

State of the District

*2011-12 Community Health Report for
Alleghany, Ashe, & Watauga Counties*



Health for All: Promote. Prevent. Empower.

Looking ahead

December, 2012

Dear Friends,

We are pleased to bring you this community health report as a snapshot of community health successes and challenges we currently face in our district. Now, more than ever, we recognize the value of partnerships for establishing strong public health improvements in our communities. As we work to improve public health status in the Appalachian District, we ask you to join with us in our journey.

In 2011, we joined with local community agencies and our local hospitals to conduct the 2011 Community Health Assessment. As you know, the assessment provides us with critical knowledge we need to identify emerging public health issues.

Over the past year, we have been able to celebrate many successes. We've learned great lessons through our partnerships with the Appalachian District leadership team as a part of the Communities Putting Prevention to Work project. Our research team from Appalachian State University have helped us extract key lessons learned and add key research to the evidence-base of public health work in community obesity prevention.

Through community partnerships, we have been able to achieve great strides in beginning to address the community concerns about access and affordability of primary healthcare services. Clearly, we have a lot of work ahead, but we are encouraged about these new opportunities and what they will allow us to provide our communities. We appreciate the opportunities that are ahead for the community through the partners at Allegheny Memorial Hospital, Allegheny Healthnet, Ashe Memorial Hospital, Ashe Health Alliance, and High Country Community Health.

This upcoming year, we are continuing our journey to improve our information technology infrastructure that will allow us to continually improve quality of services and our overall efficiencies. In addition, we will continue to put customer service first by putting this as a key priority for all our offices and by expanding our community collaborative projects in the Community Transformation Grant, Triple P (Positive Parenting Program), Seeds of Change Initiative, and many more.

Finally, as we embark on this new year, we commit to continually review our operations to improve systems and efficiencies, to provide the best public health services possible to Allegheny, Ashe, and Watauga Counties. Please, take note of the key recommendations outlined in this report and get involved. Go to our new and improved website and sign up to join our quarterly mailing list to stay on top of your community public health news. Thank you for being a part of public health solutions in your community.

In Health,

Beth Lovette

Beth Lovette, MPH, RN
Health Director



Leading Concerns: Alleghany

We know that there are many variables that are connected to the leading causes of death, but clearly chronic diseases like heart disease and cancer are the leading causes in our area, Tobacco use, poor nutrition, and lack of physical activity are chief contributors to the leading causes of death in all Appalachian District counties.

Leading Causes of Death: Alleghany County

Rank	Cause	Number	%
1	Diseases of heart	32	24.4
2	Cancer	31	23.7
3	Chronic lower respiratory diseases	7	5.3
4	All other unintentional injuries	5	3.8
5	Alzheimer's disease	5	3.8
6	Cerebrovascular diseases	5	3.8
7	Diabetes mellitus	5	3.8
8	Intentional self-harm (suicide)	4	3.1
9	Septicemia	4	3.1
10	Motor vehicle injuries	3	2.3
	All other causes (Residual)	30	22.9
Total Deaths -- All Causes		131	100.0

Priority areas identified in the 2011 Community Health Assessment

- ★ Obesity (poor nutrition, lack of physical activity)
- ★ Access and affordability of healthcare services

Leading Concerns: Ashe

Leading Causes of Death: Ashe County

Rank	Cause	Number	%
1	Diseases of heart	66	20.8
2	Cancer	63	19.9
3	Chronic lower respiratory diseases	28	8.8
4	Cerebrovascular diseases	20	6.3
5	All other unintentional injuries	14	4.4
6	Alzheimer's disease	9	2.8
7	Motor vehicle injuries	9	2.8
8	Influenza & pneumonia	8	2.5
9	Intentional self-harm (suicide)	8	2.5
10	Diabetes Mellitus	6	1.9
	All other causes (Residual)	86	27.3
Total Deaths -- All Causes		317	100.0

Priority areas identified in the 2011 Community Health Assessment

- ★ Obesity (poor nutrition, lack of physical activity)
- ★ Access and affordability of healthcare services

Leading Concerns: Watauga

Leading Causes of Death: Watauga County

Rank	Cause	Number	%
1	Diseases of heart	81	25.3
2	Cancer	75	23.4
3	Chronic lower respiratory diseases	22	6.9
4	Alzheimer's Disease	16	5.0
5	All other unintentional injuries	15	4.7
6	Cerebrovascular diseases	12	3.8
7	Diabetes mellitus	10	3.1
8	Chronic liver disease and cirrhosis	8	2.5
9	Influenza and pneumonia	7	2.2
10	Nephritis, nephrotic syndrome, nephrosis	5	1.6
11	Pneumonitis due to solids and liquids	5	1.6
12	Septicemia	5	1.6
	All other causes (Residual)	5	1.6
Total Deaths -- All Causes			

Priority areas identified in the 2011 Community Health Assessment

- ★ Obesity (poor nutrition, lack of physical activity)
- ★ Access and affordability of healthcare services

Obesity Prevention



In 2010, Appalachian District became the recipient of the Communities Putting Prevention to Work grant as a part of a national initiative to prevent obesity in multiple sectors in communities by making healthy living easier. Learn more about the Communities Putting Prevention to Work initiative at www.cdc.gov/CommunitiesPuttingPreventiontoWork/communities/profiles/obesity-nc.appalachian.htm

Alleghany	Ashe	Watauga
		
<p>Alleghany Farmer's Market opened in 2012 creating healthy eating and economic opportunities</p>	<p>The Town of West Jefferson redesigned their downtown to create more safe pedestrian activity while creating economic development.</p>	<p>The Hospitality House of Boone implemented a garden and bike loaner program. Produce grown in the gardens on site provides for the Bread of Life community kitchen</p>

Community Transformation Grant



In 2011, Appalachian District received a five year grant from the NC Division of Public Health as a part of the national CDC Community Transformation Grant initiative to make healthy living easier. Appalachian District is partnering with Wilkes, Surry, Stokes, Davie, Davidson, Yadkin, and Forsyth counties. The initiative includes support for community strategies for healthy eating, active living, tobacco free living, and quality clinical interventions. Contact us to learn more or get involved.

Kaitlyn Jongkind, Food Systems Coordinator joined Claudine Silver, well known community volunteer and leader and the youth at Westwood Elementary to learn new academic skills with gardening.

Learn more about the Community Transformation Grant in the area at www.apphealth.com or by contacting Beth Fornadley, CTG Coordinator at bethf@apphealth.com.

**Priority Issue**

Access to healthcare

Access and affordability of healthcare for all is continuing to top the list of concerns among communities. In all Appalachian District counties, estimated uninsured rates of people ages 19-64 exceed the percentage of uninsured for North Carolina. Learn more at www.nciom.org

Area	Percentage	Population Number
Alleghany	24.5%	2,000
Ashe	22%	3,000
Watauga	25.5%	8,000
North Carolina	23.6%	1,331,000

Access and affordability of healthcare services continues to be a priority health concern for all Appalachian District counties. Each county has joined together to work on this issue in a variety of ways. Alleghany County obtained a \$500,000 grant from the Golden Leaf Foundation to support primary care access at Alleghany Memorial Hospital and Alleghany County Health Department. In addition, the Kate B. Reynolds Charitable Trust has invested in this critical community health need. In Ashe County, the Ashe Health Alliance and Healthnet workgroup is continuing to establish collaborative connections to increase access and quality of healthcare for the uninsured adults in the county. In Watauga County, a new federally qualified health center (FQHC) was funded that will operate out of the Watauga County Health Department called High Country Community Health beginning in January, 2013. Learn more about High Country Community Health by contacting Bryan Belcher at bryanhcch@gmail.com. Learn more about Ashe/Alleghany Healthnet by contacting Robert Wadden at robert.wadden@apphealth.com. Each of these initiatives provides increased opportunities to address this priority issue.

**Emerging Issue**

The Patient Protection & Affordable Care Act

In March, 2010, the Patient Protection and Affordable Care Act was signed into law. There has been much discussion about the potential implications and provisions outlined in the law. The ACA provisions include essential health benefits, health insurance exchanges, and expansion of health insurance to many adults who are uninsured today in 2014. While there are some clearly outlined points about the law, there are still many questions that remain. Learn more about the Patient Protection and Affordable Care Act at www.healthcare.gov or review the report developed by the North Carolina Institute of Medicine that details the key actions discussed and proposed for North Carolina. Clearly, this is an emerging issue as we plan to respond to meeting requirements of the law across multiple healthcare and other community sectors.

Source: US Department of Health and Human Services (2012). Retrieved from: www.healthcare.gov/law/resources/nc.html

Source: NC Institute of Medicine (2012). *Examining the Impact of the Patient Protection and Affordable Care Act in North Carolina*. Morrisville, NC; May, 2012.

FDA Food Code

Emerging Issue

On September 1, 2012, the new FDA food code became effective in NC. According to the NC Department of Health and Human Services, these changes represent the most comprehensive changes in the NC food protection standards in more than 30 years and establishes practical, science-based rules and provisions to help avoid food-borne illnesses like salmonella and noroviruses. Under the new rules, employees must avoid handling ready-to-eat foods with bare hands and all restaurants must have a certified food protection manager onsite during operating hours. Restaurants must also establish employee health policies to ensure that an ill employee who has the potential to contaminate food is not involved in the preparation or handling of food. Restaurant rating systems will also change under the new food code. Although sanitation rating cards showing the grade and score will continue to be posted, restaurants will no longer earn a bonus for completing voluntary food safety training. Food safety certification is now required for food handlers. Environmental health staff have hosted many educational events to help train food service managers and employees on the implications of the new food code over the past year. To learn more about the new FDA food code log on to <http://ehs.ncpublichealth.com/rules.htm>

Priority Issue

Behavioral Health

Mental and behavioral health was identified as a key priority issue in the 2011 Community Health Assessment. To help address the concerns, various initiatives have begun or continued. Appalachian District Health Department began a positive parenting program called Triple P in 2012 to address concerns about positive parenting support to reduce out of home placement and child maltreatment and substantiated child abuse cases.

In addition, Appalachian District has worked with local partners to conduct the Youth Risk Behavior Survey in each high school and Ashe County Middle School. These reports will provide critical information to parents, youth advocates, and communities to address the concerns raised within the reports. To learn more about the survey, contact the Watauga County Health Department office.

In 2011, substance abuse prevention was a top priority for Watauga County in the Community Health Assessment. Through the partnership with key community groups and partner organizations, great work is beginning and continuing.

Priority Issue

Watauga County Healthy Carolinians is leading efforts to prevent prescription medication abuse while supporting those with chronic pain through the Project Lazarus coalition. Learn more by contacting Rachel Vandenberg Florence at Rvandenende@apphrs.org

Western Youth Network is leading efforts in this area through the Watauga County Substance Abuse Prevention Coalition. Angela Hagaman, Director of Prevention Services at WYN is linking the community to key evidence-based strategies to prevent underage drinking. Learn more by contacting Angela at hagaman@westernyouthnetwork.org

Substance Abuse Prevention

Key Recommendations

Improving the health of the public is everyone's job.

Be a part of the solutions that will create a healthier community to improve quality of life, decrease disease burdens, and save healthcare costs.

Access to healthcare

- ★ Learn about the Affordable Care Act in NC at www.nciom.org
- ★ Implement quality improvement measures to embrace evidence-based practices
- ★ Link community and clinical needs together

Obesity Prevention

- ★ Support joint use of existing facilities for physical activity
- ★ Support complete streets
- ★ Create strong, local food system opportunities by supporting farmers and access to healthy foods for all

Behavioral Health

- ★ Support parenting programs as a part of a community system
- ★ Monitor youth risk behavior every two years
- ★ Support suicide prevention efforts

Substance Abuse Prevention

- ★ Keep alcohol and medications locked up
- ★ Do not share your prescription medication
- ★ Support community prevention programs

Other Recommendations

- ★ Maintain current Public Health Aid to County funding
- ★ Support funding for evidence-based tobacco prevention and cessation programs through tobacco settlement funds
- ★ Increase by \$1.00 per pack tobacco user tax and user tax on other tobacco (non-cigarette) products to a tax rate equivalent with that of cigarettes to reduce the incidence of teen smoking and to encourage all tobacco users to quit. Fund preventive local public health programs with this revenue.

Priority Issue

Special Projects



Susan G. Komen for the Cure gives local support

The Susan G. Komen for the Cure foundation of the Tri-Cities funded the Appalachian District-Toe River Health District joint application for funding to support more low income, uninsured, underinsured women receiving the breast cancer prevention screenings and follow up diagnostic medical services needed to get early treatment.

Each year, Appalachian District serves ***INSERT #*** women in the Breast and Cervical Cancer Control Program. Without these services, many women would have little options to afford preventive screenings and follow up services needed to treat breast and cervical cancer early, before it becomes life-threatening. Faith Haywood, RN, Breast and Cervical Cancer Control Program Coordinator in Watauga County, managed the local project in Appalachian District to ensure that women received these important services. Learn more about the NC Breast and Cervical Cancer Control Program at <http://bcccp.ncdhhs.nc.gov/> and more about the Susan G. Komen for the Cure at www.komen.org/



Seeds of Change

Imagine a regional food system that creates jobs, feeds our communities, and protects our natural environment. This is Seeds of Change.

The Seeds of Change initiative began in 2011 in partnership with Blue Ridge Women in Agriculture through a grant provided by Heifer USA. The initiative has developed a multi-county coalition from Wilkes, Watauga, Ashe, Alleghany, North Carolina and Johnson County, TN. Seeds of Change provides a great opportunity to reach public health needs of creating opportunity for healthy living by building systems and strategies across the communities to support farmers, grow jobs, and increase access to healthy foods for all.



Learn more about the initiative or join the coalition by logging on at <http://soc.brwia.org/index.html> or contact Kaitlyn Jongkind, Food Systems Coordinator at kaitlyn.jongkind@apphealth.com



Stay informed

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