for Distribution	Residents use listing of yearlong activities as a way to get and remain active	Number of Activity Guides distributed	May 2014
Continue to plan and support organized events in the county (<i>Fit Families 5k, "Growing a Runner", Girls on the Run, Boys on the</i>)	Participants; Publicity; Sponsors; Planning Committee	Increase in attendance of participants and awareness year after year	Number of attendees annually; evaluation and feedback from attendees	December 2015

<i>Track, Sports/Summer Camps, etc.)</i>				
Seek funding options and opportunities for all annual events	Money and Time; Planning Committee and/or Fundraising Team; Grant Writer	Create awareness of project by using local media outlets; get community involved in plans, programs, and initiatives relevant to physical activity opportunities	Sufficient funds raised to get the beginning phases of these projects/programs underway	December 2015

Strategy 2 – Decrease overweight and obesity in adults and children by use of positive health promotion programing and massaging.

Goal: *Decrease overweight and obese adults and children (families) in Yancey County by education and improving lifestyle choices regarding nutrition.*

Strategy Background

Source: www.dactionforchildren.org (Why Place Matters)

Evidence Base: Where children grow up can help determine health outcomes. It is clear that being healthy and fit in adulthood is at least partly determined by the communities we live in as children. When children do not have access to healthy environments and/or opportunities to make healthy choices, their health and quality of life are often compromised.

Type of Change: Educational and Behavioral Modifications

Partner Agencies

Lead: Yancey County Cooperative Extension & Graham’s Children Health Services

Collaborating: Yancey County Health Department, Yancey County Schools

Supporting: All members of Healthy Yancey

Strategy Objective #1: By December 2015, a total of at least nine behavior change programs will be conducted throughout Yancey County, targeting children, adults, and families.

Indicator: Number of attendees per class/program; Completed evaluation forms and feedback from open-ended answers

Action Plan:

Activity (what?)	Resources Needed (who? how much?)	Anticipated Result (what will happen?)	Result Verification (how will you know?)	Target Date (by when?)
Use Snap-Ed Curricula in elementary schools, providing a newsletter for families	Staff Time; Snap-Ed materials; Elementary Schools’ permission	Children will encourage their families to eat healthy and try new recipes (sent home with newsletter) increasing fruit and veggie consumption	Number of Newsletters; Success Stories; Observation Data	Conduct Class #1 by May 2014 Conduct Class #2 by May 2015 Conduct Class #3 by May 2016
Use Eat Smart, Move More, Weigh Less Curricula to target adults,	Staff Time; Volunteers; ESMMWL material;	Publicity efforts become widely recognized by community members, resulting	Weight Loss and Health Benefits of participants by taking Weight, Blood Pressure, and	Conduct Class #1 by March 2014

parents, and families	registered participants	in at least 25+ participants	Measurements weekly by increasing physical activity and fruit/veggie consumption	Conduct Class #2 by March 2015 Conduct Class #3 by March 2016
Offer and Host preservation and canning classes, as well as cooking demos, to the community at large	Staff Time; Materials; Interested Partakers	Market and Outreach to community to gain interest for the classes; hope to get 10+ registered	Partakers will attain the knowledge to help guide them to can and preserve fresh fruit and veggies for their self and families	Conduct Class #1 by October 2014 Conduct Class #2 by October 2015 Conduct Class #3 by October 2016

Strategy Objective #2: By December 2015, provide at least three innovative methods to access fresh produce, especially targeting low-income, rural communities in Yancey County.

Indicator: Track poundage of produce donated and number of families who were fed in the community; value the process by asking for feedback and completed evaluation forms

Action Plan:

Activity <i>(what is being done?)</i>	Resources Needed <i>(who? how much?)</i>	Anticipated Result <i>(what will happen?)</i>	Result Verification <i>(how will you know?)</i>	Target Date <i>(by when?)</i>
Maintain a volunteer-operated community garden	Local Partnerships; Volunteers;	Padding local hunger relief agencies, provide fresh fruits and vegetables to people within our community who are in need of food assistance	Number of people feed weekly; poundage of produce donated locally <i>Goal: 200 people feed weekly and 9,000 pounds donated during the growing season</i>	October 2015
Deliver Food Boxes periodically	Multiple Agencies (transportation,	Food security to local low-income families who may	Number of food boxes delivered	December 2015

throughout summer to low-income households	MANNA, local farms, DSS, etc.); Food; Volunteers; Funding; Identified families	not can afford or have access to healthy options	<i>Goal: 100 families, deliver 5 times over the course of the summer; total 500 boxes per summer</i>	
Develop, sustainable, and evidence based food security plan district-wide	Advisory Team; Local partnerships; Funding; Volunteers; Support from Community	To connect farmers and growers to food insecure populations in economically viable manners	Secure funding and begin implementation of plan across all three counties (Avery, Mitchell, & Yancey)	May 2015
Explore and identify at least two convenient stores in rural areas inside Mitchell and Yancey County who are interested in going healthy	Store Owners; Staff Time; Healthy Corner Store Toolkit; Materials; Printing; Local Farmers/ Distributors	To increase access to fresh, healthy foods where people live, work, and play as a solution to maintaining a healthy weight	Developed Plan, Completed surveys to help understand customer needs, Consultation with owners; Healthy products delivered	October 2015



Chapter 6

Next Steps

We will continue to work with a wide range of community partners to modify this Community Health Improvement Plan (CHIP) in the months and years ahead in Yancey County. This CHIP will be used by partner organizations to complete agency specific reporting of roles and responsibilities (e.g., our health department and local hospitals), as well as informing agency strategic plans across the county where appropriate.

This CHIP will be widely disseminated electronically to partner organizations and used as a community roadmap to monitor and evaluate our collective efforts.

Dissemination of this CHIP will also include:

Present to the Toe River Health District Board of Health

Present to the Yancey County Board of Commissioners

Present to the Healthy Yancey Partnership

Distribution to Yancey County School Administration

Distribution to doctors & nurses at Blue Ridge Regional Hospital

Distribution to Yancey County Senior Center

Post on the local radio station website: www.wkyk.com and www.healthyyancey.org

Conduct a Public Services Announcement with the local radio station

Publish on the monthly Health Page and posted on the local newspapers websites:

Make available on local agency websites and local library in Burnsville

Moving forward, the CHIP report will be updated to provide the framework for the annual State of the County's Health Report, which will be submitted and made publicly available in December 2013.

REFERENCES

NACCHO's CHA/CHIP Resource Center

<http://www.naccho.org/topics/infrastructure/CHAIP/index.cfm>

Wisconsin Association of Local Health Departments and Boards

<http://www.walhdab.org/NewCHIPResources.htm>

NC Division of Public Health Community Health Assessment Resource Site

<http://publichealth.nc.gov/lhd/cha/resources.htm>

Template Implementation Plan v 1.0; 6/2012. Wisconsin CHIPP Infrastructure Improvement Project *Revised 7/2012 for NACCHO CHA/CHIP Project

NC DPH Community Health Assessment Guide Book

<http://publichealth.nc.gov/lhd/cha/docs/guidebook/CHA-GuideBookUpdatedDecember15-2011.pdf>

Connecticut DPH Guide and Template for Comprehensive Health Improvement Planning

http://www.ct.gov/dph/lib/dph/state_health_planning/planning_guide_v2-1_2009.pdf

Bexar County CHIP <http://www.bcchip.org/#!/home/mainPage>

Sedgwick County CHIP

http://www.sedgwickcounty.org/healthdept/communityhealthpriorities_2010.pdf

Kane County CHIP Executive Summary <http://kanehealth.com/chip.htm>

Kane County full CHIP <http://kanehealth.com/chip.htm>

GLOSSARY OF TERMS

Vision of Impact	Describe the impact that the work of the CHIP will have in the identified health priorities in your county at the end of three years. In other words, what does success look like in 2016?
Community Objective	Description of what the collaborative action team wants to accomplish by addressing the specific health priority.
Strategy	Also known as interventions or approaches which will address priority health issues.
Goal	The impact of the work you anticipate for a specific strategy
Strategy Objectives	Description of what is to be achieved or the specific change expected to occur within a specific time frame. Objectives should be SMART (Specific, Measurable, Achievable, Realistic, & Time Specific). Can have more than one objective for each strategy and related goal.
Indicators	Measurements used to determine whether the objectives were met. They answer the question: how will I know if the objective was accomplished?
Activities	Key components of the strategy needed to achieve the objective for the strategy.
Resources Needed	Description of what your community will need (staff time, materials, resources, etc.) to implement the specific activity.
Results	Also 'impacts, outputs, and outcomes'. It's what happens as a result of the completion of specific activities.
Result Verification	How you will know that results have been achieved for specific activities.
Target Date	The date results will be verified.
Lead	An organization in this role commits to seeing that the issue is addressed. It would take responsibility for developing the resources needed to advance the issue such as a detailed plan. It would focus on the day-to-day and long-range tasks of moving the goal forward. Organizations in a lead role would ask others to assist with specific tasks.
Collaborating	An organization in this role commits to significant help in advancing the issue. For example, it might assist with planning, assembling data, or developing policy options. It would participate regularly in developing strategy to advance the goal.
Supporting	An organization in this role commits to help with specific circumscribed tasks when asked. These tasks might include attending meetings or writing letters of support to move the goal forward.