What is the State Of The County Health Report (SOTCH)?

- Update of Macon County’s health statistics.
- Review of the selected health priorities.
- Progress made in the last year.
- Community input regarding selected health priorities and progress made.
Health Priorities From the 2007 Community Health Assessment … Why Were They Selected?
Access To Primary Care

- Macon County’s seasonal residents are not counted in population numbers.
- The number of primary care physicians who accept Medicaid patients and/or new patients is low.
- The percent of Macon County adults who wanted to see an MD and couldn’t in 2006 was 18% vs. 16% for NC.
- Macon County focus groups identified access to primary care as a prevalent concern.
- Macon County’s uninsured rate for adults, ages 18-64, is 22.8%.*

* Latest available data from the NC SCHS was 2005.
Macon County Trend Data

% Estimate of Uninsured, Ages 0-17

% Estimate of Uninsured, Ages 18-64
Strengthening Families to Reduce Youth Risky Behavior

- High childhood obesity rates documented at school health fairs
- Increasing Teen Pregnancy Rates
- Tobacco Usage Among Youth and Pregnant Women
- Self-reported risky behaviors on the Youth Risk Behavior Survey
- Focus Groups and Interviews tied Youth Risky Behavior to Family Life

2010
Macon County Trend Data

% of Live Births Where the Mother Smoked During Pregnancy

Teen Pregnancies per 1,000 Girls Ages 15-19
Planning for Future Senior Needs

- Projected population growth among seniors is one of the highest in the state.
- Current percentage of elderly population is one of the highest in the state.
- Focus Groups and Telephone Survey revealed that current senior needs are being met; however, there was a need to plan for future growth.
Environmental Quality

- Septic system failure rates expected to increase due to the age and number of systems
- Septic system application rates are in the top 10% statewide due to vacation / second home market
Mental Health / Substance Abuse

- Access to a psychologist rate in Macon County is 1.3 vs. 3.0 for NC
- Suicide rate is rising; increasingly split between male/female
- Results of telephone survey indicted access to care barriers
Macon County Trend Data

Macon County Deaths due to Intentional Self Harm (Suicide)

2003 2004 2005 2006 2007

Female Male
Review of Major Health Indicators for Macon County
### Top Ten Leading Causes of Death in Macon County
#### 2005-2009 Age-Adjusted Rate Comparison

<table>
<thead>
<tr>
<th>Leading Causes</th>
<th>Macon Rate*</th>
<th>Macon Trend**</th>
<th>NC Rate*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Heart Disease</td>
<td>186.3</td>
<td>-</td>
<td>194.7</td>
</tr>
<tr>
<td>Total Cancer</td>
<td>162.6</td>
<td>-</td>
<td>188.8</td>
</tr>
<tr>
<td>Trachea, Bronchus, and Lung Cancer</td>
<td>49.3</td>
<td>-</td>
<td>58.0</td>
</tr>
<tr>
<td>All Other Unintentional Injury Deaths</td>
<td>46.8</td>
<td>-</td>
<td>28.7</td>
</tr>
<tr>
<td>Cerebrovascular Disease</td>
<td>41.2</td>
<td>-</td>
<td>51.3</td>
</tr>
<tr>
<td>Chronic Lower Respiratory Diseases</td>
<td>36.9</td>
<td>+</td>
<td>48.0</td>
</tr>
<tr>
<td>Alzheimer’s Disease</td>
<td>30.0</td>
<td>+</td>
<td>28.8</td>
</tr>
<tr>
<td>Prostate Cancer</td>
<td>24.8</td>
<td>-</td>
<td>26.0</td>
</tr>
<tr>
<td>Breast Cancer</td>
<td>24.6</td>
<td>N/A</td>
<td>24.2</td>
</tr>
<tr>
<td>Suicide</td>
<td>18.5</td>
<td>N/A</td>
<td>11.9</td>
</tr>
</tbody>
</table>

* Rates per 100,000 population
** "+/-" = number increased/decreased since 2004-2008

#### KEY

| Rates or percentages that include a numerator value less than 20 and are statistically unstable | Macon County’s rate is significantly worse |
| No significant statistical difference | Macon County’s rate is significantly better |

2010
### Top Ten Hospital Discharge Rates for Diseases, Injuries, and Disabilities (Morbidity) in Macon County 2009 Comparison

<table>
<thead>
<tr>
<th>Leading Causes</th>
<th>Macon Rate*</th>
<th>Macon Trend*</th>
<th>NC Rate*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiovascular and Circulatory Diseases</td>
<td>17.9</td>
<td>-</td>
<td>17.1</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>12.2</td>
<td>-</td>
<td>11.4</td>
</tr>
<tr>
<td>Respiratory Diseases</td>
<td>10.6</td>
<td>-</td>
<td>10.5</td>
</tr>
<tr>
<td>Digestive System Diseases</td>
<td>10.4</td>
<td>-</td>
<td>9.7</td>
</tr>
<tr>
<td>Injuries and Poisonings</td>
<td>8.4</td>
<td>No Change</td>
<td>8.3</td>
</tr>
<tr>
<td>Musculoskeletal System Diseases</td>
<td>8.1</td>
<td>-</td>
<td>6.1</td>
</tr>
<tr>
<td>Other Diagnoses (Including Mental Disorders)</td>
<td>5.3</td>
<td>+</td>
<td>8.9</td>
</tr>
<tr>
<td>Arthropathies and Related Disorders</td>
<td>4.6</td>
<td>+</td>
<td>3.2</td>
</tr>
<tr>
<td>Pneumonia and Influenza</td>
<td>4.5</td>
<td>-</td>
<td>3.5</td>
</tr>
<tr>
<td>Genitourinary Diseases</td>
<td>4.4</td>
<td>N/A</td>
<td>4.8</td>
</tr>
</tbody>
</table>

* Rates per 1,000 population
** “+/-” = number increased/decreased since 2007

### KEY

<p>| Rates or percentages that include a numerator value less than 20 and are statistically unstable | Macon County’s rate is significantly worse |
| No significant statistical difference                                                        | Macon County’s rate is significantly better |</p>
<table>
<thead>
<tr>
<th>Incidence</th>
<th>Macon</th>
<th>Macon Trend*</th>
<th>NC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Population, 2009</td>
<td>34,494</td>
<td>+</td>
<td>9,382,609</td>
</tr>
<tr>
<td>Population, Under 5 yrs. Old, 2009</td>
<td>5.4%</td>
<td>+</td>
<td>6.7%</td>
</tr>
<tr>
<td>Population, 5 – 19, 2009</td>
<td>15.7%</td>
<td>-</td>
<td>19.8%</td>
</tr>
<tr>
<td>Population, 20 – 64, 2009</td>
<td>53.7%</td>
<td>-</td>
<td>60.6%</td>
</tr>
<tr>
<td>Population, 65+, 2009</td>
<td>25.0%</td>
<td>+</td>
<td>12.6%</td>
</tr>
<tr>
<td>% Estimate of Uninsured, Ages 0-64, 2006</td>
<td>20.0%</td>
<td></td>
<td>18.6%</td>
</tr>
<tr>
<td>% Estimate of Uninsured, Ages 0-17, 2006</td>
<td>11.6%</td>
<td></td>
<td>12.4%</td>
</tr>
<tr>
<td>% Estimate of Uninsured, Ages 18-64, 2006</td>
<td>22.8%</td>
<td></td>
<td>21.1%</td>
</tr>
<tr>
<td>Per Capita Income, 2007</td>
<td>$25,008</td>
<td></td>
<td>$33,735</td>
</tr>
<tr>
<td>% Unemployed, 2010</td>
<td>8.4%</td>
<td>+</td>
<td>9.1%</td>
</tr>
<tr>
<td>% Individuals Below Federal Poverty Level, 2008</td>
<td>13.8%</td>
<td>-</td>
<td>14.6%</td>
</tr>
<tr>
<td>Teen Pregnancies per 1,000 Girls, Ages 15-19, 2009</td>
<td>53.4</td>
<td>-</td>
<td>56.0</td>
</tr>
</tbody>
</table>

* “+” = number increased from previous year, “-” = number decreased from previous year
Status of the Selected Priorities at the End of 2010
Access to Care

- **Progress**
  - The percent of Macon County adults who wanted to see an MD and couldn’t in 2006 was 18% vs. 16% for NC. By 2008 (latest available NC CATCH) these numbers have dropped to 17.9% in Macon vs. 16.5% in NC.
  - Angel Medical Center obtained a new bone density screening machine and stereotactic biopsy unit.
  - Angel Medical Center, Highlands-Cashiers Hospital, and Westcare Health System all have digital mammography capability.
  - Angel Medical Center opened a new Cancer Resource Room.
  - Macon County Public Health began a schedule of modified open access with the intent of improving access to care.
  - The Franklin Community Care Clinic opened one evening/week in February, 2010. The clinic expanded to two evenings/week in August, 2010. The clinic serves clients with no insurance who falls at or below 150% of federal poverty and has made a significant impact on access to primary care.
  - Macon County’s primary care ratio for the low income population was 1:2051, NC 1:1,428 according to Macon County’s HPSA Designation Report in 4/08. This is an improvement from the 2004 baseline of 1:3199.
  - The Franklin Community Care Clinic began offering behavioral health services.
  - Health Care Reform Law required that Category A and B services as defined by the US Task Force on Clinical Preventive become a covered service by insurance providers.
Access to Primary Care

Barriers/Challenges

- Continuous volunteer staffing for the Franklin Community Care Clinic.
- Development of a Board for the Franklin Community Care Clinic to work toward financial sustainability.
- Sustaining a clientele of paying clients at the Macon County Public Health Center to ensure continued services for the uninsured.
- No updated data (since 2005) provided by the state regarding estimates of uninsured ages 18-64. We assume this number might have increased based on current economy and unemployment rates.
Strengthening Families

Progress

- A point-in-time homeless count was conducted in January, 2010.
- Rental assistance and transitional housing were identified as assistance priorities.
- The PEP Grant began in Macon County Schools.
- Macon County schools were selected to pilot activities in support of ISPOD.
- Public health and public school staff participate on the WNC Healthy Kids Coalition.
- Macon County Public Health established a breastfeeding peer counselor position.
- Public Health staff participate on the WNC Healthy Kids Coalition, the WNC Cancer Coalition, and the WNC Health Promotion Coalition.
- The 2009 YRBS reports improvements tobacco initiation, consumption of fruits, and cocaine and inhalant use.
- Ladies Night Out “gap funds” pledged.
- The Macon County Comprehensive Plan includes Active Living By Design recommendations.
- Macon County Public Schools staff receive awards for NC PE Teacher of the Year, High School PE Teacher of the Year, and Health Education Teacher of the Year. In addition, the Child Nutrition Program receive favorable recognition from WNC Healthy Kids.
- Rate of Teen Pregnancies per 1000 Girls Ages 15 -19 dropped from 59.6 in 2006 to 53.4 in 2009 (2009 NC RESIDENT PREGNANCY RATES PER 1,000 POPULATION – NC SCHS).
- The Owen House, a parent/student resource center was established by Macon County Public Schools.
Strengthening Families

Barriers/Challenges

- Number of pregnant women seen through WIC who smoke is still higher than that state. *Percent of Live Births Where Mothers Smoked During Pregnancy* increased from 20.3% in 2006 to 22.3% in 2007. The state rate in 2007 was 11.0 (latest available data from NC CATCH).
- The Baby Think It Over educational program has not been funded (to date) for the 2010-2011 school year.
- The 2009 Macon County YRBS shows negative indicators in obesity and condom use.
Macon County Trend Data

Rates Over Time

% of Live Births Where the Mother Smoked During Pregnancy

Rate of Teen Pregnancies per 1000 Girls Ages 15 -19
Macon County High Schools – 2009 YRBS
Body Mass Index & Perceptions of Weight

Perceptions
11.5 % -- very or slightly underweight.
32.5% -- very or slightly overweight
56.0% -- about the right weight
Planning for Senior Needs

Progress

- Planning for future growth - Macon County Public Health staff joined the Regional Aging Services Health Promotion Coalition.

- Planning for future growth - Macon County Comprehensive Plan included Senior Friendly Communities recommendations.

- Macon County Department on Aging offers an ongoing fall prevention program.

- Macon County Cooperative Extension Service begins a diabetes education program.
Planning for Senior Needs

■ Barriers
  ■ Population growth among the age 75+ demographic continues to far outpace the state growth rate for this same demographic.
  ■ Growth rate of health care services to serve this population (estimated by number of primary care physicians per 10,000 population) is flat.
2003 – 2007 Population Changes Among the Age 75+
Demographic Contrasted to Health Care Access

Population Estimate for age 85+

Population Estimate for age 75 - 84

Primary Care Physicians per 10,000 Population

2010
Environmental Quality

Progress

- A training for local realtors was conducted by the Macon County Mapping Department to educate them on the use of GIS to identify potential environmental concerns regarding land development and transfers.

- Macon County Environmental Health staff provided trainings for well drillers on appropriately chlorinating wells. Macon County’s rates for positive water samples have fallen from 70% in July, 2008 to less than 30% in July, 2010.

- 61 straightpipe operations (identified by the 2009 WaDE program) were eliminated.

- At least 90% of Environmental Health documents (well permits, septic permits, etc.) are scanned into a searchable database for public use.

- A variety of technology improvements have been implemented by Macon County Environmental Health staff, including GIS identification of septic systems and wells, use of air cards by food and lodging staff, and use of field laptops.
Environmental Quality

- New Barriers/Challenges
  - The projected increases in the overall number of septic system applications has not been a factor due to the current economy.
  - Septic system repair applications have not risen as predicted.

*Although these issues are not necessarily barriers or challenges; they represent areas in which public health staffing and revenues are impacted.*
Mental Health / Substance Abuse

Progress

- Decrease in the number of involuntary commitments noted.
- Smoky Mountain Mental Health divested mobile crisis, psychiatric services, and emergency services to Appalachian Counseling.
- Suicide rates are still higher than the state; however, they are down from a rate of 26.8 in 2007 to 20.3 in 2009.
- Self-reported marijuana use rate by high school students is down, but has not reached our goal of no more than 16%.
Mental Health / Substance Abuse

- Barriers/Challenges
  - Current shortage of group home beds due to the elimination of Tier III and IV homes.
  - Limited availability of psychiatric services in the region was compounded by a new requirement that providers be CRITICAL ACCESS BEHAVIORAL HEALTH AGENCIES (CABHAs).
  - Number of emergency placement beds at the state level continue to dwindle.
  - Extended delays in the placement of involuntary commitments are too frequent due to the lack of psychiatric beds at state hospitals.
Marajuana Use Past 30 Days -
Macon High School Students

<table>
<thead>
<tr>
<th>Year</th>
<th>Macon</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002</td>
<td>23.7</td>
</tr>
<tr>
<td>2005</td>
<td>18.9</td>
</tr>
<tr>
<td>2007</td>
<td>21.7</td>
</tr>
<tr>
<td>2009</td>
<td>19.5</td>
</tr>
</tbody>
</table>
Changes in Macon County’s Economic and Political Environment Affecting Health

- CareNet of Macon County continues to experience increased requests for food assistance.
- A draft steep slope ordinance was developed by the Macon County Planning Board. The slope proposal is not universally supported due to concerns over property rights, property valuation, and disclosure requirements.
- Potential cuts in state funding may impact negatively on local health services. Macon County Public Health has frozen positions during 2010 to prepare for potential losses of staff or programs. Concerns that some cuts may impact programs that produce local public health revenues (i.e. Adult Dental).
- Demand for health care services decreasing. Possible causes include decisions to postpone families due to the economy and migrant workers leaving the area due to lack of local work.
- First full year of passes under the new smoke-free restaurants and bars law. Few complaints received.
- Local pharmacies and medication assistance programs see patients stretching medications (extending a 60 day supply to 120 days, etc.).
New and Emerging Health Issues

- Will enough access points for preventive care be available under new expanded insurance coverage requirements?
- Will immunization compliance rates be affected due to legislative revocation of funding for various children’s vaccines? Providers must now purchase their own vaccines and free state vaccine is now only available in individual doses (no combo shots).
- Greater need for community education about new coverage for preventive services under health care reform. Greater need to encourage clients to seek care early in the disease process in order to prevent secondary complications.
Become Involved...

Macon County’s SOTCH report is disseminated to the Board of Health, County Commissioners, Healthy Carolinians Coalition, local hospitals, and to the general public through libraries, the county website, and various media outlets.

We value your input and welcome any questions or suggestions. If you would like to become involved in any of these priority health issues, please contact us at bbarr@maconnc.org or call (828) 349-2081.