

#### Buncombe County 2008 Health Report

NC DHHS - State of the County Health (SOTCH) Report

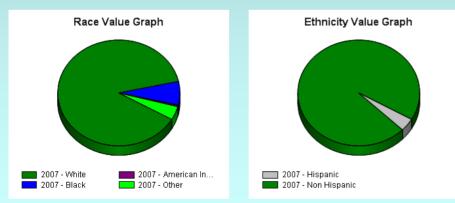
Prepared by Buncombe County Health Center and Health Partners December 1, 2008

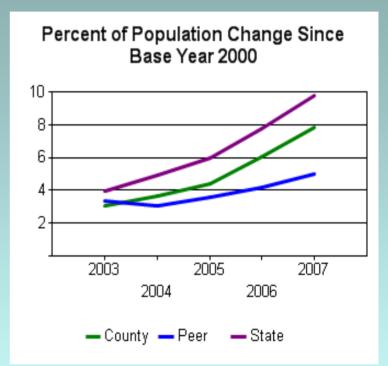
## **Contents of Report**

- Demographics
- Community Health Priorities data & community action updates
- Behavior Risk Factors
- Leading Causes of Death
- Chronic Disease Trends
- Communicable Disease Trends
- Emerging Health Issues
- Dissemination of Report

# Buncombe County Demographics

2007 Buncombe County Population by Race	Number of Citizens
White	196,730
Black	16,147
American Indian	954
Other (non-Hispanic)	9,259
TOTAL	223,090





#### **NC Peer Counties:** Burke, Davidson, Randolph

#### **Source:** NC CATCH (new data warehouse)

Population data is provided by a third party Information resources company named Claritas

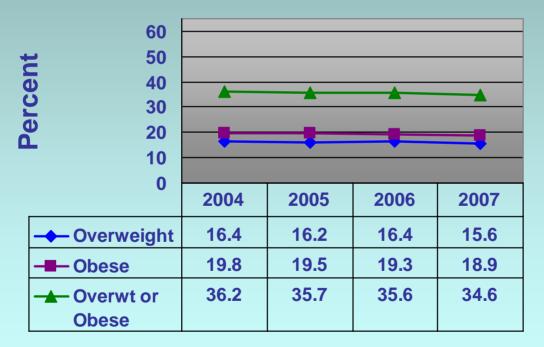
Community Health Priorities (2006 CHA Priority Issues)

- Physical activity & nutrition for healthy living
   Childhood and adult obesity prevention
- Access to whole person care
  - Primary care, dental, mental health, and preventive
- Economic access to care
  - Care for the uninsured and underinsured
- Mental Health
  - Integrated care
- Health Equity and Health Parity



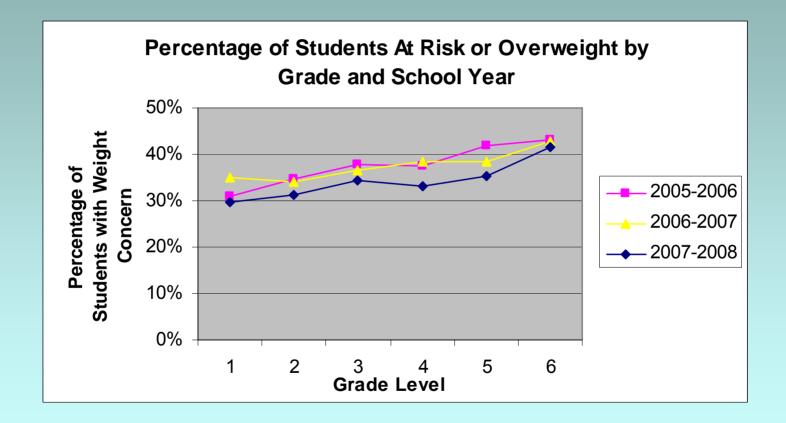
## Community Health Priorities Obesity Prevention - Children

Weight Status of Buncombe County K-5 Students



**Source:** Buncombe County School Health Advisory Council & Buncombe County Health Center (local BMI data on 12,705 elementary students in 2007)

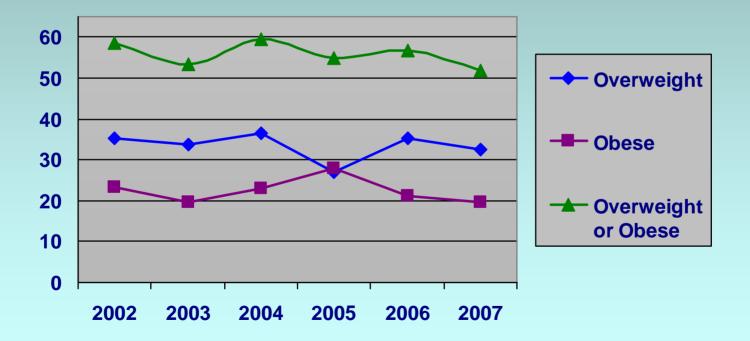
## Community Health Priorities Obesity Prevention - Children



**Source:** Buncombe County School Health Advisory Council & Buncombe County Health Center (2007 local BMI data)

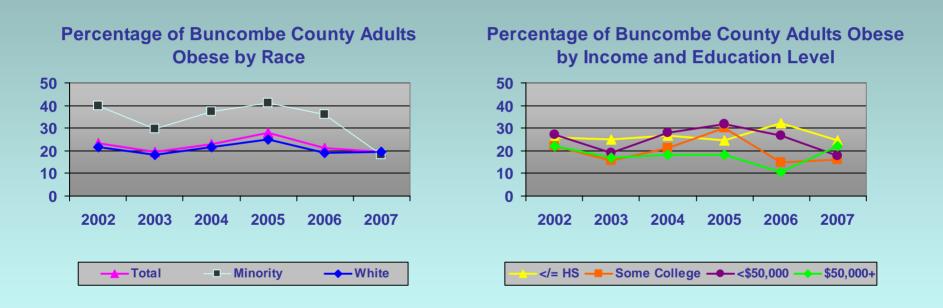
## Community Health Priorities Obesity Prevention - Adults

Percentage of Buncombe Adults 18 - 64 Who are Overweight or Obese



Source: NC BRFSS (Behavioral Risk Factor Surveillance System)

## Community Health Priorities Obesity Prevention - Adults



#### Source: NC BRFSS (Behavioral Risk Factor Surveillance System)

Four teams working collaboratively to address Physical Activity & Nutrition

- Healthy Buncombe Coalition
- Pioneering Healthy Communities
- School Health Advisory Council
- Health Partners Obesity Action Team

#### Healthy Buncombe Physical Activity and Nutrition Coalition



- Downtown on the Move
- BMI measurement in all elementary schools
- Reframing obesity as a community-wide justice issue and not simply a result of bad individual behaviors
- Focus on policy and environmental change
- www.healthybuncombe.org

## **Health Partners**

 Collaborative group that meets to plan, share Information & promote resources for healthy living



- 60 volunteers & representatives of local groups on the team
  - Events of partners listed at www.healthpartnerswnc.org
- Highlighted partner activities follow

## Pioneering Healthy Communities

 Activate Asheville has launched

 Making the Asheville area a more healthy place to live, work, & play



- Focus on policy & built environment, not direct programs

   Engaging community leaders including the Mayor, many key partners
- Coordinated by the YMCA of Western NC
- www.activateasheville.org

#### Mission Children's Hospital

- Creating a new continuum of child and family education and management to improve healthy lifestyles and reduce childhood obesity. Programs in development include:
  - Energize Basics (youth at or above 85<sup>th</sup> percentile Body Mass Index)
    - Sessions for Kids (7-11 year olds) and for Teens (8-12 year olds)
    - 1 night a week for 12 weeks
  - Energize (youth at or above the 95<sup>th</sup> percentile Body Mass Index)
    - Sessions for Kids (7-11 year olds) and for Teens (13 -18 year olds)
    - 3 nights a week for 12 weeks

#### Access II Care

 Educating local pediatricians on new Pediatric Obesity Tools to use with patients. In 2008, 17 local practices have been contacted.



#### • YMCA – Youth Fit for Life

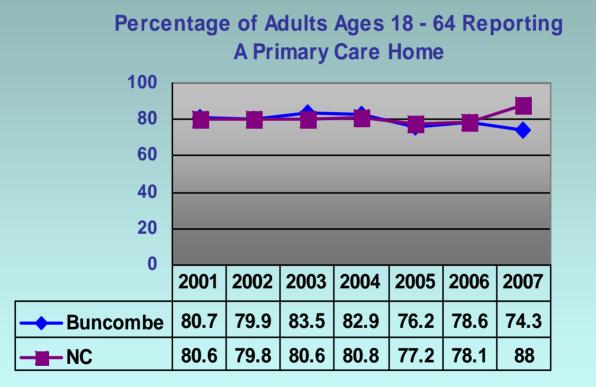
 In 2008, 248 local elementary school children have participated in Youth Fit for Life, a 12 week after school program focusing on improving health and fitness



- The Health Adventure
  - Approximately 1,800 children in 6 elementary schools in Western NC have seen a new musical called the "Couch Potato Wakes Up!" The show engages children in learning about nutrition and exercise.
- Getting Into Fitness Together (GIFT)
  - 12 session physical activity program for families offered at UNCA.
     10 families participated in Spring of 2008
- Appalachian Sustainable Agriculture Project (ASAP)
  - ASAP is the local, lead agency for the National Farm to School network, part of the Center for Food and Justice. Worked with child nutrition staff in local elementary schools to highlight use of fresh, locally grown vegetables.

# Access to Health Care & Insurance

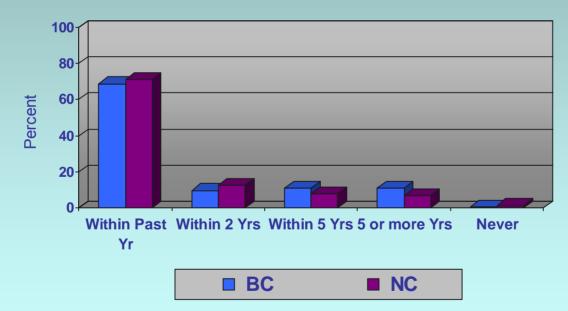
## Community Health Priorities Access to Healthcare



Source: NC BRFSS (Behavioral Risk Factor Surveillance System)

## Community Health Priorities Access to Healthcare

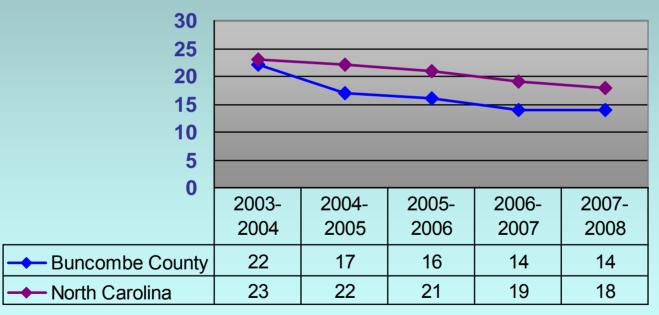
Percent Adults Who Visited a Doctor for Routine Checkup



Source: 2007 NC BRFSS (Behavioral Risk Factor Surveillance System)

## Community Health Priorities Access to Dental Care

#### Percentage of Buncombe Kindergarteners With Untreated Dental Disease



#### Source: NC Oral Health Data

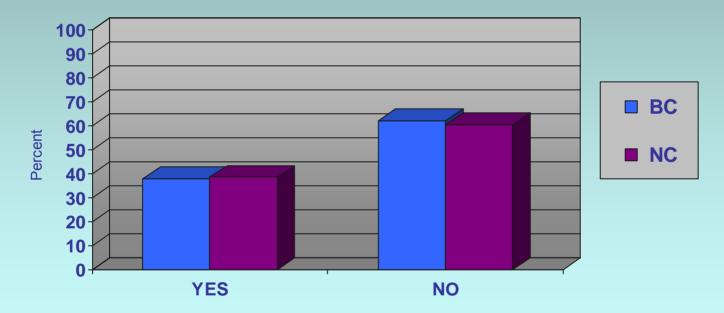
Note: 2007 - 2008 data is not available yet from NC Oral Health Section

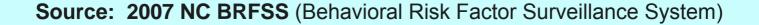
## Community Health Priorities Access to Dental Care

- Access to dental care is better than it has ever been for low-income adults.
- Services offered by WNCCHS and ABCCM have increased the capacity to serve low-income adults.
- However, dental issues are a leading cause of nonemergency visits to the Emergency Department by the uninsured
  - 542 dental related visits to the Emergency Department from June 2007 – May 2008, Mission Hospital ED data

#### Community Health Priorities Access to Preventive Services

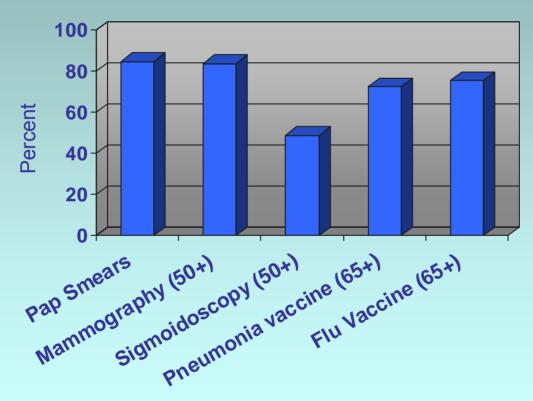
Percent Adults Who Had a Flu Shot This Past Year





## Community Health Priorities Access to Preventive Services

**Adult Preventive Service Use** 



Source: 2002 - 2006 US and NC BRFSS (Behavioral Risk Factor Surveillance System)

#### Community Health Priorities Partner Update – Access to Healthcare

## The Community Providers' Forum continues to serve as a resource for:

- Sharing information between health care providers on changes in patient services
- Working through barriers in referrals for uninsured patients
- Helping uninsured & underinsured community members access care
- Safety Net services brochure was updated and posted on-line at <u>www.healthpartnerswnc.org</u>

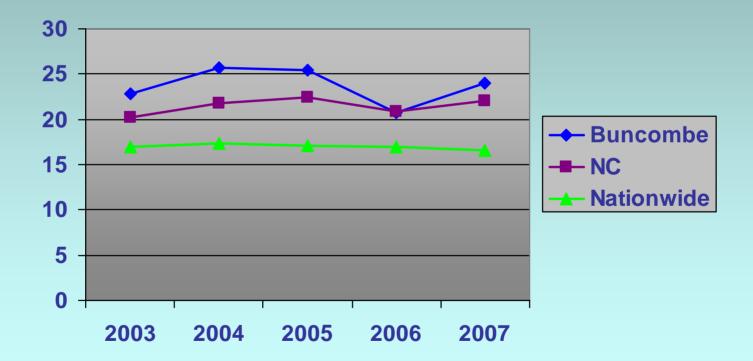






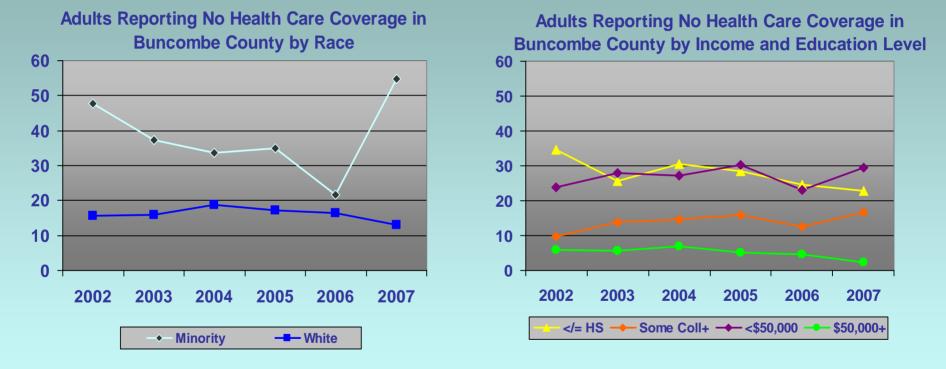
#### Community Health Priorities Economic Access to Healthcare

Percentage of Adults ages 18 - 64 Reporting No Health Care Coverage



Source: US and NC BRFSS (Behavioral Risk Factor Surveillance System)

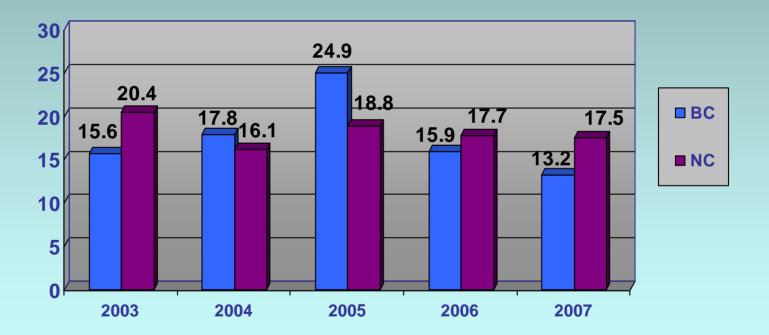
#### Community Health Priorities Economic Access to Healthcare



Source: NC BRFSS (Behavioral Risk Factor Surveillance System)

## Community Health Priorities Economic Access to Healthcare

Percentage of Those Working for Wages With No Health Insurance



Source: NC BRFSS (Behavioral Risk Factor Surveillance System)

# Community Health Priorities Partner Update – Economic Access to Care

Safety Net Steering Committee

In 2008, the Safety Net health care providers reassessed our community's capacity to serve the uninsured and underinsured

Safety Net Provider	# patient visits yearly	Type of Care
BC Health Center	43,000	Primary Care
WNCCHS	14,000	Primary Care
Three Streams	2,400	Primary Care
Project Access	14,000	Primary & Specialty
ABCCM	6,378	Acute care
Emma Clinic	800	Acute care
Sisters of Mercy, Inc	60,000	Urgent Care
Mission Hospital	96,000	Acute, Urgent
Emergency Dept	(all payment	and emergency
	sources)	

## Community Health Priorities Partner Update – Economic Access to Care

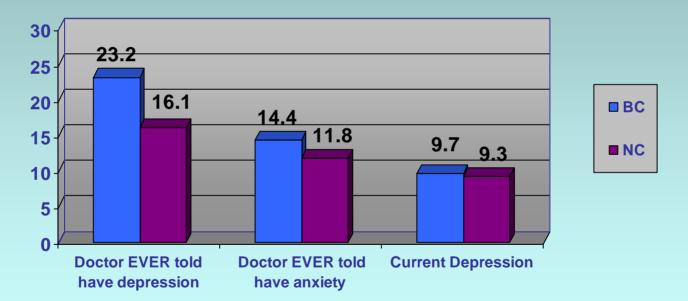
#### **Expanding health care access for the un/underinsured:**

- After reviewing the results of a study conducted by health consultants, the Buncombe County Commissioners have approved for County officials to explore opportunities to potentially draw significant additional federal dollars into our community for health care for the uninsured and underinsured.
- These possible new avenues would involve enhanced partnerships with WNC Community Health Services as well as with Hot Springs Health Program.
- The partnership with a Federally funded Community Health Center will allow for enhanced reimbursement for services, reduced cost of prescription drugs and reduced cost in malpractice insurance, which increases funds to support an increase in services for un- and underinsured.
- County officials commit to maintaining the current financial and staffing investments, as well as the same commitment to high quality, integrated care in any future partnerships.

## **Mental Health**

## Community Health Priorities Mental Health Care

Percentage Adults Experiencing Anxiety or Depression



Source: 2007 NC BRFSS (Behavioral Risk Factor Surveillance System) Note: First year these questions have been asked

#### Community Health Priorities Partner Update – Mental Health

#### Crisis Stabilization Center now open

 The Neil Dobbins Detoxification Center now has beds available so that many more patients can be stabilized in Buncombe County and do not need to be sent to Broughton State Hospital. In 2008, almost 240 additional individuals have been stabilized in our own community.

#### Crisis Intervention Training created for officers

 Western Highlands and other partners have created a 40 hour training course for law enforcement officers to teach them deescalation skills when dealing with residents with mental health or substance abuse problems. So far, over 50 officers have participated in the training.

#### Integrated Care Collaborative (ICC)

 The ICC is a group working to encourage integrating behavioral health services into medical health services. This MAHEC group continues to engage new practices and expand options for care.

#### Community Health Priorities Partner Update – Mental Health

- Case Management Services at Buncombe County Jail
  - In partnership with RHA Health Services, 2 full time case managers are located at the jail to link detainees to substance abuse and mental health services. The goal is to increase engagement in treatment and reduce recidivism.

#### Diversion services at Buncombe County Jail

 Western Highlands and Buncombe County have partnered to provide weekend pretrial services. Detainees with severe mental illness are immediately identified, evaluated, and a plan is presented to the judge for release to community treatment.

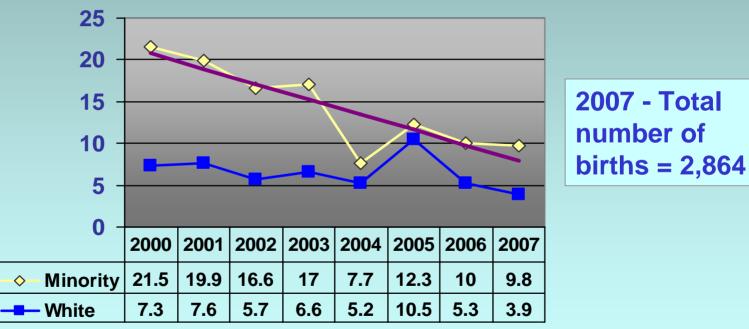
#### "Wet" Shelter for intoxicated persons developed

 Member agencies of the Buncombe County Drug Commission partnered to develop 4 beds for police officers to refer intoxicated persons that shelters will not accept.

## **Health Equity and Health Parity**

## Community Health Priorities Health Parity

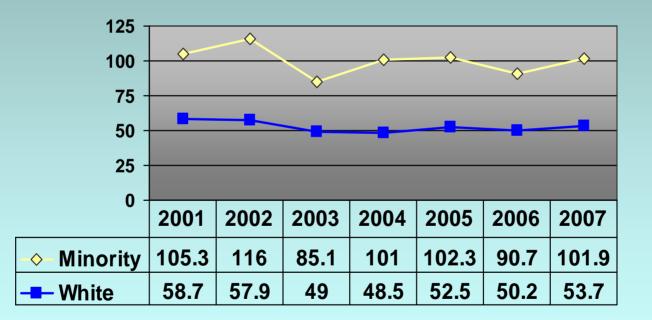
Buncombe Infant Mortality Rate per 1,000 Live Births



**Source:** NCSCHC – NC Vital Statistics, Infant Mortality Report

## Community Health Priorities Health Parity

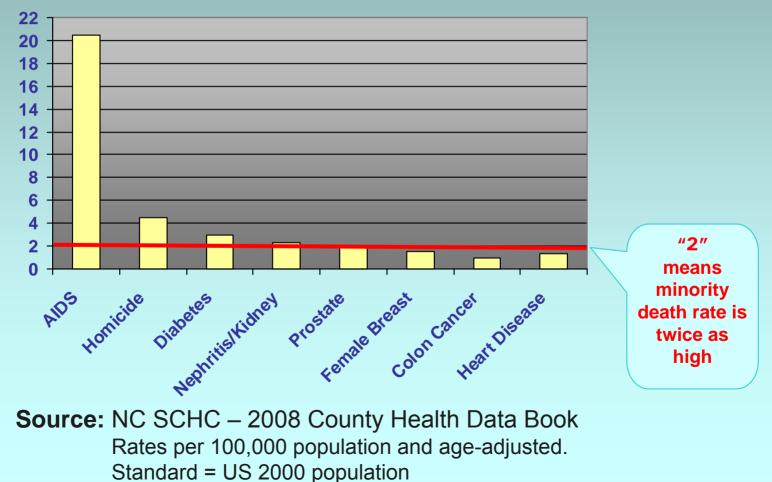
Buncombe Adolescent Pregnancy Rate per 1,000, Ages 15-19



**Source:** NC SCHC – NC Vital Statistics, Pregnancy, Fertility, & Abortion Rates

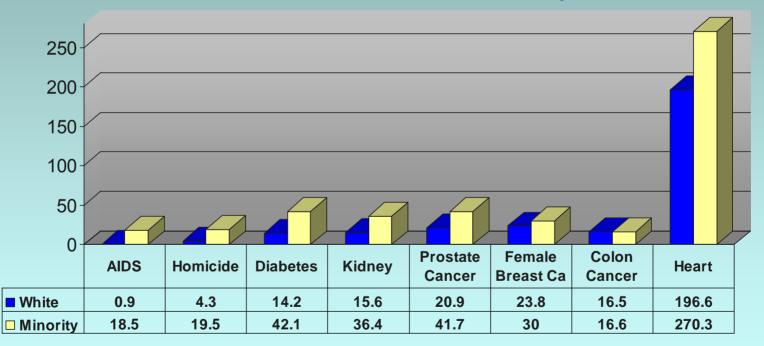
## Community Health Priorities Health Parity

Buncombe Disparity Ratios Death Rates 2002 - 2006



### Community Health Priorities Health Parity

2002-2006 Race-Specific Age-adjusted Death Rates for Buncombe County



**Source:** NC SCHC – 2008 County Health Data Book Rates per 100,000 population and age-adjusted. Standard = US 2000 population

### Community Health Priorities Health Parity

Vulnerable populations may face unique health risks and barriers to care, requiring enhanced services and targeted strategies for outreach and case management.

Vulnerable Populations Include People Who <sup>1</sup> :	
Have no high school diploma (among adults age 25 and older)	27,490
Are unemployed	4,937
Are severely work disabled	6,525
Have major depression	13,118
Are recent drug users (within past month)	14,647
<sup>1</sup> The most current estimates of prevalence, obtained from various sources were applied to 2005 mid-year county population figures	

**Source: 2007 CHSI** – Community Health Status Indicator Report, Buncombe County

### Community Health Priorities Partner Update – Health Equity & Health Parity

- Health Equity Team created through Health Partners and ABIPA
  - A volunteer team of residents created an awareness and advocacy campaign using the new documentary *"Is Inequality Making Us Sick?*
- **ABIPA (Asheville Buncombe Institute for Parity Achievement)** provides outreach, screenings, and case management focusing on heart disease, cancers and diabetes
  - Prostate screening 86 men seen, 10 abnormal reported
  - Mammograms & breast health education conducted for over 50 women
  - 5 Churches with African American congregations have completed a 4 week nutrition/bible class created by the American Cancer Society with over 85 people in attendance (Hillstreet Baptist, St. James, Ray of Hope, Bethel 7 Day Adventist)
  - Sista to Sista breast cancer support group meeting held monthly for women of color
  - "Ladies Night Out" breast cancer screening events

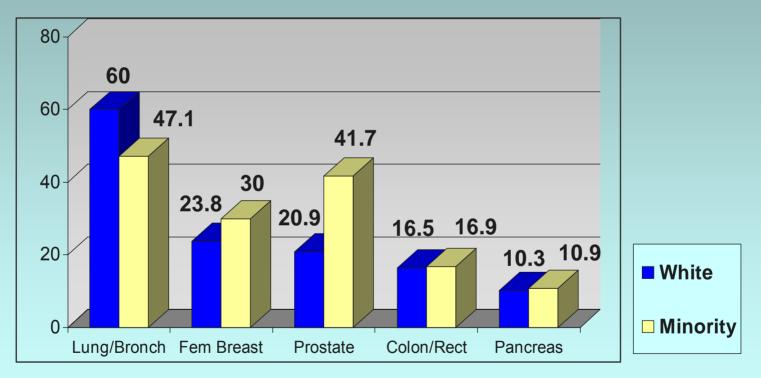
# **Leading Causes of Death**

2002-2006 Leading Causes of Death	Rank		
For Buncombe County Residents Rate per 100,000. Standard = US 2000 population	All	Whites	Minorities
Diseases of the Heart	1	1	1
Lung, Trachea, and Bronchus Cancer	2	2	3
Chronic Lower Respiratory Diseases	3	3	9
Cerebrovascular Disease	4	4	2
All Other Unintentional Injuries	5	6	8
Alzheimer's Disease	6	5	13
Female Breast Cancer	7	7	7
Pneumonia and Influenza	8	8	14
Prostate Cancer	9	9	5
Colon, Rectum, and Anus Cancer	10	10	10
Nephritis and Kidney Diseases	11	11	6
Diabetes Mellitus	12	12	4
Homicide	(15)	(15)	11
AIDS	(16)	(16)	12

Source: NC State Center for Health Statistics, 2008 County Health Data Book

# **Leading Causes of Death**

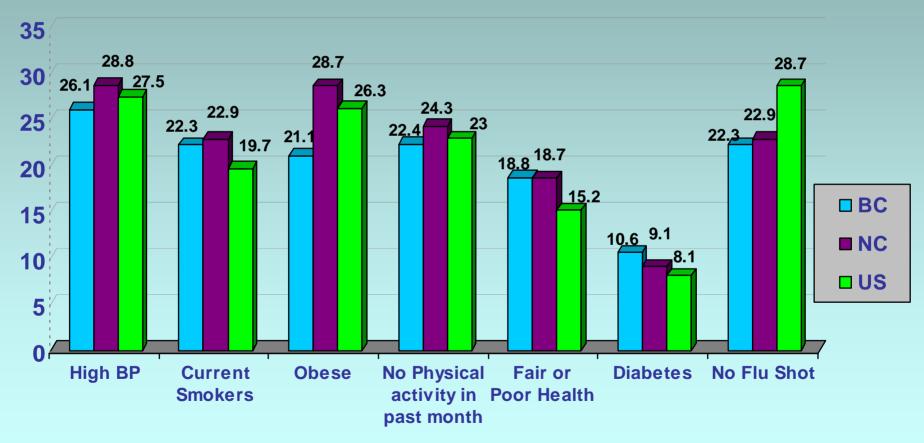
**2002-2006 Age-adjusted Cancer Deaths** for Buncombe County by Site of Cancer



Source: NC SCHC – 2008 County Health Data Book Rates per 100,000 population and age-adjusted. Standard = US 2000 population

## **Behavior Risk Factors**

### Selected Behavior Risk Factors for Adults by Percent



Source: 2007 US and NC BRFSS (Behavioral Risk Factor Surveillance System)

## **Communicable Disease Trends**

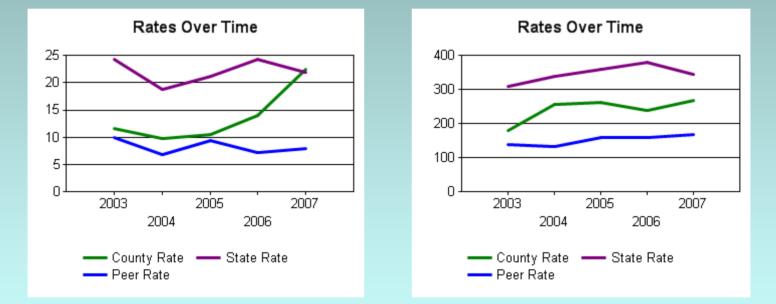
Selected Reportable Communicable Diseases, Buncombe County	October Y-T-D 2008	October Y-T-D 2007
AIDS	18	21
<b>HIV Infection</b> (state reporting standards will change #'s)	30	59
Gonorrhea (all categories)	195	214
Chlamydia	672	523
Nongonococcal urethritis (NGU)	93	100
Syphilis, Primary	7	1
Syphilis, Secondary	1	0
Syphilis, Latent (all categories)	11	8
Hepatitis A	1	2
Hepatitis B, Acute	2	8
Hepatitis B, Carrier	7	20
Lyme Disease	5	1
Rocky Mountain Spotted Fever	2	8
Streptococcal Infection, Group A	9	5
Tuberculosis	7	14
Whooping Cough	2	12

#### Source: BC Health Center – Monthly Morbidity Summary Report

## **Communicable Disease**

#### Buncombe County HIV Disease rate per 100,000

#### Buncombe County Chlamydia rate per 100,000



Source: 2007 NC HIV/STD Prevention & Care Branch, Buncombe Data

# **Changes Impacting Health**

### **School nursing**

- Six additional school nurses were added in 2007-2008 so that our nurse to student ratio has now dropped from 1 nurse for every 2,063 school children to 1 for every 1,472. This is a very important step toward meeting the state's average ratio of 1:1,344.
- School nurses are increasing their focus on preventing obesity by offering healthy living education in elementary school classes.

### **HealthNet Initiative**

- Access II Care is a local non-profit that has been providing case management around specific chronic conditions for Medicaid patients. With additional state funding for services to the uninsured starting in 2007, they (and Safety Net Providers) have been able to:

  - + # of uninsured patients in case management by 145

# **Emerging Health Issues**

- In past 6 months, several clusters of syphilis have emerged, increasing the number of cases & need for careful monitoring & intervention
- In the last month DSS has set a county record for highest number of residents on food stamps (over 20,000 people)
- As unemployment increases, we expect:
  - Increase in number of people without insurance
  - Increase in demand for public & emergency services

## **Data Sources**

- NC CATCH (New!)
- US and BC BRFSS (Behavior Risk Factor Surveillance Study)
- NC Vital Statistics
- County Health Data Book
- NC Oral Health Data and Report
- **CHSI** Community Health Status Indicator Report
- BC School Health Advisory Council BMI Data and Report
- **BC Health Center** Monthly Morbidity Summary Report
- Mountain Council on Alcohol and Drug Dependence 2008 Report

# **For More Information**

- Buncombe County Health Center Gaylen Ehrlichman (828) 250-5045 www.buncombecounty.org
- Health Partners

J. Nelson-Weaver (828) 250-5205 www.healthpartnerswnc.org

# **Report Dissemination Plan**

- Board of Health meeting by Jan 2009
- County Commissioner agenda by Jan 2009
- Health Partners annual meeting in Spring 2009
- Websites: <u>www.healthpartnerswnc.org</u> and <u>www.buncombecounty.org</u>
- BC Health & Human Services management teams
- News release, newsletters and area publications (local media, BC Government e-zine & public access TV programming, Mission SCOPE, Health Partners e-newsletter, etc)
- Public Libraries (hard copy)
- School Libraries (hard copy)
- Develop a brochure format to be distributed with or without Ppt presentation