STATE OF THE COUNTY HEALTH REPORT

HENDERSON COUNTY, NORTH CAROLINA DECEMBER 2008

Review of Recent Data

In 2007, heart disease was the leading cause of death in Henderson County, followed by cancer, chronic lower respiratory diseases (emphysema, chronic bronchitis, and chronic obstructive pulmonary disease), Alzheimer's disease and stroke.

In reviewing the latest health data trends, it is clear that Henderson County is a relatively healthy county with few major health concerns. Most key health indicators are below the state rate including deaths from colon cancer, lung cancer, stroke, motor vehicle, heart disease, cancer, prostate cancer, diabetes, and breast cancer. Henderson County's five year infant mortality rate decreased slightly to 6.4 and is lower than the state rate of 8.4 (per 1,000 live births).

There has, however, been a steady rise in the prevalence of overweight children ages 5-11. The rate has increased from 13.4% in 2000 to 25.4% in 2006. Children ages 2-4 also have a higher prevalence of overweight increasing from 11.7% in 2000 to 15.8% in 2006. While Henderson County was below the state rate for both indicators in 2000, the county is now higher than the state rate.

Leading Causes of Death					
Henderson County Rank	NC Rank	Cause of Death			
1st	1st	Heart Disease			
2nd	2nd	Cancer			
3rd	4th	Chronic Lung Diseases			
4th	6th	Alzheimer's Disease			
5th	3rd	Cerebrovascular Diseases			
6th	5th	Unintentional Injuries			
7th	10th	Influenza/Pneumonia			

Twenty-one percent of our population is 65 years of age and older. Although we have an older population due to being a retirement community, when adjusted for age, morbidity and mortality data is within the state average for most indicators.

Henderson County also has a very low non-white population. According to the 2007 US Census data, the population is 99,640. Ninety-one percent of the population is white, 3% is African American, and 6% is classified as other. There is a growing Hispanic/Latino community in our county. In 2006, they made up 8.3% of the county population. Many undocumented residents are not able to obtain health

and dental care. This is especially hard on children who don't qualify for Medicaid, Health Choice, or vision youchers.

The teenage pregnancy rate in the county has remained fairly stable since last year. The area of greatest increase is pregnancies in Hispanic teenagers. In 2007 the NC rate dropped, but the county rate increased significantly. We will continue to monitor this indicator.

Each North Carolina county
must conduct a Community
Health Assessment and
identify health priorities every
four years. The next
Community Health Assessment
will be conducted in 2010.

Progress on Major Health Concerns

Health priorities from the 2007 Community Health Assessment included: school nurses, child-hood and adult obesity, access to dental health care, tobacco use, services for the aging population, and access to mental health. Review of the most recent data and local interventions indicate the following progress on these priorities.

School Nurses

The current 2008-09 school nurse to student ratio of 1:1480 has improved greatly since 2003 when it was 1:3000.

Our Community Health Assessment Plan is to decrease the nurse to student ratio to less than 1:1200.

The Children and Family Resource Center (CFRC) held an interactive community forum in October 2007 to set community priorities for healthy, safe, and well-educated children. More than 280 residents attended. Increasing the number of school

Henderson County, NC – School Nurse Ratio					
School Year	2005-06	2006-07	2007-08	2008-09	
Henderson County	1:2538	1:2182	1:1841	1:1480	
North Carolina	1:1571	1:1340	1:1250	unavailable	
National Recommendation	1:750	1:750	1:750	1:750	

nurses was identified as a top priority. CFRC mobilized the community and led the charge to address this issue. Public meetings were held, community members spoke at county commissioner meetings, and the issue was brought to the forefront. In June 2008, County Commis-

sioners approved two full-time school nurses, bringing the total to nine.

Although great progress has been made, there still remains the challenge of finding secure, sustainable funding for the current positions, plus additional school nurse positions.

Adult and Childhood Obesity

According to NC-Nutrition and Physical Activity Surveillance System data, the prevalence of overweight children ages 2-18 years in Henderson County exceeded 15% in 2006.

Since 1995, the percent of children in Henderson County at risk for overweight has risen in each age group.

Henderson County received a D+ in physical activity recommendation on the NC Eat Smart Move More Report Card.

Additional data from 2006 showed that residents consume more colas per week, prefer fast food to home cooking, and spend leisure time watching TV instead of being physically active.

The new Childhood Obesity Prevention Demonstration Project awarded to the county will help address these issues.



Tobacco Use

Henderson County has long been a leader in addressing tobacco use. Henderson County Public Schools was one of the first school districts to adopt a campus wide tobacco ban. Tobacco Free for Life has been working

with the youth of the county for over 10 years teaching children the positive aspects of not using tobacco products.

A community tobacco action team is working to decrease the incidence of tobacco use among youth which is 16.1% in Henderson County to below the state level of 15.7%. With the assistance of a grant from the Health and Wellness Trust

Fund Commission, Partnership for Health is working with Henderson County Public School students to encourage them to be tobacco free. Tobacco Free for Life (TFL) continues to teach students the positive as-

pects of not using tobacco primarily to 5th grade students through KAT (Kids Against Tobacco) presentations. High school students are involved in Tobacco Free for Life through SWAT (Students Warning Against

Tobacco), a peer advocacy and peer mentoring program. SWAT students work with businesses assisting them in going smoke free, with gas stations and minimarts to educate them on the consequences of selling tobacco products to minors, and presenting KAT programs to fifth grade classes.

For adult tobacco preven-

tion, Henderson County Dept. of Public Health is helping pregnant, low-income women and others in their household quit their nicotine dependency.



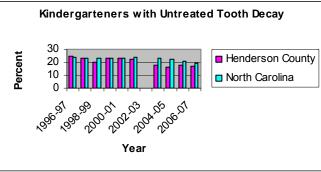
2008 SWAT Club Members

Access to Dental Care

In 2006-07, 17% of kindergarteners had untreated dental decay. This has declined steadily since 2000-01 when the untreated dental decay rate was 23%. During the past four years, Smart Start funds have been available to pay for dental treatment for 3-5 year old children who do not have Medicaid, Health Choice, or insurance. Last year, 19 children not covered by these plans received dental treatment through the Smart Start dental treatment program. The program also helps to educate parents and children about proper dental care.

In January 2005, Smart Start began providing funding for a program to support a patient navigator for children needing dental treatment. The navigator helps schedule appointments and transportation. Interpreter services are also provided for Spanish speaking clients. Last year, 93 children received assistance and treatment through this program.

One of the services offered by The Free Clinics is an adult extraction clinic. Last year 434 patients were seen with 25% having more than one tooth extracted. During the year, 146 others were placed on a waiting list for services. Held at the Blue Ridge Community Health Services Stokes Dental Clinic, this clinic offers services to many who have no other option. To increase access to dental health care, Stokes Dental Clinic will expand their clinic in the next year.



Access to Mental Health Care

The state of mental health in the North Carolina remains unsettled with changes and funding cuts occurring on a regular basis. Henderson County has not been immune to these changes but has been working hard to deal with them in order to best serve the needs of clients desperate for services. Many agencies and providers offer mental health services along with a detox unit at Pardee Hospital. Low-income clients can receive help with finding resources through the Community

Health Network. For those who qualify, medication assistance for mental health drugs can be obtained through the community pharmacy at The Free Clinic. Mental health agencies meet regularly to assess the situation in the county and brainstorm ways to serve the needs of residents.

Services for the Aging Population



Henderson County is an inviting place to retire. Because of this, the county has a disproportionate number of elderly residents as

compared to the state or nation. Community agencies that serve this population are continually looking for ways to meet their needs. Even financially secure elderly are at risk because of increased health issues, social isolation, depression, and other conditions. Partnership for Health and the Henderson County Department of Public Health have

formed an action team for older adults. The goal of this team is to devise a plan that will ensure the frail, at-risk elderly and special needs population in Henderson County will be served in the event of an emergency. The action team is working with Henderson County Emergency Services, Council on Aging of Henderson County, and area churches to learn what procedures are now in place and define gaps in services, coordinate a method of reaching those who may be in need during a crisis, and coordinating collectively to enhance the county's emergency response plan for the elderly.

Factors Affecting Health Status

Socioeconomic: Unemployment in Henderson County has increased from 3.9% in January 2008 to 5.3% in October 2008. Seventeen percent of county residents lack health insurance. Over the last year, the need for county health and human services has increased significantly.

Educational: School enrollment has grown steadily since 1993 averaging 200 students a year. Hispanic students comprise nearly 15% of the student population this year. School nurses and new school health clinics will help to address health needs of students.

Environmental: The air quality in Canton, NC (in nearby Haywood County), was recently cited as one of the worst in the country. Henderson County ranked in the 39th percentile—significantly better. Still, chronic respiratory diseases are a leading cause of death in our county. The asthma hospitalization rate in 2006 was slightly above the state rate. The health department continues to work with local restaurants to provide smoke-free dining options. A guide to smoke-free restaurants is available on the health department website (see back page for address).

What's New in Henderson County? Childhood Obesity Prevention Demonstration Project

Only five

awarded

Obesity

grants.

Childhood

Prevention

Demonstration

North Carolina

counties were



In September 2008 the Department of Public Health and the Henderson

County Partnership For Health were awarded an eight-month \$380,000 Childhood Obesity Prevention Demonstration Project grant. In conjunction with nineteen community partners the project will address obesity with the following nine interventions:

Schools: Implement the ISPOD (In-School Prevention of Obesity and Disease) Program, which includes training K-8 physical education teachers in a PE curriculum.

Preschools: Implement the NAP-SACC (Nutrition and Physical Activity Self-Assessment) intervention in 11 childcare centers in Henderson County.

Healthcare: Recruit and train clinicians to use the Pediatric Obesity Clinical Tools to identify and refer children who are overweight, obese, diabetic, or at risk for these conditions.

Health Communication and Social Marketing: An education and marketing campaign will be implemented to increase awareness of

the Childhood Obesity Prevention Demonstration Project, engage citizens in participating in activities and events, and encourage adoption of policies and environmental



changes among community groups, businesses, and agencies that support healthy nutrition choices and physical activity. Farmers' Markets/Farm Stands: Plans

include working with the Hender-sonville Community Co-op to begin a tailgate market. Other strategies will focus on marketing farmers' markets and farm stands to promote buying and



mote buying and eating local produce.

Bike/Pedestrian Plan: Upgrade the Mud Creek Nature Trail. This is part of

the City of Hendersonville Pedestrian Plan to connect the City's Patton Park and Henderson County's Jackson Park.

Hospitals: Enhance existing employee wellness programs at Park Ridge and Pardee Hospitals.

Partnership Development:

The Partnership for Health will form a Physical Activity and Nutrition Committee to address these issues and engage additional community partners and volunteers to further the work

for a healthier Henderson County.

ENERGIZE! Program: This 12-week program for youth 10-18 identified as being at risk for developing diabetes is being implemented at Park Ridge Hospital. It includes assessment, medical follow-up, parent sessions, nutrition concepts, and fitness classes at a local gym. The health department's KidFit nutrition program will also work with younger children to identify those who are at risk and provide nutrition education and counseling.

What's New in Henderson County? Other Initiatives

Restaurant Grading System: Implementation by the state of the new restaurant grading system may impact the level of sanitation in restaurants in the county. In the fall of 2007, the frequency of inspections was changed based on the risk of how food is prepared at the establishment. In addition, in July 2008, grading sheets were changed to include more categories; however, the total point value did not increase. Staff will be assessing these changes

and look at the impact this has on food sanitation. Food, lodging, and institution sanitation helps to ensure the public that establishments operating in Henderson County meet the minimum sanitation standards as required by the NC Department of Environmental and Natural Re-



sources. Henderson County Environmental Health Specialists routinely inspect all the following establishments:

- hotels, motels, inns
- restaurants, food & drink stands
- summer camps
- meat markets
- schools and educational institutions, day care centers, hospitals, and jails
- residential care, nursing and rest homes
- hot dog carts, mobile food units

Inspections include the establishment's level of cleanliness, food handling practices and proper food protection during preparation, storage, and transportation. After inspection, the establishment receives a certified card with a Grade of A, B, or C. Each establishment is required to display their Grade Card in a prominent location for the public to see.

"Centering" Prenatal Care—The Health Department received a grant to establish group prenatal care at the department's clinic. This clinic will offer a more costeffective way to deliver high-quality care that includes an educational and social support component, designed to benefit any prenatal patient. It may be particularly useful for socially isolated populations. whether due to low income or language barriers or both. After physical exams are conducted in the usual manner, women join 6-10 other women or couples with similar due dates in meeting together regularly during their pregnancy. The centering model is an evidence-based approach with proven benefits that include reduced lowbirth weight and premature birth. Clients participate in group education sessions and develop a support network. This program will begin in early 2009.

School Based Health Centers—Blue

Ridge Community **Health Services** opened a health center at North Henderson High School in December. School based health centers increase access to important health care for all students in a school. This initiative was sparked by the top priority set for more school nurses from the Speak Out for Kids forum held in

Having a school based health center is like a school having it's very own doctor's office on campus.

October 2007. Blue Ridge Community Health Services plans to open a school based health center in two additional schools over the next two years.

New and Emerging Issues

Economic Issues — Over the past year, economic issues affecting health and access to health care have significantly increased the demand for county services at the health department and the Department of Social Services:

Maternity Care Coordinator Services	↑22%
Child Service Coordinator Services	↑25%
# of WIC clients	↑22%
Food Stamp Applications	↑47%
Food Stamp Clients	18%
Medicaid Applications	↑20%

This is putting a greater burden on health and human services programs in the county at a time when there is decreased funding for staff and programs. Many clients are having difficulty getting basic needs met. Undocumented residents cannot receive DSS services and are sometimes turned away from local non-profits as well.

Henderson County is designated as one of the most economically distressed counties in the state according to the NC Rural Economic Development Center. Twelve percent of all people living in Henderson County (or 11,983 people) were below the federal poverty level in 2005. The average wage is 16% less than the NC state average. Further, in 2005, Sheps Center for Health Services Research found that 17% of the total population (or approximately 16,836 residents) of Henderson County is without health insurance.

It is estimated that approximately 17,000 residents of Henderson County are both uninsured and earn less than 185% of the federal poverty level.

Ten elementary schools and one high school have begun backpack programs in which children take backpacks filled with food home on weekends. For many students, school lunch provides the only nutritious meal of the day. When school is not in session, weekend backpacks provide much needed nutritional support for the children.

Drought — North Carolina is in a drought and Henderson County is considered to be in an extreme drought. Last year, Western North Carolina suffered through a long, hot summer with limited mois-

ture. The region went weeks without significant moisture and is nearly a foot below normal rainfall. The City of Hendersonville imposed mandatory water restrictions during the sum-

mer but lifted them in September. The county received eight reports of wells or springs going dry in the last year; however, the number of reports of failure did not increase significantly during the drought period. An ongoing drought could impact ground water and increase well failures in the future.

Access to Care—Finding health care for undocumented children is increasingly difficult. These children don't qualify for Medicaid or Health Choice. While they can receive care at the health department and the community health center, many seek care at the hospital emergency departments. Dental care for these children is another problem with few solutions. Adults can receive assistance through the Community Health Network. The Network will help with finding a medical home and referral to other community resources. A community pharmacy for the uninsured is now housed at The Free Clinic in their new location on Case Street.

Cultural Competence — During the process of reviewing the Community Health Assessment the question was posed, "Is Henderson County culturally sensitive to its diverse population and serving those populations in the best manner possible?" An action team through Partnership For Health was formed to bring people together to discuss cultural diversity and how medical care is perceived.

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Henderson County Department of Public Health and Henderson County Partnership For Health......

Working Together for a Healthier Henderson County!



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