In February 2010, the County Health Rankings were released, and Henderson County ranked 33rd in the state (out of 100) in health outcomes, which measure length of life and quality of life. The county ranked 5th in the state in health factors, including health behaviors, clinical care, social and economic factors, and the physical environment. This first of its kind collection of 50 reports – one per state – helps community leaders see that where we live, learn, work, and play influences how healthy we are and how long we live.

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. Although cancer is the state’s top killer, heart disease is still 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.

Twenty-two percent of our population is 65 years of age and older. Henderson County’s Alzheimer’s death rate is higher than the state rate, even when adjusted for the fact that our county has more older residents. This is something that will be explored next year during the Community Health Assessment process.

Henderson County’s infant mortality rate was constant in 2009 at 4.2, which is significantly lower than the state rate of 7.9 (per 1,000 live births).

The county also has a very low non-white population. According to the 2009 US Census estimate, the population is 103,669. Eighty-eight percent of the population are white and 3% are African-American. In 2009, Hispanics made up 9% of the county population. Many undocumented residents have difficulty obtaining health and dental care.

The teenage pregnancy rate in NC is the lowest in 30 years. In Henderson County, the teenage pregnancy rate for all teens is lower than the state rate; however, the Hispanic teen pregnancy rate is significantly higher (NC 118.4 / Henderson County 140.5 per 1,000 population). Although higher, the county Hispanic teen pregnancy rate has decreased for the past two years from a high of 232.6 (per 1,000 population). Among (demographically similar) peer counties, Henderson County ranks 63rd in the state (with 1 being the worst in the state). Peer counties rank between 47 and 82.

In spring 2010, the United Way and Western Carolina Community Action released results of the Henderson County Community Survey. Residents ranked the following issues as major problems: access to mental health services, illegal drug use/substance abuse, adult obesity, childhood obesity, poor eating habits/lack of good nutrition, and tobacco use among people under 18.

In 2011, the Department of Public Health and the Partnership For Health will complete the Community Health Assessment (CHA) and review these results and collect additional data to determine the new health priorities. The CHA is completed every four years.
Progress on Major Health Concerns

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

School Nurses

The current 2010-11 school nurse to student ratio of 1:1556 has improved greatly since 2003 when it was 1:3000. This year a team of community professionals from Henderson County participated in the Management Academy of Public Health. The team included representatives from the Department of Public Health, Blue Ridge Community Health Services, United Agenda for Children, Park Ridge Health, and Pardee Hospital. The team’s project was a product called eSN, a computerized program for school nurses to document and access student health data. The goal is for eSN to generate revenue to help support the school nurse program.

The Department of Public Health is also partnering with Blue Ridge Community Health Services to pilot a school nurse project at the school-based clinic at Apple Valley Middle School. A school-based clinic nurse and a school nurse have different functions. The pilot program will test the viability of combining these roles. Expansion of the program to other schools with school-based clinics may occur if this project is successful.

Access to Mental Health Care

Mental health services in North Carolina continue to face many challenges, especially for the uninsured. Providers in Henderson County have been working hard to address these challenges. Many local agencies and providers of outpatient as well as inpatient mental health services in Henderson County are collaborating to maximize the services for the community. A special county fund, Maintenance of Effort, assists a growing list of agencies in the community to enable them to provide services for the uninsured.

Access to Dental Care

The 2009 dental decay rate in kindergarteners of 14% has decreased significantly since 1996 when the rate was 25%. One factor is the Smart Start Preventive Dental Program at the Department of Public Health, which screened over 700 children and provided dental fluoride varnish for 440 children last year.

Dental access has improved through Blue Ridge Community Health Services’ (BRCHS) Stokes Dental Clinic, a primary provider of dental services for low-income children and adults in Henderson County. In 2009, BRCHS provided 13,737 dental visits for low-income adults and children, most of whom were uninsured. Ninety-six percent of those services were provided to patients living below 200% of poverty.

The Free Clinics offers an extraction clinic for adults. This clinic is held at Blue Ridge Community Health Services and offers services to many who have no other option for dental care.
Adult and Childhood Obesity

To address obesity, the Henderson County Department of Public Health received an Eat Smart, Move More NC Community Grant for 2010-12 to fund local physical activity projects targeting youth ages 9 to 14. The Dana and Upward Elementary Schools Project will give students more choices to get active through expanded physical education classes and running groups. Fitness and yoga classes will be offered to staff at each school. Working with local Boy Scout troops, the Dana Elementary School walking trail will be refurbished to help students move more and provide a multi-use trail for local residents in the Dana community. In addition, new policies at each school will increase physical education time and look at ways to reward students using non-food incentives.

Tobacco Use

Henderson County Public Schools is implementing a N.C. Health and Wellness Trust Fund grant. As a part of the grant, local high schools sponsor Students Warning Against Tobacco (SWAT) Clubs. Club members serve as community advocates for tobacco prevention and cessation. The goal of SWAT is to create a “tobacco-free generation” by encouraging youth to stay tobacco-free. This year, SWAT members presented a tobacco prevention program, Kids Against Tobacco (K.A.T), in 13 elementary and middle schools, reaching over 1,000 students. They also just completed a community service project, "Get Your Butts Off the Ground." Approximately 50 high school students picked up 21,000 butts from downtown Hendersonville in October.

Smoking during pregnancy continues to be a focus area for medical providers. Department of Public Health clinicians are using the 5A’s Model and the NC Quitline to help support those clients who are ready to quit smoking.

Services for the Aging Population

North Carolina ranks tenth among states in the number of persons age 65 and older. The Council on Aging (COA) for Henderson County serves as the lead agency to assist in planning for the aging population of the county. The COA provides meals through the Meals on Wheels Program and the Congregate Meal site. The Partnership for Independent Living Program assists elderly residents in maintaining or improving their ability to feel independent, self-sufficient and confident by ensuring that needed in-home services are provided and monitored. Much growth in this population is expected in the next 20 years.

Cultural Competency

During the process of reviewing the Community Health Assessment, conversations turned to issues of cultural competency and how culturally sensitive is the provision of services in Henderson County. The Action Team plans to implement a cultural competency survey of health care and social service providers, and then offer competency training workshops based upon the needs determined by the data. Lack of funding and time has delayed this process.
New Initiatives / Emerging Issues

State Budget Cuts — The impacts of state budget cuts, loss of tax revenue, reductions in Medicaid reimbursement, increases in the number of uninsured, and loss of revenue from fees continue. The state has initiated a process to consolidate case management services that will be implemented in spring 2011. Not enough is known at this time to determine how the changes will affect Department of Public Health services.

Health Care Reform — The Patient Protection and Affordable Care Act (PPACA), which was passed by Congress in 2010, will bring more access to medical care for people who are underserved. As a result of funding made available through PPACA, Blue Ridge Community Health Services (BRCHS), a federally qualified health center, is expanding their services and building a new facility. The new building will have a discount pharmacy, a lab, radiology, family practice, pediatrician offices, and expanded mental health services. In addition to being able to see 5,000 more patients, the new center will provide 23 new jobs. BRCHS is the largest primary care provider in the county, providing medical services for 11% of Henderson County residents (50,000 encounters).

Teen Pregnancy — A group of community and agency representatives formed the Adolescent Pregnancy Prevention League (APPL) in 2010. The APPL’s mission is to concentrate, coordinate, and develop resources in the county to prevent adolescent pregnancy through education and skill building.

Environmental Health — Drinking water that contains volatile organic compounds (VOCs), such as gasoline, dry cleaning solvents, and degreasing agents, can increase the risk of cancer, liver and kidney disease, and other health problems. A new law requiring the testing of any newly drilled well for VOCs has been postponed but will take effect in October 2012. This data will help in determining where municipal water may be needed.

Economy — The unemployment rate in the county in October 2010 was 7.2%. This is improved from February when it was 10.3. Many families are struggling, which has caused a significant increase in the demand for services at the Department of Social Services. High unemployment has resulted in an increase in Medicaid enrollment. More parents are staying on Medicaid with their children than in the past instead of just receiving Medicaid for their children alone.

Smoke-Free Restaurants and Bars Law — This new law went into effect on January 2, 2010, to ensure smoke-free public places and workplaces. This law prohibits smoking in enclosed areas of almost all bars and restaurants in the state, with a few exceptions. The new law protects people from the harm caused by second-hand smoke in restaurants, bars, and many lodging facilities. To date, only two complaints have been investigated in Henderson County. Local businesses have been very supportive, and patrons have complied with the new law. The Department of Public Health began an education campaign in December 2009 to inform the public about the law and the toll-free CARELINE number (1-800-662-7030) to file a complaint against a business not complying with the law.

Communicable Disease Outbreaks — After reporting reduced communicable disease rates for the previous year, 2010 has been a record year for both active tuberculosis cases and pertussis (whooping cough) cases in Henderson County. Both diseases require immediate treatment and contact investigations with new cases identified by those investigations. There have been 12 active TB cases identified in 2010 and 12 pertussis cases. Efforts are being made to provide the appropriate vaccine to vulnerable populations for pertussis. There is no vaccine for tuberculosis.