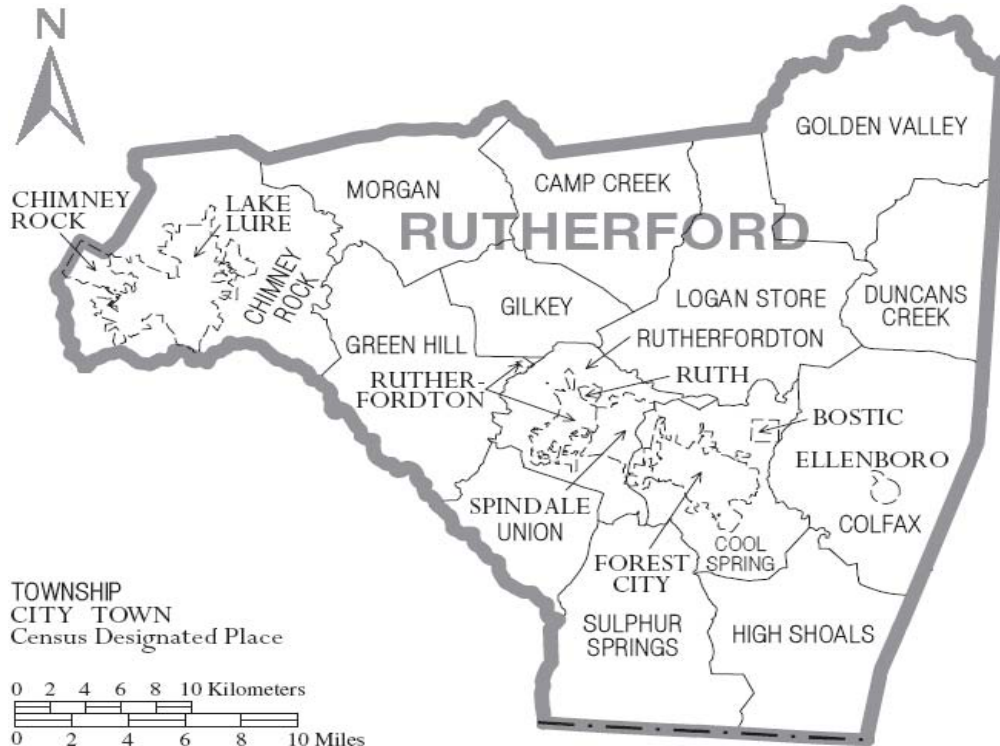


STATE  
OF THE  
COUNTY  
HEALTH  
REPORT

2009  
SOTCH

Rutherford Community Health  
Council

Rutherford-Polk-McDowell  
District Health Department



## Overview

Every four years the State of North Carolina requires every local health department and North Carolina Healthy Carolinians Partnerships to conduct a community health assessment. A community health assessment is a process that allows the members of the community and stakeholders to gain a better understanding of the health needs and concerns of the community.

During the three interim years, the local health department is responsible for issuing the State of the County Health (SOTCH) report. The 2009 Rutherford County SOTCH report is an annual review of the priority health issues that were identified in the 2008 Rutherford County Community Health Assessment and chosen through a public process at the Rutherford County Health Summit in October 2008. The three issues that the community felt were the most pressing and needed attention were: obesity, substance abuse and access to medical care.

This report serves to inform the community and stakeholders about the health status of Rutherford County residents and provide an update of the past year's progress in addressing the health issues identified in the 2008 Rutherford County Community Health Assessment which can be viewed on the web at: [http://www.rpmhd.org/new/cha/2008/2008\\_Ruth\\_CHA.pdf](http://www.rpmhd.org/new/cha/2008/2008_Ruth_CHA.pdf)

### **Leading Causes of Death**

In Rutherford County, the leading causes of death include heart disease, cancer (69% of the cancer deaths were colon and lung cancer) cerebrovascular disease, chronic lower respiratory disease, atherosclerosis and unintentional injuries. Rutherford County's age-adjusted mortality rates between 2002-2006 show that for most causes of death, Rutherford County has higher rates than North Carolina. The county however, had lower rates of death for diabetes compared to North Carolina.

Many of these deaths are preventable and involve risky behaviors or lifestyles including tobacco use, alcohol and illicit drug use, physical inactivity, and poor nutrition. Chronic disease and injury are responsible for approximately two-thirds of all deaths in North Carolina. Cancer, heart disease, stroke, chronic lung disease and unintentional injuries made up the top 5 causes of death in the state. Despite the preventable nature, chronic diseases account for more than 75% of the nation's \$2 trillion medical costs.

<b>Total Population Age-Adjusted 2002-2006 Death Rates per 100,000 Population</b>			
Cause of Death	No. Deaths	County Rate	State Rate
Heart Disease	965	237.2	217.9
Cancer	805	203.4	196.4
Cerebrovascular Disease	292	71.1	61.1
Chronic Lower Respiratory Disease	232	57.6	47.1
Atherosclerosis	148	Note: There were no age-adjusted mortality rates for atherosclerosis.	

Unintentional Injuries	139	39.8	27.0
Alzheimer's Disease	137	32.2	27.7
Pneumonia/ Influenza	114	27.5	22.5
Diabetes	80	20.4	27.1

## **Priority Health Issues**

At the Rutherford County Health Summit in October 2008, the community voted and chose obesity, substance abuse and access to medical care as the top three priority health concerns of the community.

### **1. OBESITY**

- **Adult Obesity**

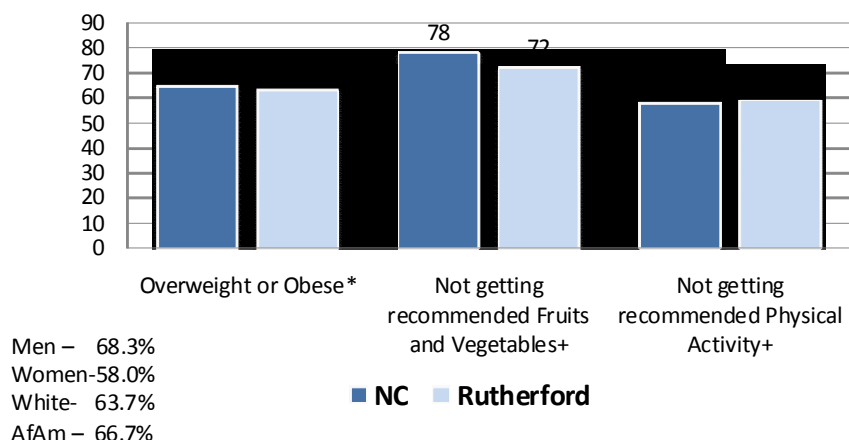
Obesity is a growing public health concern for the nation, North Carolina, and locally. Obesity is caused due to the lack of physical activity, lack of recreational facilities, pedestrian planning, and poor nutritional diet often due to lack of access to nutritious foods in poorer neighborhoods, rural areas and other environments. Obesity increases the likelihood of someone developing certain chronic diseases such as type 2 diabetes, some types of cancer, heart disease and high blood pressure.

<b>Percentage of North Carolina Adults Who Are Overweight or Obese</b> 2007 Behavior Risk Factor Surveillance System			
	<b>Overweight</b>	<b>Obese</b>	<b>Overweight or Obese</b>
North Carolina	35.9%	28.7%	64.6%
Western NC	37.1%	26.0%	63.1%

The 2010 Healthy Carolinian health goal is to increase the number of adults that engage in physical activity for at least 30 minutes on 5 or more days to 20.1% and increase the number of adults that eat five or more servings of fruits and vegetables each day to 25.1%. According to the Behavioral Risk Factor Surveillance System (BRFSS), in 2007 47.2% Western Carolinians responded that they meet the recommendation for physical activity compared to 44.0% of North Carolinians. 25.7% of Western Carolinians said they eat five or more servings of fruits and vegetables each day compared to 21.6% of North Carolinians.

## ADULTS

Source: NC Behavioral Risk Factor Surveillance System Survey, NC State Center for Health Statistics, NC Department of Health and Human Services (2005+,2007\*)



These unhealthy lifestyles costs Rutherford County over \$92 million annually in direct medical expenses and indirect expenses such as lost productivity, presenteeism and absenteeism.

- **Childhood Obesity**

Obesity is becoming a serious health problem in North Carolina and the United States. In 2007 North Carolina was ranked 17<sup>th</sup> for its adult obesity rate and 5<sup>th</sup> for children between the ages of 10-17. According to the 2007 Child Health Assessment and Monitoring Program (CHAMP) results, 15.3% of preschool children, 24.9% of children 5-11 years old, and 29.9% of children 12-18 years old were considered obese in North Carolina. The 2010 Healthy Carolinian health goal is reduce these rates down to 10%.

According to the 2007 Child Health Assessment and Monitoring Program (CHAMP) results, 12.7% of children in North Carolina spend 20 minutes to 1-hour physically active play, 34.0% eat 3 or more servings of fruit and 27.7% eat 3 or more servings of vegetables on a given day.

### **STRATEGIES TO REVERSE THE RISING TIDE OF OBESITY**

#### **IN RUTHERFORD COUNTY**

In order to reverse the rising tide of overweight and obesity, changes need to be made in the surrounding organizational, community, social and physical environments. Without these changes, successful health behavior change is difficult to achieve and sustain. By collectively focusing on policy and environmental changes, we can reduce or eliminate barriers to healthy eating and physical activity.

- **Services Addressing Obesity**

- Rutherford Health Department counsels patients on Body Mass Index
- The Rutherford Health Department's Women, Infants and Children Program added a registered dietitian to serve Polk children who are obese on a limited basis to provide services for obese children.

- **Increase Access To Fresh Local Fruits and Vegetables**

Farmers Fresh Market is a virtual "Farmers Market" for local farmers. We are creating a sustainable food system linking growers, chefs and local distributors into a community of partners. Farmers Fresh Market's registered Buyer partners can access our website and place all of their orders online. Our Grower partners process the orders and we deliver direct to the Buyers. At present, the Farmers Fresh Market is serving Producers and Buyers in the Rutherford County NC area and Charlotte NC areas. The Farmers Fresh Market's goal is to provide the best, freshest, most flavorful, naturally grown produce to chefs and produce buyers in our local area.

- **Access To Nutritious Foods**

- The Rutherford County Chiropractic Center and the Community Health Council are continuing to collaborate on garden planting at Thomas Jefferson Classical Academy. The program is looking to expand to other schools in 2010.
- The Community Health Council is identifying ways to reach the middle school students regarding healthy food choices, and healthy snacks in schools. The Council is currently working to formulate surveys and meeting times.
- Health Department's WIC peer counselors provide education and support to breastfeeding mothers

- **Increase the Amount of Time Children Are Physically Active**

Karen Gray, Physical Education teacher for Rutherford Elementary School received funding to implement Be Active North Carolina's Just Push Play initiative. Just Push Play is a statewide school intervention program that will get kids moving more than ever in schools. The program's objective is to change school culture so that physical activity is the norm, not the exception. Because healthy students are successful students, physical activity at school is an academic imperative.

Through the program, Be Active North Carolina's experts help school communities develop a school wellness committee and create a comprehensive plan to integrate physical activity into the daily routines of students, teachers, and administrators.

It is necessary to conduct a needs assessment of both the school community and employee wellness before beginning the implementation of programs.

- **Design Communities That Encourage Physical Activity**

Isothermal Planning and Development is working through community partners such as the Rutherford Outdoor Coalition to develop a regional greenway master plan.

- **Increase Worksite Wellness Programs**

Be Active Worksite Wellness Program Pilot

A coalition of representatives from Rutherford and Polk Counties are creating a worksite wellness resource for adults in the local area to get moving, while at the same time, showcasing the beauty of nature and the natural arena for physical activity at Chimney Rock State Park.

Four organizations including employees of Rutherford Hospital, Inc. and Rutherford County School System will access the Park for physical activity as part of a pilot corporate wellness program. Beginning in March 2010, the employees will have access to Chimney Rock State Park for physical activity opportunities, including stair-climbing, trail-walking, and hiking. These opportunities will be part of a wellness competition between the Rutherford school system and hospital.

Participants will complete a pre-participation survey tracking current activity levels, attitudes and behaviors, as well as a follow-up survey in December 2010. This comparative data will support and guide future worksite wellness initiatives by Chimney Rock Park in the region.

- **Eat Smart Move More Weigh Less**

Rutherford County Extension Service provided a free 12 week weight loss program to all Rutherford County Employees. Program was taught by Tracy Davis, Family and Consumer Science Agent.

## **2. ACCESS TO MEDICAL CARE**

The latest data for Rutherford County shows that in 2005 12% of children between the ages of 0-17 were uninsured and 21.2% of adults between of ages of 18-64 were uninsured. In 2005, 18.6% of residents in Rutherford County between the ages of 0-64 were uninsured, compared to 17.2% of residents in North Carolina between the ages of 0-64. Again the number is sure to increase due to the businesses closing, layoffs and the recession.

- **Community Clinic of Rutherford County**

The Community Clinic of Rutherford County is continuing to give the Community Health Council updates on health promotion and disease prevention. The Community Clinic of Rutherford County is maintaining a strong relationship with the Hispanic and Minority communities. The Clinic is currently looking for a larger building to house their Clinic. Their services have grown so large; they have out grown their current space. Currently, the Clinic employees 2 part-time Nurse Practitioners and 1 part-time Physician's Assistant. The Clinic has 6 volunteer Physicians that rotate regularly, 1 full-time RN, and 2 part-time RN's.

- **Free School Athletic Physicals**

The Community Health Council and Rutherford Hospital continue to collaborate to provide over 1200 sports physicals to middle and high school athletes. In 2009, 1198 students were served. Each student was surveyed on various measurable data. Of the students surveyed 82.7% had a primary care physician, and 84.9% had insurance coverage.

- **Hospice:** A new Hospice House opened June 2009.

- **Nurse Family Partnership (NFP)**

An evidence-based nurse home visitation program that improves the health, well-being and self-sufficiency of first-time, low-income parents and their children is serving 38 first time mothers in Rutherford County.

Three randomized controlled trials of the NFP model in other states have documented substantial, consistent and dramatic benefits to both mother and child, including improved prenatal health, fewer childhood injuries, fewer subsequent pregnancies, increased intervals between births, increased maternal employment and improved school readiness

The NFP nurse home visitor works with their clients to achieve three important goals:

- Improve pregnancy outcomes by helping women engage in preventive health practices, including obtaining thorough prenatal care from their healthcare providers, improving their diet, and reducing their use of cigarettes, alcohol and illegal substances;
- Improve child health and development by helping parents provide responsible and competent care; and
- Improve the economic self-sufficiency of the family by helping parents develop a vision for their own future, plan future pregnancies, continue their education and find work.

### **3. SUBSTANCE ABUSE**

- The Community Engagement Team was organized as a result of the Community Health Assessment and Summit to develop strategies to reduce substance abuse in Rutherford County. As a partnership with community members, United Way, and Realize Rutherford, the Community Engagement Team has become a common name within agencies in the County. Interventions are being set into place, and the Team is currently working on securing grants to fund their upcoming projects.

Rutherford law enforcement, Rutherford Hospital, Drug Court, the Rutherford County Behavioral Health Coalition and other community partners, presented two education and outreach presentations designed especially for the medical professionals and medical staff,

including Physicians, Nurse Practitioners, Physician Assistants, and Nurses as well as Pharmacists.

Integrated Care Collaboration in North Carolina provided two highly knowledgeable and experienced guest speakers who offered insightful information about substance abuse from the medical and law enforcement perspective.

- Drug Court is still an ongoing success. For 2009, there were 34 new admitted referrals, 8 discharges, and 9 graduates. A total of 3,790 drug screenings were administered to 62 different participants, and only 80 were positive. Also, 19 received in-patient treatment, 8 obtained their GED's, and 6 are currently enrolled at various community colleges.

The participants of drug court have completed over 4,000 total hours of community service. At a minimum wage rate of \$7.25, drug court participants have contributed almost \$30,000 of volunteer work.

- The Rutherford Correctional Center in Spindale, NC has a substance abuse treatment program called "A New Direction." Inmates are screened when they enter the facility and are provided treatment to help overcome their substance abuse problem.

## **NEW INITIATIVES**

With funding from NC Healthy Carolinians, Camp G.O.L.D. (Gonna Overcome Life with Diabetes) Rush opened for the first time in May to help kids deal day to day with diabetes. The Rutherford Hospital Foundation is raising money to fund next year's camp.

## **EMERGING ISSUES**

### **H1N1**

In April 2009, a new strain of Influenza A virus subtype was first detected in the United States and in June 2009 was declared a pandemic by the World Health Organization (WHO). A vaccine was developed for the new strain of influenza, as well as the usual seasonal flu vaccine. As of December 8, 2009 the Rutherford County Health Department administered 2130 H1N1 vaccines in addition to the seasonal flu vaccine.

### **Health Care Reform**

The debate over healthcare reform in the United States centers around questions of a right to health care, access, fairness, sustainability, and quality purchased by the high sums spent. The mixed public-private health care system in the United States is the most expensive in the world, with health care costing more per person than in any other nation.

Source: [http://en.wikipedia.org/wiki/Healthcare\\_reform](http://en.wikipedia.org/wiki/Healthcare_reform)

One question posed in North Carolina is what will happen if reform legislation passes that grants health insurance coverage to the approximately 1.8 million North Carolinians who are currently uninsured? North Carolina Institute of Medicine and the Cecil G. Sheps Center for Health Services Research.

*North Carolina's Increase in the Uninsured: 2007-2009.* Data Snapshot 2009-1. [http://www.nciom.org/data/DS\\_2009-01\\_UninUnemp.pdf](http://www.nciom.org/data/DS_2009-01_UninUnemp.pdf). Published March 2009. Accessed June 24, 2009.



## The Recession

In North Carolina, more than any other state, the recession has triggered a burgeoning medical crisis. A steep rise in unemployment has fueled a commensurate increase in the number of people who do not have health insurance, including many middle-income families. In the past two years, North Carolina's number of uninsured has climbed 22.5%, the biggest jump in the nation, according to an analysis by the North Carolina Institute of Medicine, a quasi-state agency. Nationwide, about 22% of adults do not have health insurance. Source: *Washington Post*, April 20, 2009, by Ceci Connolly, Staff Writer - <http://www.washingtonpost.com/wp-dyn/content/article/2009/04/19/AR2009041902239.html>

The worst recession since the 1930s has caused the steepest decline in state tax receipts on record. As a result, even after making very deep cuts, states continue to face large budget gaps. New shortfalls have opened up in the budgets of at least 35 states for the current fiscal year (FY 2010, which began July 1 in most states). In addition, initial indications are that states will face shortfalls as big as or bigger than they faced this year in the upcoming 2011 fiscal year. States will continue to struggle to find the revenue needed to support critical public services for a number of years. Source: Center on Budget and Policy Priorities by [Elizabeth McNichol](#) and [Nicholas Johnson](#) Updated November 19, 2009

