

# 2019 Haywood County e-CHIP



The 2018 Community Health Assessment (CHA) priority areas are:

- 1) Substance Use & Mental health**
- 2) Perinatal & Early Child Health**
- 3) Chronic Disease Prevention**

## **Haywood County Local Priority Overview Video**

Clear Impact Scorecard™ is a strategy and performance management software that is accessible through a web browser and designed to support collaboration both inside and outside organizations. WNC Healthy Impact is using Clear Impact Scorecard™ to support the development of electronic community health improvement plans (eCHIP), State of the County Health Reports and Hospital Implementation Strategy scorecards in communities across the region. The 2019 Haywood County Community Health Improvement Plan (eCHIP) was submitted on Monday, September 9, 2019.

Scorecard helps communities organize their community health improvement efforts by:

- Developing and communicating shared vision
- Defining clear measures of progress
- Sharing data internally or with partners
- Simplifying the way you collect, monitor and report data on your results

The following resources were used/reviewed in order to complete the CHA, submitted March 4, 2019:

- [American Heart Association](#)
- [Center for Youth Wellness](#)
- [Centers for Disease Control and Prevention- CDC Community Health Improvement Navigator](#)
- [Centers for Disease Control & Prevention \(2019\). Calculate What Diabetes Costs your Business.](#)
- [County Health Rankings \(CHR\)- Haywood County, North Carolina](#)
- [CHR- Health Factors](#)
- [Eat Smart Move More NC](#)
- [Haywood Community College, Enrollment and FTEs - Continuing Education](#)
- [Haywood County Health and Human Services Agency](#)
- [Haywood Regional Medical Center](#)
- [MountainWise](#)
- [NC State Center for Health Statistics \(SCHS\)- Data Book](#)
- [NC SCHS- Selected Vital Statistics](#)
- [NC Department of Health and Human Services \(DHHS\)- Early Childhood Action Plan](#)
- [NC DHHS- NC Medicaid Eligibility and Program Expenditures](#)
- [NC DHHS- Newly Diagnosed Chlamydia Annual Rates](#)
- [NC Department of Public Instruction \(DPI\)- High School Dropout Counts and Rates](#)
- [NC DPI- 4-Year Cohort Graduate Rate Report](#)
- [NC State Bureau of Investigation](#)
- [US Census Bureau](#)
- [US Environmental Protection Agency](#)

- [US Department of Health & Human Services Office of Disease Prevention and Health Promotion](#)
- [University of North Carolina-Chapel Hill University Library](#)
- [WNC Health Network](#)

An additional resource related to the CHIP is the CHA tools located at: <https://publichealth.nc.gov/lhd/>

**Key:**

R Result

I Indicator

P Program/Strategy

PM Performance Measure

**Substance Use and Mental Health - Long-Term CHIP**

R	SU	1) Advancing health and resilience by advocating for prevention, treatment, harm reduction and recovery.	Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
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### Why It Matters?

Substance use continues to be identified as a top health priority in our community. Many individuals impacted by substance use disorders also struggle with mental health disorders, leading these health priorities to be combined. Over 95% of key informants ranked substance use and over 66% ranked mental health as critical to address (2018 Haywood County Community Health Assessment). Key informants included community or business leaders, physicians, other health providers, public health representatives, and social service providers. Alcohol, tobacco and other drugs negatively impact all ages and ethnic groups in our community.

Risk factors associated with substance use include several biological, social, environmental, psychological, and genetic factors; and these factors can include gender, race and ethnicity, age, income level, educational attainment, and sexual orientation (Healthy People 2020). In 2016, the rate of smoking among pregnant women in Haywood County was 17.7 per 100,000 (State Center for Health Statistics). Individuals with mental health disorders also smoke at a higher rate than the general population (NAMI). Health indicators in our County show the following trends: .

- In 2018, unintentional medication and other drug overdoses comprised 44% of all cases seen at the emergency department. This is a slight decline from the 47% of cases in 2017 (NC DETECT, 2017-18\*).
- In 2018, over 17% of adults reported being current smokers. This was a decrease from 2015, which showed a figure of over 24% (WNC Health Network-WNCHN, 2018).
- Binge drinking was reported by six percent of survey respondents. This was a dramatic improvement from 2015, in which 12.7% of adults reported binge drinking (WNC Health Network-WNCHN, 2018). Binge drinking is defined as five or more drinks for a man and four or more for a woman on one occasion in the past month.
- Over 17% of survey respondents experienced more than seven days of poor mental health in the past month. This was an uptick from the 16% who reported this in 2015 (WNC Health Network-WNCHN, 2018).
- Over 3500 mental-health related visits were made to the emergency department by Haywood County residents (NC DETECT, 2018\*). This was a decrease from the previous year, which showed over 3800 visits.
  - \*NC DETECT is a statewide public health syndromic surveillance system, funded by the NC Division of Public Health (NC DPH) Federal Public Health Emergency Preparedness Grant and managed through collaboration between NC DPH and UNC-CH Department of Emergency Medicine's Carolina Center for Health Informatics. The NC DETECT Data Oversight Committee does not take responsibility for the scientific validity or accuracy of methodology, results, statistical analyses, or conclusions presented.
- Over nine percent of adults did not get needed mental health care or counseling in the last year, an increase from seven percent in 2015 (WNCHN-WNC Healthy Impact, 2018).

### Alignment

Substance use and mental health and the related result "advancing health and resilience by advocating for prevention, treatment, harm reduction and recovery" are aligned with the following Healthy NC 2020 Focus Areas/Objectives:

**Substance Abuse and Mental Health**

- Reduce the percentage of high school students who had alcohol on one or more of the past 30 days.

- Reduce the percentage of individuals aged 12 years and older reporting any illicit drug use in the past 30 days.
- Reduce the rate of mental health-related visits to emergency departments (per 10,000 population).
- Decrease the average number of poor mental health days among adults in the past 30 days.

## Experience and Importance

### **How would we experience "advancing health and resilience by advocating for prevention, treatment, harm reduction and recovery" in our community?**

Following the completion of the 2018 Haywood County Community Health Assessment (CHA), the Substance Use Prevention Alliance completed "Getting to Strategies." This is a road map for health priority work groups. The SUPA provided answers to the following questions:

- What are the overall quality of life conditions (results) we want for the people who live in our community?
- What would these conditions (results) look like if we could see them?
- How can we measure these conditions?
- How are we doing on the most important of these measures?
- Who are the partners with a role to play?
- What works to do better?
- What do we propose to do?

#### **Quality of Life Conditions (results):**

- A more caring, engaging and loving community
- Everyone meets their full potential
- Institutions and the community are trauma-informed
- We are more empathetic and informed about addiction and mental health
- Substance use is less romanticized among youth
- There is more understanding, less stigma and increased community awareness
- There is increased cultural diversity and awareness
- We are more focused on wellness and less on sickness

#### **Health Behaviors:**

- Reduced substance use and overdose
- Less pressure to make poor choices
- Reduced medication use
- Better stress management
- All individuals have Naloxone at home and in their possession at all times. Provide Naloxone to people.
- More physical activity
- Modeling healthy behaviors in order to help others (cooking/exercise/self care)
- Expanded messaging and campaigns about prevention, including more substance use education and prevention among youth and funding for school programs
- Invest in prevention staff

#### **Clinical Factors:**

- Expanded Medicaid/access to more affordable health insurance
- Available mental health and substance use treatment centers

- More hiring and reduced attrition among service providers
- Increased awareness of services and engagement in treatment and the continuum of care
- Better services

#### **Social and Economic Factors:**

- Livable wages and more economic opportunity
- Individuals have work that is more fulfilling and supportive employers.
- Students have better grades and are more successful (more educational attainment)
- More community involvement and an increase in relationships across community
- A willingness to engage at all levels, with an increase in understanding and kinder people
- Be hands and feet in the community with an increased commitment to helping/serving. Be more open to change and be part of it.
- Reduced isolation, including more gatherings (block parties) and conversations
- Non-judgmental language; use person-first language with no labels. Do not attach stigma to behavioral health issues. Have the ability to openly discuss mental health and substance use concerns.
- More educational events and opportunities exist and more people taking advantage of opportunities (e.g. poverty simulation)
- A community that embraces harm reduction
- An increased awareness of reality with no blinders
- Increased inclusivity, including caring for each other, being open, valuing all and seeing the whole person
- Recognize successes and areas to improve. Have a commitment to improve.
- Have more self-compassion with healthy boundaries and social support for self.
- Provide increased support for parents (to enable them to better care for kids); fewer individuals are reporting Adverse Childhood Experiences.
- Provide adequate support to address intergenerational poverty; no more denial of needs.
- Improved targeting of law enforcement strategies; fewer arrests for unmet behavioral health needs.
- Reduced trafficking of substances
- Invest in post-high school youth programs
- Increased awareness of supportive services, programs and agencies available. Promote use of these resources for people who need them.

#### **Physical Environment:**

- Increased affordable housing with a reduction in or absence of homelessness
- Fulfilled housing and other needs
- Increased hiring and housing of people with behavioral health concerns

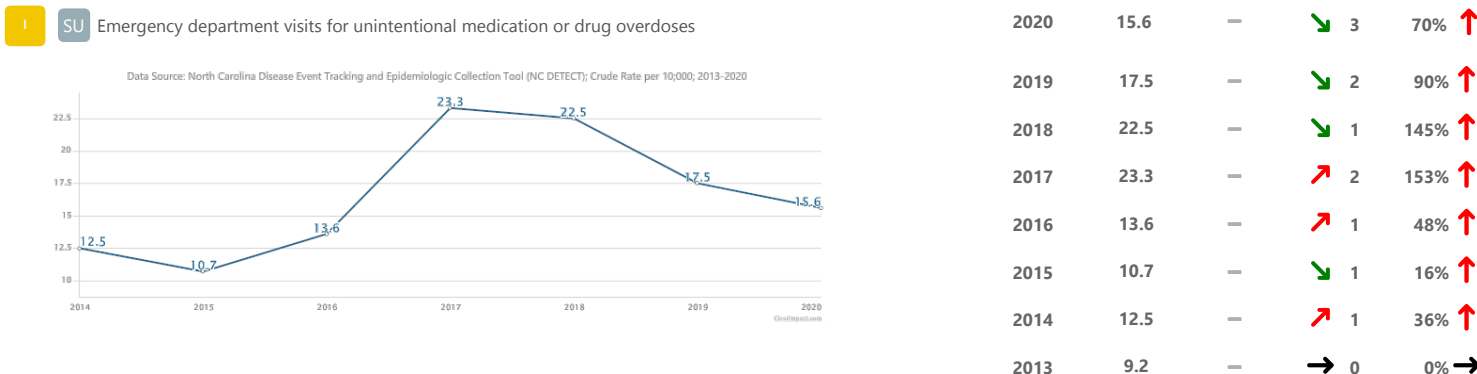
#### **Health Outcomes:**

- Improved physical and mental health, with fewer people reporting poor mental health days and physical/emotional problems
- A reduced demand for services, including fewer overdoses and mental health crises
- Increased resilience and less stress
- Healthy youth and families
- Improved perception regarding the current climate
- Improved efficiency and funding with greater connectedness
- People are less busy, but more engaged in important things. We establish healthy boundaries.

- We experienced improved education and understanding about the issues. This includes adopting healthy norms and standards.

During both the 2018 CHA prioritization process and SUPA discussions, we discussed how we're doing on the most important of health measures:

- Substance use data from the emergency department (alcohol toxicity, all opioid overdose, heroin overdose, meth use, underage alcohol use)
- Adult tobacco use
- Naloxone reversals
- Available prevention staff
- Uninsured adults
- Adults who have ongoing medical care
- The average weekly wage (lower than the state average)
- Educational attainment, including the high school graduate and drop-out rates
- Adults who think Haywood County is a poor or fair place to live
- Adults who always or usually get the support they need
- Adults who have an Adverse Childhood Experiences score of four or more
- The percentage of residents spending more than 30% on rent
- Adults reporting poor or fair health
- Adults limited in activities (primarily due to back/neck problems and mental health/depression)
- Adults who report being negatively affected by theirs or someone else's substance use



## Story Behind the Indicator

The "Story Behind the Curve" helps us understand why the data on unintentional medication and drug overdose is the way that it is in our community. When we understand the root causes of our community problems, we have a better chance of finding the right solutions, together.

**What's Helping?** *These are the positive forces that work in our community and beyond that influence this issue in our community*

- Five law enforcement agencies carry Naloxone, a reversal medication for opioid overdoses. This project is overseen by Haywood County EMS. Many lay citizens have also been trained to use this medication. The North Carolina Harm Reduction Coalition (NCHRC) conducts monthly training sessions at the local health department.
- NCHRC and the Waynesville Police Department partner to offer the Law Enforcement Assisted Diversion program (LEAD). This program directs people with low-level offenses to treatment and other resources instead of jail. An example of this offense includes possessing a small amount of an illegal substance.
- NCHRC distributes supplies such as Fentanyl test strips, sterile syringes and antibiotic ointment to help reduce the harm associated with injection drug use.

- Haywood Regional Medical Center hosts training sessions for health care providers about safer prescribing practices.
- With NCDHHS grant funding, HHS contracted with NCHRC to fund a post-overdose outreach specialist. This peer not only provided post-overdose follow-up, but connected participants with syringe exchange services.

**What's Hurting?** *These are the negative forces at work in our community and beyond that influence this issue in our community.*

- Fentanyl is often found in Heroin and increases the likelihood of an overdose.
- Local data about youth substance use is lacking, which hinders the community's ability to apply for federal funding.
- Stigma still exists surrounding drug use and Medication-Assisted Treatment (MAT), such as Suboxone.
- Many residents lack adequate housing, living-wage employment, and Medicaid access, making it difficult to achieve and sustain recovery from substance use and mental health disorders.
- During the first two quarters of 2019, the most recent data available, 1,736,000 opioid pills were prescribed to Haywood County residents (NC Opioid Dashboard, 2019).

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## Partners With A Role To Play

### **Partners in our Community Health Improvement Process:**

- Substance Use Prevention Alliance
- Haywood Regional Medical Center

### **Partners With a Role in Helping Our Community Do Better on This Issue:**

- Appalachian Community Services of Western North Carolina
- Blue Ridge Community Health Services
- Concerned Citizens
- Down Home North Carolina
- Drugs in Our Midst
- Groups Recover Together
- Haywood County Health and Human Services Agency
- Haywood Community College
- Hazelwood Healthcare
- Haywood County Schools
- Haywood County Sheriff's Office
- Haywood Pathways Center
- Haywood Regional Medical Center
- Meridian Behavioral Health Services
- Mountain Projects
- MountainWise
- NC Harm Reduction Coalition
- Healthy Haywood- Substance Use Prevention Alliance
- Perinatal Substance Use Collaborative
- Vaya Health
- Waynesville Police Department
- WNC AIDS Project

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## Strategies Considered & Process

The following actions have been identified by our Substance Use Prevention Alliance and community members as ideas for what can work for our community to make a difference on unintentional medication and drug overdose.

**Actions and Approaches Identified by Our Partners** *These are actions and approaches that our partners think can make a difference on unintentional medication and drug overdose.*

- Adverse Childhood Experiences/Trauma- Developing a Community Resilience Plan.
- Conduct community education about overdose prevention and reversal.
- Provide harm reduction services, including fentanyl testing and post-overdose response.
- Coordinate presentations by first responders and harm reduction staff for the Substance Use Prevention Alliance. Presentations will include post-overdose response protocol and information about harm reduction interventions.

**What is Currently Working in Our Community** *These are actions and approaches that are currently in place in our community to make a difference on unintentional medication or other drug overdose.*

- Education about safer prescribing practices
- Law Enforcement Assisted Diversion (LEAD) was implemented in Haywood County in 2017. LEAD has a full-time case manager who has served 15 participants and connected five participants with Medication-Assisted Treatment. One participant has entered a year-long residential treatment program (NC Harm Reduction Coalition, 2019).
- Medication-Assisted Treatment- MAT is an evidence-based method for treating substance use disorders. Haywood County has six agencies that provide MAT. A clinic also exists in a neighboring county.

**Evidence-Based Strategies** *These are actions and approaches that have been shown to make a difference on unintentional medication and drug overdose.*

Name of Strategy Reviewed	Level of Intervention
Drug-Free Communities Grant	Organizational, Community
<a href="#">Syringe Exchange Program</a>	Individual, Community, Policy
<a href="#">Medication-Assisted Treatment</a>	Individual, Policy, Organizational

**What Community Members Most Affected by Unintentional Medication and Drug Overdose Say** *These are the actions and approaches recommended by members of our community who are most affected by unintentional medication and drug overdose.*

- Implement the Pride survey to obtain youth substance use data
- Hold community listening sessions to determine barriers receiving substance use treatment
- Offer community education about overdose signs and symptoms, as well as how to reverse an overdose
- Organize presentations by first responders about post-overdose response protocol

**Process for Selecting Priority Strategies**

The Substance Use Prevention Alliance (SUPA) discussed the data indicators they felt could be impacted within the three-year Community Health Assessment (CHA) cycle. From this discussion, the coalition formed work groups to address the data indicators of greatest concern. Within each work group, programs were reviewed and chosen based on resource availability, community acknowledgement of need and programs' merits to positively influence indicator outcomes. A timeline was developed for each work group and its chosen data point. Programs were selected that could be realistically implemented within a three-year period. The programs align with the vision statement for the SUPA and support the top health priority identified by the CHA. Specific actions were determined that could be achieved for each data indicator. Specific programs were identified that will be implemented to reduce negative outcomes for each data indicator. Each program/project addresses some of the more well-known and researched root causes of overdose. For instance, an Adverse Childhood Experiences score of 4+ increases the likelihood that a person will experience later health problems, such as substance use. Efforts that include education and building a Community Resilience Plan will better equip individuals to address trauma. The Law Enforcement Assisted Diversion (LEAD) program has been shown to reduce re-arrests by 58% (LEAD Bureau, 2020). Harm reduction practices have been shown to lower overdose rates and connect people to substance treatment programs (NC Harm Reduction Coalition, 2020).

## Data Holes

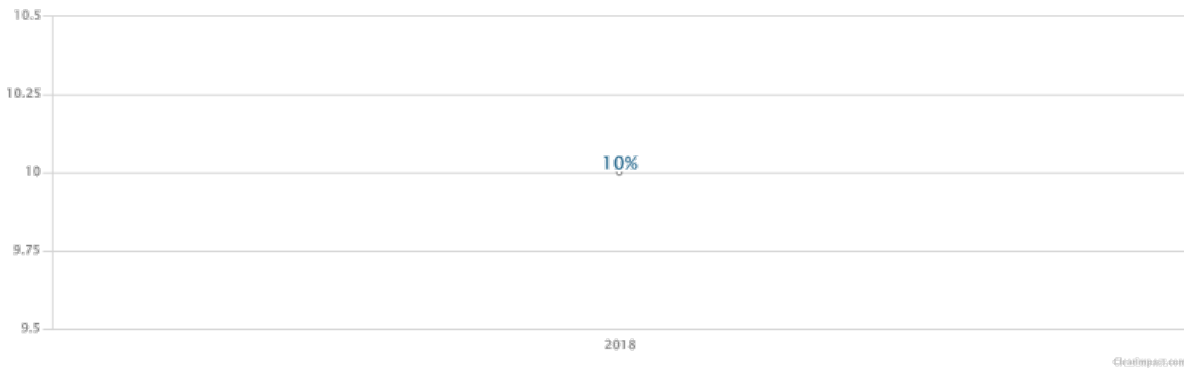
We are keeping an eye on medication and other drug overdoses as a way of telling how we are doing as a community in addressing substance use. We also strive to build a community where we "advance health and resilience by advocating for prevention, treatment, harm reduction and recovery." We have identified other data that is not currently available, but that we would like to develop to help us monitor progress on this result:

- Youth tobacco use
- Youth alcohol use
- Youth drug use

These data points can be collected from youth by conducting the Pride survey in local schools. Pride collects data such as perceptions surrounding drug use, past 30-day drug use and the locations where drugs are used.

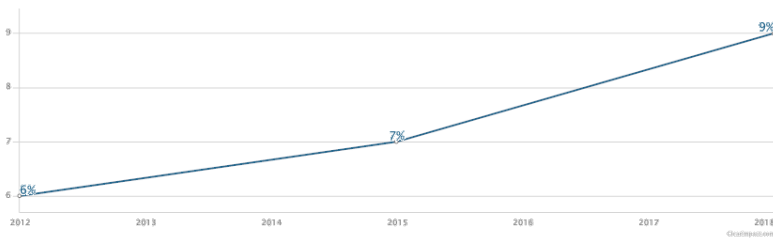
**I** **SU** Adverse Childhood Experience Scores Among Adults (score of 4 or more) **2018** **10%** **-** **→ 0** **0% →**

Data Source: WNCHN- WNC Health Network, 2018



**I** **SU** Did not get mental health care or counseling needed in the last year **2018** **9%** **-** **↗ 2** **50% ↗**

Data Source: WNCHN- WNC Health Network, 2012-2018



Year	Value	Target	Trend	% Change
2018	9%	-	↗ 2	50% ↗
2015	7%	-	↗ 1	17% ↗
2012	6%	-	→ 0	0% →

**P** **SU** Implement the Pride survey in Haywood County Schools to gather youth substance use data.

Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change

### What Is It?

The Pride survey is a trusted method of obtaining substance use data from youth. A thorough data collection will prepare Haywood County to apply for the Drug-Free Communities Grant (DFC). DFC provides \$125,000 per year for five years and allows the opportunity to hire a full-time coordinator. Communities who receive DFC funding experience a reduction in past 30-day use of alcohol, tobacco, marijuana and illicit prescription drug use among youth. DFC-funded communities have experienced long-term reduction in youth substance use (Community Anti-Drug Coalitions of America, 2002-2018).

The Pride survey was identified by the Substance Use Prevention Alliance as an action that, when combined with other actions in our community, has a strong potential to make a difference in Haywood County. This is a new program in our community.

The survey would be conducted yearly in Haywood County's eight middle and high schools. Students surveyed will be in 7th, 9th and 11th grades. This process will continue for as long as possible.



The priority population for the Pride Survey includes Haywood County Schools (HCS) students and staff, and the Pride survey aims to make a difference at the organization level. Implementation of the survey will take place in HCS. Survey results will be anonymous and therefore not connected to a particular student. Results will only be shared with HCS administrators, grant funders, and other approved individuals.

This strategy addresses health disparities by identifying differences among the grade levels surveyed. By obtaining quality data, the community will be better positioned to implement evidence-based interventions that will best serve each school. Interventions selected will be ones recommended by DFC, a nationally-recognized grant program.

**2020 Update:**

At this time, the Pride Survey has not been conducted. The survey's length makes it difficult to administer during limited instructional time. Haywood County Schools (HCS) gave approval for a brief survey about alcohol and vaping. The survey was conducted January 2020 with all ninth-grade students enrolled in HCS. To date, over 100 completed surveys have been returned. Data analysis has been completed, showing that most students have not used alcohol or vaping devices. Students perceive these substances as risky and know that their parents would not approve of using them. In addition, approximately 16% of students reported past 30-day alcohol use and more than one-third have used vaping devices. Funding for the survey came from the Partnership for Success grant awarded to Mountain Projects, Inc (Mountain Projects, Inc, 2020).

Partners

The partners for the Pride survey include:

Agency	Person	Role
<a href="#">Haywood County Schools</a>	Jill Barker	Lead
<a href="#">Mountain Projects</a>	Patti Tiberi	Collaborate
<a href="#">Substance Use Prevention Alliance (Youth Substance Use Prevention Work Group)</a>	Coalition Members	Support

Work Plan

Activity	Resources Needed	Agency/Person Responsible	Target Completion Date
Obtain final approval from Haywood County Schools	Written approval	Haywood County Schools/ Assistant Superintendent Jill Barker/School Board	November 2019
Pay for survey forms and evaluation services	Funding	Mountain Projects/Patti Tiberi	December 2019
Notify school administrators and parents/guardians of survey	Notification letter	Haywood County Schools/Superintendent Bill Nolte and Assistant Superintendent Jill Barker	December 2019
Conduct survey with all 7th, 9th and 11th grade students	Written approval	Haywood County Schools/ Assistant Superintendent Jill Barker	January 2020
Review survey results as provided by Pride Surveys	Survey report	Substance Use Prevention Alliance Members (Youth Substance Use Prevention Work Group)	May 2020
Share survey results with Haywood County Schools administration	Survey report	Mountain Projects/Patti Tiberi	July 2020

Evaluation & Sustainability

**Evaluation Plan:**

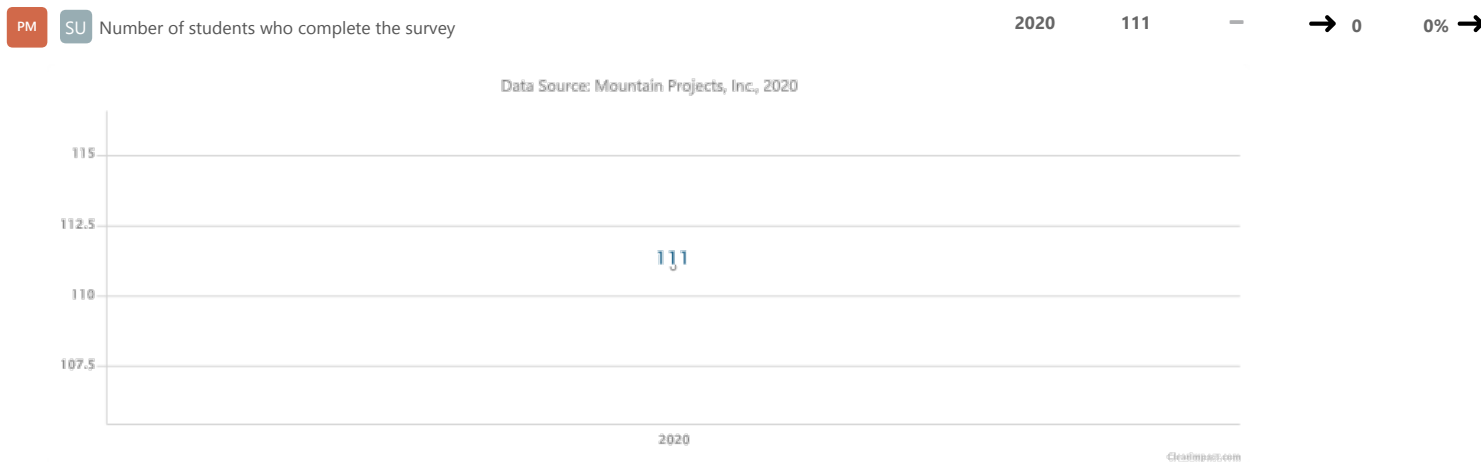
We plan to evaluate the impact of the Pride survey through the use of Results-Based Accountability™ to monitor specific performance measures. We will be monitoring How Much, How Well and/or Better Off Performance Measures. Our evaluation activities will be tracked in the Work Plan table, above.

**Sustainability Plan:**

The following is our sustainability plan for conducting the Pride Survey:

1. Performing Pride survey, resulting in data that equips the community to apply for Drug-Free Communities (DFC) funding.

2. Repeat the Pride survey annually to demonstrate need for prevention programming in the schools and community.
3. DFC funding will be used for evidence-based interventions that result in long-term changes, such as policy and environmental changes.
4. **Performance measures**- We will gather data on the number of students who participate and the percentage who participate. Data gathered will include alcohol, tobacco, marijuana and illicit prescription drug use, key measures that have improved in DFC-funded communities (Community Anti-Drug Coalitions of America, 2002-2018). If the community receives DFC funding, changes in youth substance use will be assessed and communicated to funders.
5. **Key stakeholders**- Stakeholders include Haywood County (HCS) Schools administrators and staff, the School Health Advisory Committee, Haywood County Health and Human Services Agency (HHSA) staff and members of the Substance Use Prevention Alliance (SUPA). SUPA members include treatment providers, harm reduction advocates, medical providers, public health specialists, prevention providers and directly impacted community members.
6. **Program champions**- These individuals include the SUPA chair and HHSA staff.
7. **Financial support**- Support for the Pride survey comes from grant funding obtained by Mountain Projects. Following the survey, our community will apply for DFC funding. This grant will finance the survey during the five years of funding. When the grant has ended, we will request ongoing funding through the HCS foundation and Haywood Healthcare Foundation.
8. **Communication**- A decision will be made in partnership with HCS about beneficial ways to use the data. We will also decide together on how to best educate the community about youth substance use. Communication may include education about social norms.
9. **Program value**- This will be communicated by explaining the impact of collecting data (funding) and the impact on youth substance use as a result of receiving funding. Successes will also be communicated to community leaders, such as the HHSA board and the Board of County Commissioners.
10. **Staff capacity**- Existing school staff, including teachers and administrators, will distribute surveys to students and collect them. Mountain Projects will collect the surveys from Haywood County Schools and submit them to the Pride survey company for evaluation.



P SU Conduct youth-focused prevention activities to enhance protective factors.

Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change

## What Is It?

Conducting youth-focused prevention activities was identified by the Substance Use Prevention Alliance as an action that, when combined with other actions in our community, has a reasonable chance of making a difference in youth alcohol, tobacco and drug use in our community. This is an ongoing program in our community, with implementation of several new components.

This program will continue or initiate the following:

- Provide six hours of school-based prevention education to eighth grade students (continuing program)
- Conduct focus groups with youth to further inform prevention efforts (new program)

- Create a youth-focused community calendar, enhancing the protective factor of "strong neighborhood attachment" (new program); NIDA. 2020, May 25. What are risk factors and protective factors?; retrieved from <https://www.drugabuse.gov/publications/preventing-drug-use-among-children-adolescents/chapter-1-risk-factors-protective-factors/what-are-risk-factors> on 2021, February 23.

The priority population/customers for youth-focused prevention are adolescents in Haywood County and youth-focused prevention aims to make a difference at the individual and environmental levels. Implementation will take place in school and community settings.

This program addresses the health disparities related to youth substance use. Individuals who begin using substances at a young age are more likely to experience both short and long-term consequences. Impacts include having difficulty returning to normal after the use of a substance (Partnership to End Addiction, 2021). Poverty is also a risk factor for substance use; NIDA. 2020, June 17. Chapter 2: Risk and Protective Factors; retrieved from <https://www.drugabuse.gov/publications/principles-substance-abuse-prevention-early-childhood/chapter-2-risk-protective-factors> on 2021, February 23.

### 2020 Update:

- The drug prevention education classes normally offered to eighth-grade students at public middle schools in Haywood County were unable to be held due to the COVID-19 pandemic
- As part of the Partnership for Success (PFS) grant, key informant interviews were held with seven youth, which assisted the PFS grant in identifying strategies (Mountain Projects, Inc., 2020).
- A youth-focused community calendar has not been created at this time. Capacity was limited in 2020 due to the COVID-19 pandemic.

### Partners

The partners for youth-focused prevention activities include:

Agency	Person	Role
<a href="#">Addiction Professionals of NC</a>	Richie Tannerhill	Collaborate
Drugs in Our Midst	Jean Parris	Support
<a href="#">Haywood County Schools</a>	Jill Barker	Support
<a href="#">Mountain Projects</a>	Patti Tiberi and Libby Ray	Collaborate
<a href="#">MountainWise</a>	Tobin Lee	Collaborate
<a href="#">Substance Use Prevention Alliance (Youth Substance Use Prevention Work Group)</a>	Work Group Members	Lead

### Work Plan

Activity	Resources Needed	Agency/Person Responsible	Target Completion Date
Schedule school presentations	School staff	Drugs in Our Midst/Jean Parris	November 2019
Conduct school presentations	Presenters and educational materials	Drugs in Our Midst/Jean Parris	April 2020
Evaluate school presentations	Staff time; student feedback	Drugs in Our Midst/Jean Parris	June 2020
Schedule youth focus groups	Staff time; school permission, if needed	Substance Use Prevention Alliance (Youth Substance Use Prevention Work Group)	September 2020
Recruit youth and hold focus groups	Staff time; youth participants; meeting space	Substance Use Prevention Alliance (Youth Substance Use Prevention Work Group)	October 2020
Evaluate feedback from youth focus groups	Staff time; youth feedback	Substance Use Prevention Alliance (Youth Substance Use Prevention Work Group)	January 2021
Select format for youth community calendar	Staff time; samples of calendar formats, including phone/web apps; youth feedback	Substance Use Prevention Alliance (Youth Substance Use Prevention Work Group)	March 2020
Choose items for youth	Staff time; local school and event calendars;	Substance Use Prevention Alliance (Youth	June 2020

Activity	Resources Needed	Agency/Person Responsible	Target Completion Date
community calendar	youth feedback	Alcohol, Tobacco and Drug Use Work Group)	June 2020
Develop draft of community calendar	Funding; staff time; youth feedback	Substance Use Prevention Alliance (Youth Alcohol, Tobacco and Drug Use Work Group)	October 2020
Finalize and publish community calendar	Funding; staff time; youth feedback	Substance Use Prevention Alliance (Youth Alcohol, Tobacco and Drug Use Work Group)	January 2021
Evaluate community calendar	Staff time; youth feedback	Substance Use Prevention Alliance (Youth Alcohol, Tobacco and Drug Use Work Group)	June 2021

## Evaluation & Sustainability

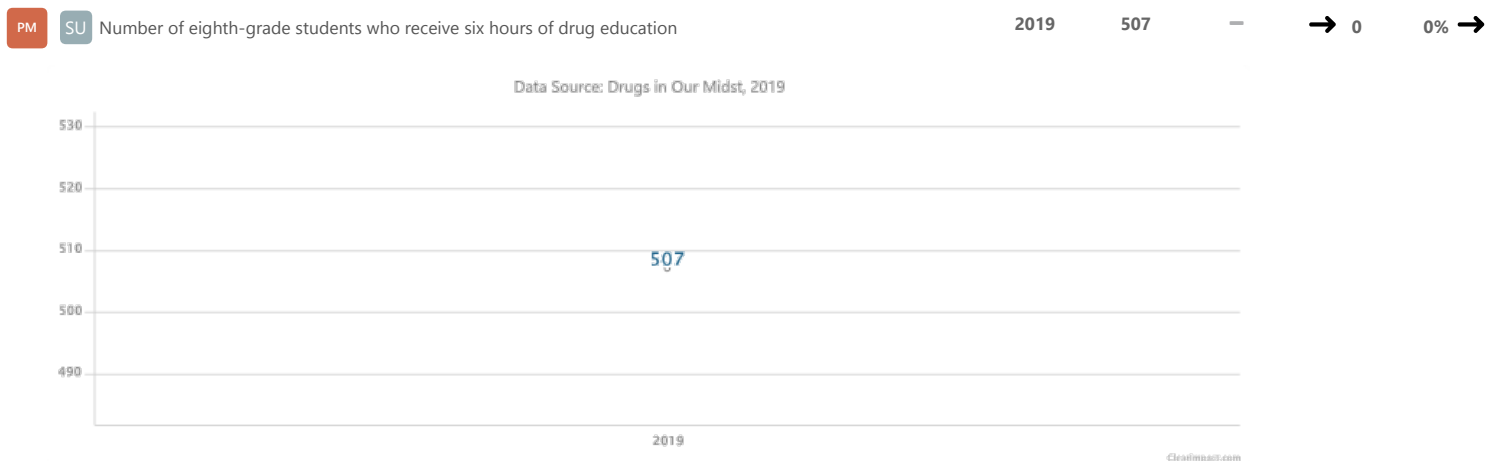
### Evaluation Plan:

We plan to evaluate the impact of youth-focused prevention activities through the use of Results-Based Accountability™ to monitor specific performance measures. We will be monitoring How Much, How Well and/or Better Off Performance Measures. Our evaluation activities will be tracked in the Work Plan table, above. Performance measures include the number of eighth-grade students who receive substance use prevention education, who participate in focus groups to inform prevention efforts, and who are reached through the youth-focused community calendar.

### Sustainability Plan:

The following is our sustainability plan for youth-focused prevention activities:

- Sustainability Components:
  - Identify a champion for the program
    - Program champion will obtain buy-in from school staff and students, allowing the project to continue over multiple years
    - Ensure champion is included in communication of program objectives to stakeholders and ensure awareness amongst community members
    - Use data from youth focus groups to guide decisions about youth prevention programs
      - Communicate focus groups' decisions to stakeholders
    - Obtain program evaluation from students and staff about program performance and effectiveness
      - Address areas with less than positive performance and effectiveness early on
      - Ensure students are involved with actions to increase program performance and effectiveness
  - Focus group efforts can be easily sustained, as the only expense is staff time.
  - Youth feedback will help ensure that calendar content is relevant and beneficial.



Data Source: Mountain Projects, Inc., 2020



P SU Implement the Catch My Breath curriculum for students who are found using tobacco on campus.

Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
-	-	-	-	-

### What Is It?

Catch My Breath (CATCH), a youth e-cigarette prevention program, was identified by the Substance Use Prevention Alliance as an action that, when combined with other actions in our community, has a reasonable chance of making a difference in youth substance use in our community. CATCH is a coordinated school health program, of which e-cigarette prevention is one component. CATCH is part of the "Whole School, Whole Community, Whole Child Model" developed by the Centers for Disease Control and Prevention. This is a new program in our community.

The priority population/customers for Catch My Breath are students caught using or possessing tobacco on campus, and Catch My Breath aims to make a difference at the individual and organizational levels. Implementation will take place in schools.

Catch My Breath addresses health disparities by addressing the sub-population of students who use tobacco and who may potentially experience its health effects.

#### 2020 Update:

Catch My Breath has not been implemented at this time. The COVID-19 pandemic and staffing changes posed challenges in offering this program. Haywood County Schools (HCS) approved outreach to middle and high school principals about the Anti-Vaping Online Information Dissemination (AVOID) program. As stated by the program, 'the Anti-Vaping Online Information Dissemination (AVOID) program is a media-based online prevention toolkit for vape prevention for middle and high school students (AVOID, 2021).' In early 2020, several teachers and administrators expressed interest in this program (Mountain Projects, Inc, and The Mountaineer, 2020).

### Partners

The partners for this Catch My Breath include:

Agency	Person	Role
<a href="#">MountainWise</a>	Tobin Lee	Collaborate
<a href="#">Haywood County Schools</a>	Jill Barker	Lead
School Health Advisory Committee	Chelsea Williams/Brandi Stephenson	Support
<a href="#">Substance Use Prevention Alliance</a>	Youth Substance Use Prevention Work Group Members	Support

### Work Plan

Activity	Resources Needed	Agency/Person Responsible	Target Completion Date
Present program to Assistant Superintendent	Visual presentation and printed materials	MountainWise/Tobin Lee	January 2020
Present program to principals	Visual presentation and printed materials	MountainWise/Tobin Lee	March 2020
Implement program at schools	Principal approval	Haywood County Schools/School Principals	October 2020
Evaluate program using selected performance measures	Numbers of students and schools participating	Haywood County Schools (School Health Advisory Committee).	May 2021

## Evaluation & Sustainability

### Evaluation Plan:

We plan to evaluate the impact of Catch My Breath through the use of Results-Based Accountability™ to monitor specific performance measures. We will be monitoring How Much, How Well and/or Better Off Performance Measures. Our evaluation activities will be tracked in the Work Plan table, above.

### Sustainability Plan:

The following is our sustainability plan for Catch My Breath:

1. Catch My Breath is available for free.
2. Performance measures will be reported to Haywood County Schools administrators and school board members.
3. Anecdotal evaluation will be obtained from staff members to determine successes, challenges and lessons learned.

PM	SU	Number of students who complete the Catch My Breath curriculum.	-	-	-	-	-
PM	SU	Number of schools that implement the Catch My Breath curriculum.	-	-	-	-	-
P	SU	Offer Medication-Assisted Treatment (MAT) through Haywood County Health and Human Services Agency.	Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change

## What Is It?

Medication-Assisted Treatment (MAT) was identified by the Substance Use Prevention Alliance as an action that, when combined with other actions in our community, has a reasonable chance of making a difference in overdose rates in our community. This is an ongoing program in our community, with Haywood County Health and Human Services Agency (HHS) being a new provider of MAT.

Current MAT interventions are effective and MAT is the standard of care for treating opioid use disorders. In Haywood County, 10 organizations offer MAT, including HHS (NC Harm Reduction Coalition, 2020). The HHS provider prescribes Suboxone to eligible individuals.

The priority population/customers for the HHS MAT program are women being released from the Haywood County Detention Center. MAT aims to make a difference at the individual and organizational levels. Implementation will take place in the HHS public health services clinic.

This strategy addresses health disparities by serving individuals who are at increased risk of suffering from communicable diseases, dying prematurely, and who lack insurance coverage to receive substance use treatment.

### 2020 Update:

During the program's first year, over 20 individuals received MAT through the HHS (HHS, 2020). While the program initially served women, it has expanded to serve men as well. Each patient receives a naloxone kit (opioid overdose reversal medication) and medication lock box. They are also encouraged to schedule a counseling appointment through Meridian Behavioral Health Services (MBHS). The program is currently available at no cost due to grant funding through the Haywood Healthcare Foundation. Partnering organizations include the Haywood Healthcare Foundation, HHS, and MBHS.

Partners

Partners

The partners for MAT include:

Agency	Person	Role
<a href="#">Haywood Healthcare Foundation</a>	Marge Stiles	Support
<a href="#">Haywood County Health and Human Services Agency (HHSA)</a>	Dana Ashe	Lead
<a href="#">Haywood County Sheriff's Office</a>	Jeff Haynes	Support
<a href="#">NC Harm Reduction Coalition</a>	Becca Goldstein, Toni Holcombe, Michelle Blackmon, Gariann Yochym	Support, Represent Target Population
<a href="#">Meridian Behavioral Health Services</a>	Trevor Hermann	Collaborate

Work Plan

Activity	Resources Needed	Agency/Person Responsible	Target Completion Date
Secure funding to implement Mediation-Assisted Treatment	Staff time	Patrick Johnson/HHSA	November 2019
Make arrangements for follow-up counseling through a local treatment provider.	Staff time	Patrick Johnson/HHSA	January 2020
Acquire Naloxone for distribution to MAT patients	Staff time, medication	Emily Jenkins/HHSA	January 2020
Begin serving MAT patients	Staff time, funding	Emily Jenkins/HHSA	January 2020
Evaluate MAT program	Staff time	Patrick Johnson and Emily Jenkins/HHSA	Ongoing

Evaluation & Sustainability

**Evaluation Plan:**

We plan to evaluate the impact of Medication-Assisted Treatment (MAT) through the use of Results-Based Accountability™ to monitor specific performance measures. We will be monitoring How Much, How Well and/or Better Off Performance Measures. Our evaluation activities will be tracked in the Work Plan table, above.

**Sustainability Plan:**

The following is our sustainability plan for MAT:

- Sustainability Components:
  - We will monitor program performance by tracking the number of women who receive MAT. This will demonstrate both program success and need to funders.
  - On a monthly basis, program need will be demonstrated by tracking the number of emergency department visits due to opioid overdoses.





**P** **SU** Educate the community about trauma and Adverse Childhood Experiences (ACES).

Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change

### What Is It?

Educating the community about trauma and Adverse Childhood Experiences (ACES) was identified by the Substance Use Prevention Alliance (SUPA) as an action that, when combined with other actions in our community, has a reasonable chance of making a difference in substance use and mental health in our community. Our focus on trauma and ACES will include forming a Building Resilient Communities (BRC) group, helping organizations adopt a Community Resilience Plan and helping school staff to be trained about ACES. "BRC addresses upstream toxic effects of ACES and promotes an integrated, multi-pronged approach focusing on de-fragmenting childhealthcare delivery systems to build strong healthcare-community partnerships that develop common goals and shared work plans." This is a new program in our community.

The priority population/customers for education about trauma and ACES are school staff. The communication efforts include stakeholders. Stakeholders include local government officials and community members. This community education program aims to make a difference at both individual and organizational levels. Implementation will take place in schools and community organizations, such as faith communities and other non-profit agencies.

This strategy addresses health disparities by increasing awareness of the impact of ACES. Individuals with an ACES score of 4 or more are more likely to experience physical and mental health problems, including a substance use disorder (Burke Foundation, 2021).

#### 2020 Update:

- Resilience film screenings were not held due to COVID-19 safety concerns.
- Haywood Connect, the community's ACES and resilience collaborative group, met in a virtual environment for most of 2020. In May 2021, Haywood Connect offered a train-the-trainer session for its members, empowering the group to educate their community about ACES and resilience (Haywood Connect, 2020-21).

### Partners

The partners for education about trauma and ACES include:

Agency	Person	Role
<a href="#">Haywood Connect</a>	Lynn Carlson	Lead
<a href="#">Haywood County Schools</a>	Brandi Stephenson	Collaborate

### Work Plan

Activity	Resources Needed	Agency/Person Responsible	Target Completion Date
Discuss the program and conduct education with the Adverse Childhood Experiences (ACES) Collaborative.	Building Resilient Communities (BRC) toolkit	ACES Collaborative	February 2020
Speak with the School Health Advisory Committee about trauma-informed care.	BRC toolkit	ACES Collaborative	May 2020



Activity	Resources Needed	Agency/Person Responsible	Target Completion Date
Form a Building Resilient Communities (BRC) core group.	BRC toolkit	ACES Collaborative	September 2020
Develop a plan to show the Resilience movie throughout Haywood County and offer screening events.	Copy of film, facilities to host screening events	ACES Collaborative	September 2020
Form a BRC community team.	BRC toolkit, facility to host meetings	ACES Collaborative	January 2021
Develop the Community Resilience Plan.	BRC toolkit	ACES Collaborative	February 2021
Encourage community organizations to adopt the Community Resilience Plan.	BRC toolkit, Community Resilience Plan	ACES Collaborative	March 2021
Begin conducting evaluation of work plan tasks.	ACES Collaborative members and community organization leaders	ACES Collaborative	August 2021

## Evaluation & Sustainability

### Evaluation Plan:

We plan to evaluate the impact of trauma and Adverse Childhood Experiences (ACES) education through the use of Results-Based Accountability™ to monitor specific performance measures. We will be monitoring How Much, How Well and/or Better Off Performance Measures. Performance measures are: the number of community members and stakeholders attending screening events; number of community members who participate in a Building Resilient Communities (BRC) group, number of organizations who adopt the Community Resilience Plan and the number of school staff who complete ACES training sessions. Our 2018 Community Health Assessment phone survey collected ACES data from adults in Haywood County. We will communicate with partners at the WNC Health Network to express the importance of this data and our desire to see follow-up data in 2021.

### Sustainability Plan:

The following is our sustainability plan for trauma and ACES education:

- Sustainability Component:
  - Several resources, such as the Resilience film and BRC toolkit, are available to our community at no cost. This will assist our community in offering education on a long-term basis.
  - Training school staff will help Haywood County Schools achieve the goal of becoming a trauma-informed school district.
  - Sustainability will be achieved by organizations adopting the Community Resilience Plan, as this will become part of organizational procedure.
  - By assessing program performance measures, we will be able to determine the efficacy and successes of the program. This will allow us to communicate with stakeholders and continue to build community support.

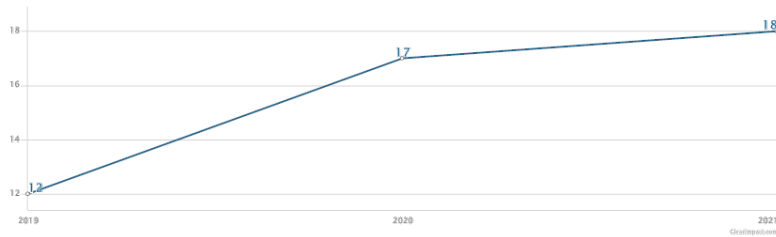
PM SU Number of Resilience Film screening events held in the community 2019 3 - → 0 0% →

Data Source: Haywood County Health and Human Services Agency, 2019



PM SU Number of members who participate in the ACES Collaborative group 2021 18 - ↗ 2 50% ↗

Data Source: Haywood Connect, 2019-2021



2020	17	—	↗ 1	42% ↗
2019	12	—	→ 0	0% →

**PM** **SU** Number of community organizations who adopt the Community Resilience Plan

—	—	—	—	—
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**PM** **SU** Number of school staff who complete training sessions about ACEs

2019	30	—	→ 0	0% →
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Data Source: Haywood County Schools, 2019



**P** **SU** Determine barriers to receiving mental health and substance use treatment.

Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change

## What Is It?

Determining the barriers to receiving mental health treatment was identified by the Substance Use Prevention Alliance as an action that, when combined with other actions in our community, has a reasonable chance of making a difference in the number of individuals not receiving mental health care in our community. This is a new program in our community.

The priority population/customers for determining mental health treatment barriers are individuals or family members who've had trouble accessing treatment. Determining treatment barriers aims to make a difference at the individual and organizational levels. Implementation will take place in community settings, such treatment centers, soup kitchens, churches and the local homeless shelter.

This strategy addresses disparities by identifying gaps in receiving mental health and substance use treatment.

### 2020 Update:

The Substance Use Prevention Alliance includes an active work group that addresses barriers to treatment and recovery. Before COVID-19 began impacting in-person activities, several focus groups gathered input from those with lived experience (Haywood Pathways Center, 2020). A virtual group was later held with treatment providers and other community organizations (Haywood County Health and Human Services Agency, 2020). Partnering organizations included Haywood Pathways Center and members of Healthy Haywood's Substance Use Prevention Alliance.

## Partners

The partners for this determining substance use and mental health treatment barriers include:

Agency	Person	Role
<a href="#">Substance Use Prevention Alliance (Barriers to Care Work Group)</a>	Work Group Members	Lead
<a href="#">NC Harm Reduction Coalition</a>	Gariann Yochym	Collaborate
<a href="#">Appalachian Community Services of Western North Carolina</a>	Tabatha Brafford	Collaborate
<a href="#">Haywood Pathways Center</a>	Mandy Haithcox	Collaborate

Agency	Person	Role
<a href="#">The Open Door Ministries</a>	Bill Guy	Collaborate
Vaya Health	Shelly Foreman	Collaborate

## Work Plan

Activity	Resources Needed	Agency/Person Responsible	Target Completion Date
Provide the existing list of local treatment resources	Copies of treatment sheet	North Carolina Harm Reduction Coalition	January 2020
Host focus groups to receive feedback about barriers to care.	Organizations willing to host, supplies for note taking during groups	Substance Use Prevention Alliance/Barriers to Care work group members	April 2020
Evaluate feedback provided by focus groups	Feedback from focus groups	Substance Use Prevention Alliance/Barriers to Care work group members	June 2020
Speak with partners who provide treatment to determine next steps	Meetings with treatment providers; feedback from focus groups.	Substance Use Prevention Alliance/Barriers to Care work group members	October 2020

## Evaluation & Sustainability

### Evaluation Plan:

We plan to evaluate the impact of determining barriers to care through the use of Results-Based Accountability™ to monitor specific performance measures. We will be monitoring How Much, How Well and/or Better Off Performance Measures. Our evaluation activities will be tracked in the Work Plan table, above.

### Sustainability Plan:

The following is our sustainability plan for determining barriers to receiving mental health and substance use treatment:

- Sustainability Component:
  - Lessons learned from focus groups will be shared with local treatment providers and other community-based organizations. This will assist them in addressing barriers to receiving treatment.

PM SU Number of individuals participating in barriers-to-treatment focus groups 2020 56 - → 0 0% →

Data Source: Haywood Pathways Center and Haywood County Health and Human Services Agency, 2020



ClearImpact.com

PM SU Number of barriers-to-treatment focus groups held 2020 7 - → 0 0% →



**P** **SU** Conduct community education about overdose prevention, symptoms and reversal.

Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change

## What Is It?

Conducting community education about overdose was identified by the Substance Use Prevention Alliance as an action that, when combined with other actions in our community, has a reasonable chance of making a difference in unintentional medication and drug overdose in our community. This is a new program in our community.

The priority population/customers for conducting community education about overdose are individuals at risk of overdose and their loved ones, and community education about overdose aims to make a difference at the individual level. Implementation will take place through treatment providers, the homeless shelters and soup kitchens, family support groups and mass media.

This strategy addresses health disparities by educating individuals who are more likely to experience or witness an overdose.

### 2020 Update:

North Carolina Harm Reduction Coalition (NCHRC) continued to prioritize overdose prevention education and trained over 200 individuals in 2020 (NCHRC, 2020).

## Partners

The partners for conducting overdose education include:

Agency	Person	Role
<a href="#">Substance Use Prevention Alliance (Overdose Prevention and Harm Reduction Work Group)</a>	Overdose Prevention and Harm Reduction Work Group Members	Lead
<a href="#">NC Harm Reduction Coalition</a>	Gariann Yochym and Jesse-lee Dunlap	Collaborate
<a href="#">Open Door Soup Kitchen</a>	Bill Guy	Collaborate
<a href="#">The Community Kitchen</a>	Allison Jennings	Collaborate
<a href="#">Haywood Pathways Center</a>	Mandy Haithcox	Collaborate
Drugs in Our Midst (Family Support Groups)	Jean Parris	Partner
<a href="#">Appalachian Community Services</a>	Tabatha Brafford	Collaborate
<a href="#">Behavioral Health Group</a>	Jim Casey	Collaborate
<a href="#">Groups Recover Together</a>	Joel Misler/Aubrey Masters	Collaborate
<a href="#">Meridian Behavioral Health Services</a>	Amy Wilson	Collaborate
<a href="#">Hazelwood Healthcare</a>	Matt Holmes	Collaborate

## Work Plan

Activity	Resources Needed	Agency/Person Responsible	Target Completion Date
Obtain overdose prevention training packet	Permission to use training packet, an electronic version of the packet and partners able to print copies.	NC Harm Reduction Coalition	October 2019
Contact community partners to discuss opportunity	Staff time	Substance Use Prevention Alliance (Harm Reduction and Overdose Prevention Work Group)	December 2019
Schedule educational sessions and provide training packets to those conducting education	Staff time; partners able to print copies	Substance Use Prevention Alliance (Harm Reduction and Overdose Prevention Work Group)	January 2019
Begin conducting educational sessions	Staff time; meeting space	Substance Use Prevention Alliance (Harm Reduction and Overdose Prevention Work Group)	March 2019
Begin evaluating performance measures	Staff time, performance measure data	Substance Use Prevention Alliance (Harm Reduction and Overdose Prevention Work Group)	May 2020

## Evaluation & Sustainability

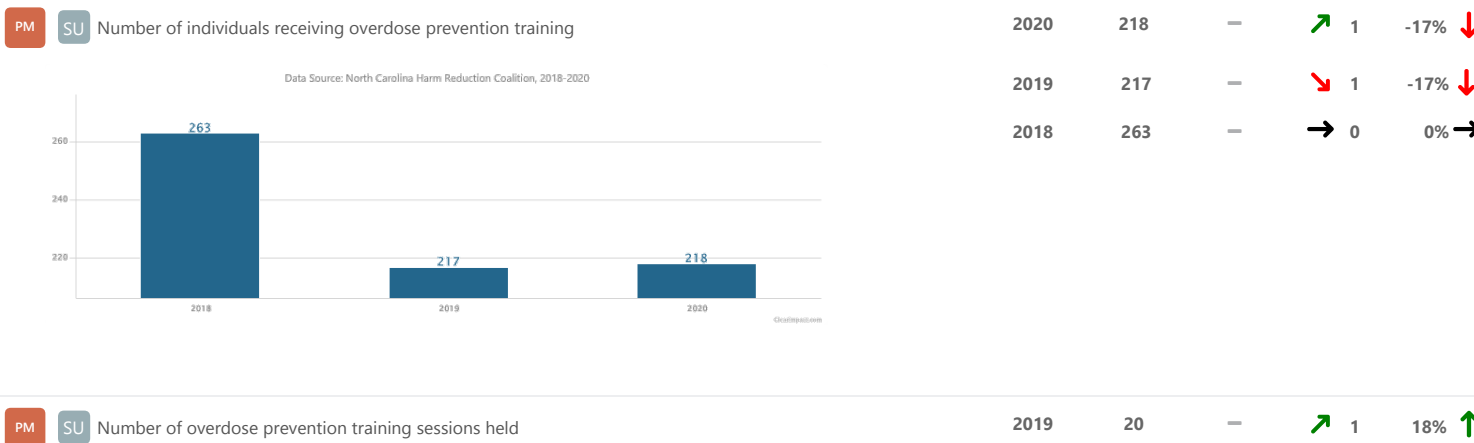
### Evaluation Plan:

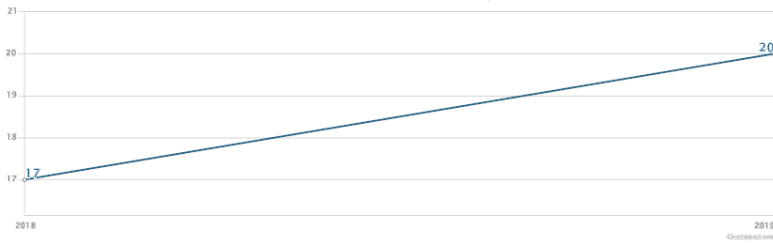
We plan to evaluate the impact of conducting community overdose education through the use of Results-Based Accountability™ to monitor specific performance measures. We will be monitoring How Much, How Well and/or Better Off Performance Measures. Our evaluation activities will be tracked in the Work Plan table, above.

### Sustainability Plan:

The following is our sustainability plan for community overdose education:

- Sustainability Components:
  - This is a low-cost program, as the training packet has no cost. Minimal costs will be incurred when printing copies.
  - Tracking performance measures will demonstrate program value to potential funders.
  - The Substance Use Prevention Alliance is comprised of champions who are dedicated to promoting and providing overdose education.





**P** **SU** Coordinate presentations by first responders and harm reduction staff for the Substance Use Prevention Alliance.

Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
	17	0	→	0%

### What Is It?

Conducting presentations by first responders and harm reduction staff was identified by the Substance Use Prevention Alliance (SUPA) as an action that, when combined with other actions in our community, has a reasonable chance of making a difference in unintentional medication and drug overdose in our community. This is a new program in our community.

### 2020 Update:

In early 2020, the NC Harm Reduction Coalition provided a presentation to SUPA members. The presentation focused on a comprehensive, solution-focused response to concerns about syringe litter (Haywood County Health and Human Services Agency, 2020). Additional education was provided by Haywood County Emergency Services (HCES) in May 2021. This session provided a valuable opportunity to communicate with HCES and discuss partnership opportunities (HHSA, 2021).

### Partners

The partners for the educational presentations include:

Agency	Person	Role
<a href="#">Haywood County Sheriff's Office</a>	Designated HCSO staff	Partner
<a href="#">Haywood County Emergency Medical Services</a>	Greg Shuping	Partner
<a href="#">Substance Use Prevention Alliance (Overdose Prevention and Harm Reduction Work Group)</a>	Overdose Prevention Work Group Members	Lead
<a href="#">NC Harm Reduction Coalition</a>	Gariann Yochym	Partner

### Work Plan

Activity	Resources Needed	Agency/Person Responsible	Target Completion Date
Contact Haywood County Sheriff's Office (HCSO) to schedule date	Potential dates; meeting space	Lindsay Regner	October 2019
Host presentation by HCSO	Meeting space; staff time	Overdose Prevention and Harm Reduction Work Group Members	January 2020
Evaluate presentation by HCSO	Meeting space; staff time; evaluation forms	SUPA members	January 2020
Contact NC Harm Reduction Coalition (NCHRC) to schedule date	Potential dates; meeting space	Gariann Yochym	October 2019
Hold presentation by NCHRC	Meeting space; staff time	Overdose Prevention and Harm Reduction Work Group Members	March 2020
Evaluate presentation by NCHRC	Meeting space; staff time; evaluation forms	SUPA members	March 2020
Collect numbers for performance measures and determine next steps	Meeting space; staff time	SUPA members	June 2020

**Evaluation Plan:**

We plan to evaluate the impact of harm reduction and first responder presentations through the use of Results-Based Accountability™ to monitor specific performance measures. We will be monitoring How Much, How Well and/or Better Off Performance Measures. Our evaluation activities will be tracked in the Work Plan table, above. We will track the number of individuals who receive education. The impact of this education will also be assessed following written evaluations after each presentation.

**Sustainability Plan:**

The following is our sustainability plan for presentations by harm reduction staff and first responders:

- Sustainability Component:
  - The NC Harm Reduction Coalition (NCHRC) is a long-time partner that provides statewide assistance.
  - Harm Reduction practices, such as Naloxone administration and syringe disposal boxes, are used by first responders as an ongoing practice.
  - NCHRC and Haywood County Health and Human Services both continue to pursue ongoing funding to support harm reduction practices. Existing funding includes a grant focused on post-overdose support and hepatitis testing and treatment.
  - The NCHRC has a strong working relationship with the Haywood Regional Medical Center emergency department, allowing post-overdose referrals to be received.
  - NCHRC has spoken on numerous occasions to the Board of County Commissioners, who has expressed support for the work being done.

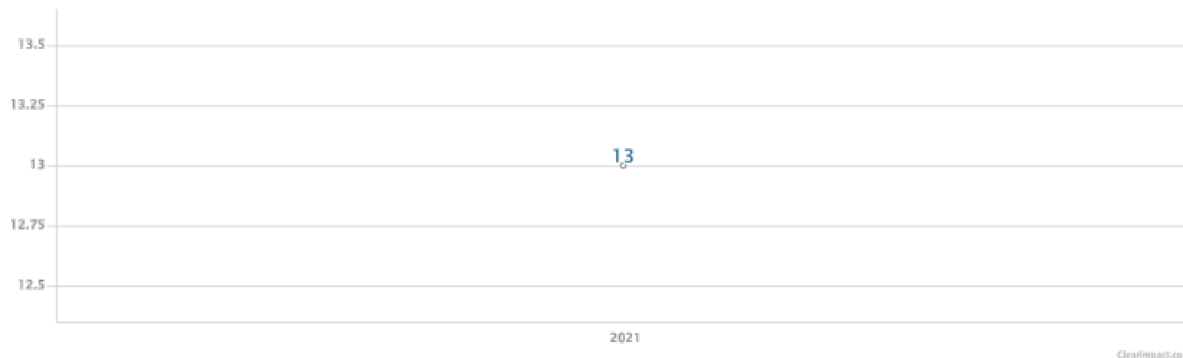
PM SU Number of community partners who receive education about harm reduction practices 2020 18 - → 0 0% →

Data Source: Haywood County Health and Human Services Agency, 2020



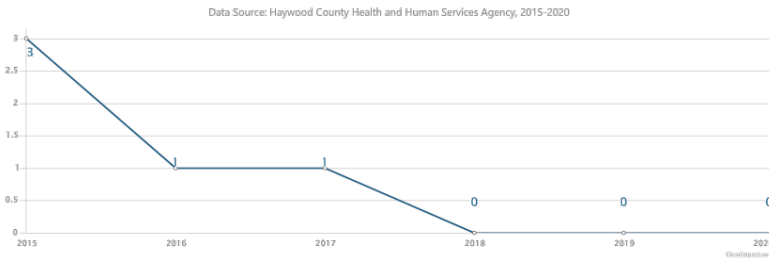
PM SU Number of community partners who received education about post-overdose response 2021 13 - → 0 0% →

Data Source: Haywood County Health and Human Services Agency, 2019



I Number of child deaths related to unsafe sleep conditions

2020	0	—	→ 2	-67% ↓
2019	0	—	→ 1	-67% ↓
2018	0	—	↘ 1	-67% ↓
2017	1	—	→ 1	-67% ↓
2016	1	—	↘ 1	-67% ↓
2015	3	—	→ 0	0% →



### Story Behind the Indicator

The "Story Behind the Curve" helps us understand why the data on child deaths due to unsafe sleep is the way that it is in our community. When we understand the root causes of our community problems, we have a better chance of finding the right solutions, together.

**What's Helping?** *These are the positive forces at work in our community and beyond that influence this issue in our community.*

- Haywood County Health and Human Services Agency (HHSA) distributes pack and plays to families with an identified need.
- HHSA has a breastfeeding peer counselor program. Lactation support is also provided through Haywood Regional Medical Center and Haywood Pediatrics.

**What's Hurting?** *These are the negative forces at work in our community and beyond that influence this issue in our community.*

- In Haywood County, 17.7% of births were to mothers who smoked during pregnancy (NC Center for Health Statistics, 2017).
- Over 16% of people in the county live below the poverty level. The number increases dramatically to 45% for children under five (US Census Bureau, 2018).
- Lack of awareness and education (WNC Health Network-WNCHN, 2018)

### Partners With A Role To Play

The partners for promoting safe sleep include:

Agency	Person	Role
<a href="#">Haywood Regional Medical Center</a>	Rod Harkleroad	Collaborate
<a href="#">Haywood Pediatrics</a>	Kasey Valentine	Collaborate
<a href="#">Mountain Pediatric Group</a>	Garret Nieswonger	Collaborate
Haywood Healthcare Foundation	Marge Stiles	Support
<a href="#">Kiwanis Club of Waynesville</a>	Kiwanis Club Officers	Support
<a href="#">Haywood County Health and Human Services Agency</a>	Patrick Johnson	Lead
Great by Eight Early Childhood Group	Murat Yazan	Support

### Strategies Considered & Process

The following actions have been identified by our Great by Eight and community members as ideas for what can work for our community to make a difference on unsafe sleep conditions.

**Actions and Approaches Identified by Our Partners** *These are actions and approaches that our partners think can make a difference on unsafe sleep conditions.*



- Safe spaces to sleep in home and child care
- Safe sleep education
- Funding through church rummage sales

**What is Currently Working in Our Community** *These are actions and approaches that are currently in place in our community to make a difference on unsafe sleep conditions.*

- Pack and play distribution through Haywood County Health and Human Services Agency (HHS).
- Infant sleep sack distribution through the HHS.

**Evidence-Based Strategies** *These are actions and approaches that have been shown to make a difference on child deaths due to unsafe sleep conditions.*

Name of Strategy Reviewed	Level of Intervention
An Evidence-Based Infant Safe Sleep Program to Reduce Sudden Unexplained Infant Deaths	Organizational
Teaching Newborn Safe Sleep	Organizational and Individual
Safe Sleep Recommendations from the American Academy of Pediatrics	Individual

**What Community Members Most Affected by Child Deaths Due to Unsafe Sleep Conditions Say** *These are the actions and approaches recommended by members of our community who are most affected by child deaths:*

- Find appropriate safe sleep space resources like Pack and Play
- Safe sleep education
- Partnering with the hospital and health department to identify the number of yearly live births in the community

P	Promote safe sleep in home and child care.	Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
PM	Number of pack and plays provided to families	2020	10	—	↓ 1	150% ↑
		2019	27	—	↗ 3	575% ↑
		2018	23	—	↗ 2	475% ↑
		2017	21	—	↗ 1	425% ↑
		2016	4	—	→ 0	0% →

Data Source: Haywood County Health and Human Services Agency, 2016-2019

P	Pursue Project CARA, a best practices clinic for pregnant women with Substance Use Disorder.	Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change

**What Is It?**

A best practices clinic for pregnant women with Substance Use Disorder (SUD) was identified by the Perinatal Substance Use Collaborative as an action, that when combined with other actions in our community, has a reasonable chance of making a difference in perinatal substance use in our community. This is a new program in our community.

The priority population/customers for the best practices clinic are pregnant women with SUD, and the clinic aims to make a difference at the individual and environmental levels. Implementation will take place in a clinical setting.

**2020 Update:**

The Perinatal Substance Use Collaborative continued discussing the possibility of bringing a Project CARA satellite clinic to Haywood County. Project CARA serves pregnant women with SUD in the westernmost counties. The clinic would be a satellite location to serve Haywood County residents. The Project CARA site is 30 minutes away, which is challenging for women without adequate transportation.

## Partners

The partners for the best practices clinic for women with Substance Use Disorder include:

Agency	Person	Role
Perinatal Substance Exposure Collaborative	Collaborative Members	Collaborate; Represent Target Population
Project CARA	MAHEC Maternal-Fetal Medicine Specialists	Lead

## Work Plan

Activity Resources Needed Agency/Person Responsible Target Completion Date

**PM** Number of pregnant women served by the best practices clinic

**P** Promote NC-211 as a resource list for families.

Most Recent Period Current Actual Value Current Target Value Current Trend Baseline % Change

## What Is It?

Promoting 2-1-1 as a resource list for families was identified by the Great by Eight early childhood group as an action that, when combined with other actions in our community, has a reasonable chance of making a difference in perinatal and early child health in our community. This is an ongoing program in our community that requires additional promotion in order to fully assist Haywood County residents. 2-1-1 is an effective program that assisted callers over 2400 times from 2015-2019.

The priority population/customers for the 2-1-1 resource list are individuals in need of resources, and the 2-1-1 resource list aims to make a difference at the individual level. Implementation will take place through a free telephone and online assistance service.

This strategy addresses health disparities by serving individuals who experience resource gaps, including physical health needs and social determinants of health.

### 2020 Update:

NC-211 was heavily utilized by Haywood County residents in 2020. Call volume increased by nearly 70% from the previous year (United Way of Asheville and Buncombe County, 2015-2020).

## Partners

The partners for promoting the 2-1-1 resource list include:

Agency	Person	Role
Great by Eight Early Childhood Group	Group Members	Collaborate
2-1-1 Asheville Call Center	Amanda Bauman	Lead

## Work Plan

Activity Resources Needed Agency/Person Responsible Target Completion Date

## Evaluation & Sustainability

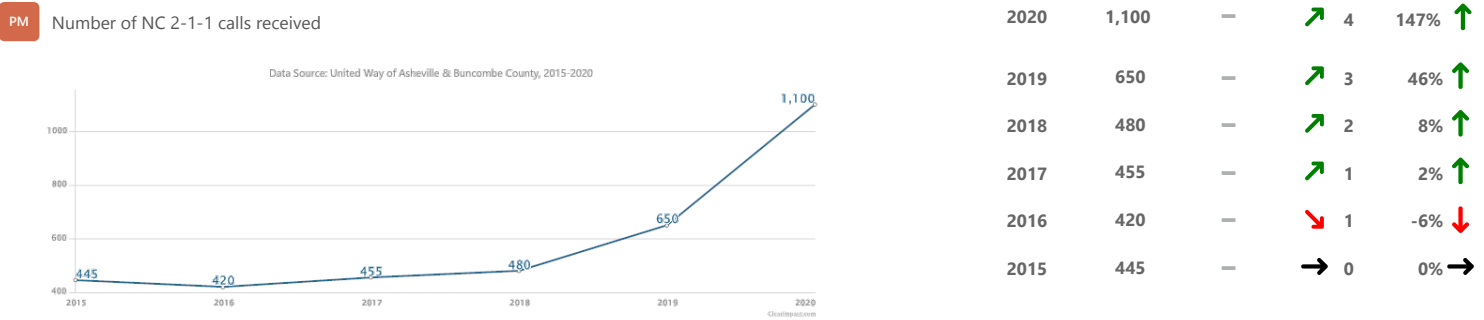
**Evaluation Plan:**

We plan to evaluate the impact of the 2-1-1 resource list through the use of Results-Based Accountability™ to monitor specific performance measures. We will be monitoring How Much, How Well and/or Better Off Performance Measures.

**Sustainability Plan:**

The following is our sustainability plan for promoting the 2-1-1 resource list:

- Sustainability Components:
  - NC 2-1-1 is a free resource and promotion of it will have little or no cost.
  - The number of calls from Haywood County residents are continuously tracked by United Way. Haywood County Health and Human Services Agency will request numbers from United Way in order to demonstrate program need to stakeholders.



**Chronic Disease Prevention- Long-Term CHIP**

<b>R</b>	<b>CD</b> 3) Helping Haywood residents live well and live long by promoting physical activity, healthy eating, and quality healthcare.	Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
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**Why It Matters?**

Regular physical activity can improve the health and quality of life of Americans of all ages, regardless of the presence of a chronic disease or disability. Among adults and older adults, physical activity can lower the risk of early death, coronary heart disease, stroke, high blood pressure, type 2 diabetes, breast and colon cancer, falls, and depression. Among children and adolescents, physical activity can improve bone health, improve cardio-respiratory and muscular fitness, decrease levels of body fat, and reduce symptoms of depression. For people who are inactive, even small increases in physical activity are associated with health benefits.

Personal, social, economic, and environmental factors all play a role in physical activity levels among youth, adults, and older adults. Factors **positively** associated with adult physical activity include post-secondary education, higher income, enjoyment of exercise, expectation of benefits, belief in ability to exercise (self-efficacy), history of activity in adulthood, social support from peers, family, or spouse, access to and satisfaction with facilities, enjoyable scenery, and safe neighborhoods. Factors **negatively** associated with adult physical activity include advancing age, low income, lack of time, low motivation, rural residency, perception of great effort needed for exercise, overweight or obesity, perception of poor health, and being disabled. Older adults may have additional factors that keep them from being physically active, including lack of social support, lack of transportation to facilities, fear of injury, and cost of programs (DHHS, 2010)

In addition, strong science exists supporting the health benefits of eating a healthful diet and maintaining a healthy body weight. Diet and body weight are related to health status. Good nutrition is important to the growth and development of children. A healthful diet also helps Americans reduce their risks for many health conditions, including overweight and obesity, malnutrition, iron-deficiency anemia, heart disease, high blood pressure, dyslipidemia (poor lipid profiles), type 2 diabetes, osteoporosis, oral disease, constipation, diverticular disease, and some cancers. Efforts to change diet and weight should address individual behaviors, as well as the policies and environments that support these behaviors in settings such as schools, work-sites, healthcare organizations, and communities.

Social factors thought to influence diet include knowledge and attitudes, skills, social support, societal and cultural norms, food and agricultural policies, food assistance program, and economic price systems. The places where people eat appear to influence their diet. For example, foods eaten away from home often have more calories and are of lower nutritional quality than foods prepared at home. Marketing also influences people's—particularly children's—food choices (DHHS, 2010).

Over one-half of key informants (community or business leaders, physicians, other health providers, public health representatives and social service providers) ranked nutrition, physical activity and weight as a major issue. They also shared comments such as: "We have populations that are not able to afford fresh produce and barely make enough to cover their food costs for the month. Need to work on properly educating the public on malnutrition and ensuring they know how to access, afford, and utilize healthy foods." Specific populations at risk include African American and Hispanic individuals, as well as individuals experiencing poverty (WNC Health Network-WNCHN, 2018).

Health indicators in our County show the following trend:

- Only 30% of respondents reported obtaining leisure-time physical activity in the past month. This was an increase from 24% in 2015 (WNC Health Network-WNCHN, 2018).
- Nearly 13% of adults reported receiving a diagnosis of pre-diabetes, a slight increase from 2015 (WNC Health Network-WNCHN, 2018).
- Fewer adults reported taking action to control high blood pressure: 93.3% in 2015 vs 92% in 2018 (WNC Health Network-WNCHN, 2018).

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## Alignment

Chronic disease prevention and the related result "helping Haywood residents live well and live long by promoting physical activity, healthy eating and quality healthcare" are aligned with the following Healthy NC 2020 Focus Areas/ Objectives.

### **Physical Activity and Nutrition/Chronic Disease**

- Increase the percentage of high school students who are neither overweight nor obese.
- Increase the percentage of adults who report they consume fruits and vegetables five or more times per day.
- Increase the percentage of adults getting the recommended amount of physical activity.
- Reduce the cardiovascular disease mortality rate.
- Decrease the percentage of adults with diabetes.

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## Experience and Importance

### **How would we experience "helping Haywood residents live well and live long by promoting physical activity, healthy eating and quality healthcare" in our community?**

Following the completion of the 2018 Haywood County Community Health Assessment (CHA), the Wellness Action Group (WAG) completed "Getting to Strategies." This is a road map for health priority work groups. The WAG discussed answers to the following questions:

- What are the overall quality of life conditions (results) we want for the people who live in our community?
- What would these conditions (results) look like if we could see them?
- How can we measure these conditions?
- How are we doing on the most important of these measures?
- Who are the partners with a role to play?
- What works to do better?
- What do we propose to do?

### **Quality of Life Conditions (results):**

- Healthy, active, engaged and happy people who are thriving and working to build better lives and a better community
- We embrace the vibrant potential of this area

- Inclusivity and accessibility for working community members, which helps the whole
- Programs are available with no strings attached
- Awareness of a healthy diet and sharing information with all
- People are more empowered to live to be healthy; a greater ability to maintain a healthy diet
- Awareness of available opportunities
- Healthier food environment: healthier restaurants and less fast food
- Improved accessibility for healthy diet and food security
- A safe community
- Everyone can access good health

### **Clinical Factors**

- Medicaid expansion and health care for all
- Focus on prevention of heart disease and diabetes
- More clinical lifestyle change programs, such as Walk with a Doc, including better promotion and referrals

### **Health Behaviors**

- More accessible and free fitness programs: e.g. Girls on the Run (scholarships available), Active Routes to School and gyms; evening and weekend options available. These programs may include a revised Healthy Haywood Fitness Challenge and community walking groups.
- Improved promotion and marketing of existing opportunities and resources
- Improved education about healthy habits: offer nutrition education through social media and educate others about nutrition literacy (reading labels and understanding ingredients)
- People take advantage of programs like Double Up Food Bucks and MANNA produce distribution.
- Culturally appropriate recipe modifications and Meatless Mondays
- Improved education and awareness of nutritious foods, including how to shop and eat cheaply
- Heart disease prevention programs
- Fewer cases of illness and death from preventable chronic disease
- Lower obesity rates, including among children

### **Social and Economic Factors**

- Improved food security; Fruit and veggie access without restriction
  - Existing programs include: Double Up Food Bucks, Haywood Gleaners, SNAP, WIC, Cooperative Extension
- Improved partnering and delivery of food
- Cooking education is available
- Potential pickup and delivery/distribution of restaurant food
- Programs raising funds to support other programs
- Healthier workplaces
- More intergenerational interaction and community support, such as seniors engaged in youth programs
- Less crime
- Better paying and living wage jobs

### **Physical Environment**

- Improved access to recreation and physical activity, including group fitness opportunities
- Plenty of sidewalks and other walkable spaces
- Story walk expansion (involves family, physical activity, literacy).
- Gardens at all schools and pre-kindergarten; more church gardens

- Safe, adequate, affordable housing
- Adequate, available, more convenient public transportation

### Health Outcomes

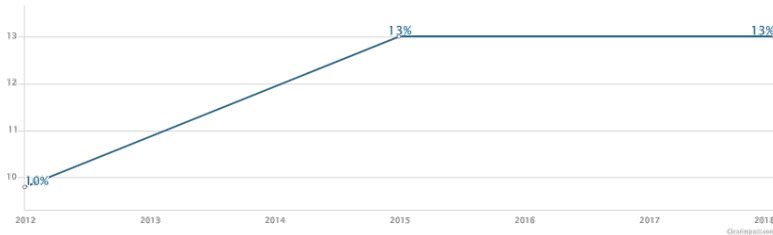
- Less preventable chronic disease
- Less death from preventable chronic disease
- Lower obesity rates/childhood obesity

### What information led to the selection of this health issue and related result?

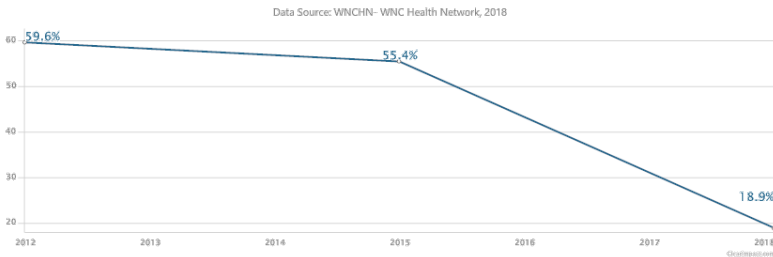
In addition to the above focus areas, the WAG discussed how Haywood County is doing on the most important of these health measures. This information was also reviewed as part of the prioritization process during the CHA. The group discussed the percentages of individuals who:

- Are uninsured (adults)
- Have access to ongoing care (adults)
- Meet recommended physical activity levels (adults)
- Have not had any leisure-time activity in the past month (adults)
- Are limited in activities (primarily due to back/neck or mental health/depression problems) (adults)
- Who eat the recommended amounts of fruits and vegetables (adults)
- Use tobacco (cigarettes, smokeless and vaping) (adults)
- Are food insecure (adults)
- Receive free and reduced lunch (children)
- Usually get the support they need (adults)
- Also discussed was the average gross weekly wage, which is far below the state average

I	CD	Percentage of adults diagnosed with pre-diabetes	2018	13%	—	→	1	33%	↑
			2015	13%	—	↗	1	33%	↑
			2012	10%	—	→	0	0%	→
			Data Source: WNCNH- WNC Health Network, 2018						



I	CD	Percentage of adults meeting physical activity recommendations in Haywood County	2018	18.9%	—	↘	2	-68%	↓
			2015	55.4%	—	↘	1	-7%	↓
			2012	59.6%	—	→	0	0%	→
			Data Source: WNCNH- WNC Health Network, 2018						



I	CD	Percentage of adults experiencing food insecurity	2018	23%	—	→	0	0%	→
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P	CD	Implement a community wellness challenge, Haywood 4 Good.	Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
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What Is It?

What Is It:

Organizing a community wellness challenge was identified by the Wellness Action Group (WAG) as an action, that when combined with other actions in our community, that has a reasonable chance of making a difference in adult physical activity rates in our community. The program has been piloted in neighboring counties, including Swain County, whose program has received Institutional Review Board approval. This is a new program in our community.

The priority population/customers for the community wellness challenge are physically inactive adults in Haywood County, and the wellness challenge aims to make a difference at the individual level. Implementation will take place in wellness-related settings such as parks, trails, neighborhoods, homes, and at community events and organizations.

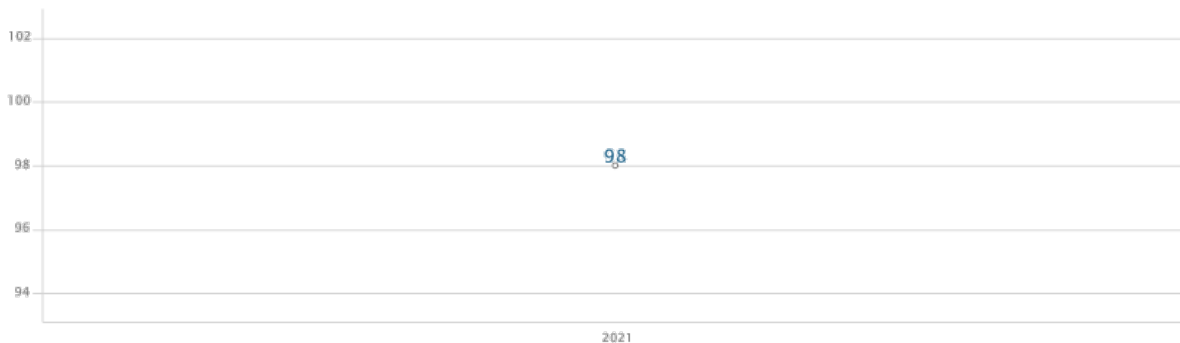
**2020 Update:**

Due to COVID-19 concerns, the Haywood 4 Good community wellness program transitioned to a virtual format. The program launched on January 11, 2021. Approximately 100 individuals enrolled in the first round (Harris Regional Hospital, 2021). The six-month long recurring program features three to four challenges monthly. Challenges focus on physical, mental, emotional, and spiritual well-being. They feature names such as Spark Joy (decluttering), Limber Up (stretching), Cabin Fever (physical activity), and Sweeter Life (reducing or eliminating added sugar). Haywood 4 Good is sponsored by Haywood Regional Medical Center and Blue Cross and Blue Shield of North Carolina provided sponsorships for the program (Haywood County Health and Human Services Agency, 2021).



PM CD Number of registered participants in the community wellness program 2021 98 - → 0 0% →

Data Source: Harris Regional Hospital, 2021



ClearImpact.com

P CD Develop a comprehensive food resource guide for Haywood County.

Most Recent Period Current Actual Value Current Target Value Current Trend Baseline % Change

What Is It?

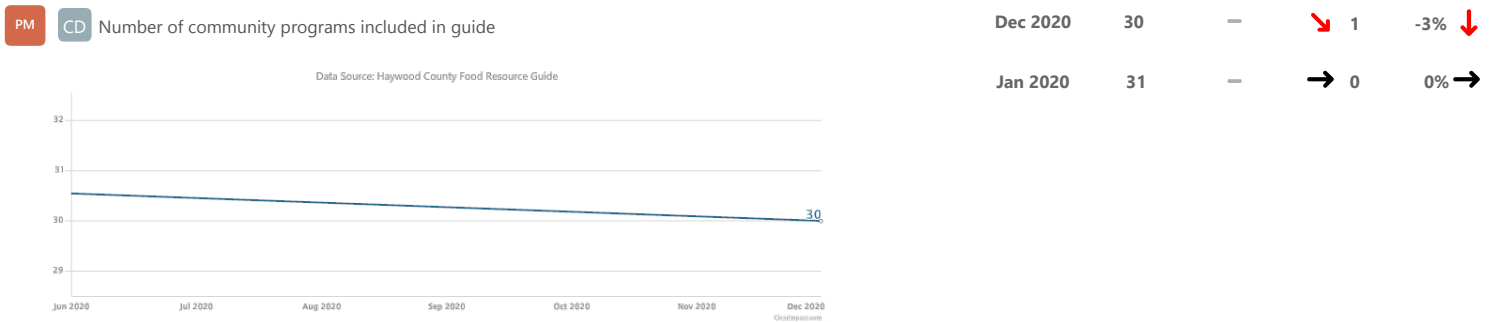
Developing a comprehensive food resource guide was identified by the Wellness Action Group (WAG) as an action, that when combined with other actions in our community, that has a reasonable chance of making a difference in food insecurity in our community. This is a new program in our community.

The priority population/customers for the food resource guide are individuals experiencing food insecurity and the community programs that serve them, and the food resource guide aims to make a difference at the individual level. Implementation, which focuses on distribution of this guide, will take place in food pantry, public health, medical and non-profit settings.

This strategy addresses health disparities by offering a tool to the nearly 1/5 of adults in Haywood County experiencing food insecurity (WNC Health Network-WNCHN, 2018).

**2020 Update:**

The guide developed in 2019 was simplified to address the food insecurity needs that increased during the COVID-19 pandemic. The Haywood County Feeding Coordinator and local food service providers ensured that the guide remained up-to-date. Food providers currently meet monthly and the guide continues to be revised weekly. It is available in both English and Spanish. In addition to food pantries, the guide also features free meals for children and seniors, as well as a section of other relevant resources (Haywood County Health and Human Services Agency, 2020-21).



P	CD	Offer National Diabetes Prevention Program classes.	Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
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**What Is It?**

The National Diabetes Prevention Program (DPP) was identified as an action that, when combined with other actions in our community, has a reasonable chance of making a difference in the adult pre-diabetes rate our community. This is an ongoing program in our community, which began in the spring of 2016. Thanks to a grant administered by NC State University, this one-year program is now offered at no cost and provides fitness and nutrition-related incentives. The program also provides gas cards and child care if participants identify these as barriers.

The audience for the DPP are individuals in Haywood County at risk for developing type 2 diabetes with a priority placed on vulnerable populations, such as African Americans, American Indians, and the less educated and lower-income generating populations. The program aims to make a difference at the individual/interpersonal behavior level. This CDC-developed lifestyle change program has been proven effective in preventing or delaying the onset of type 2 diabetes. Implementation will continue to take place at the local health department.

This strategy addresses health disparities. According to Healthy North Carolina 2020\*,

- African Americans are nearly twice as likely to have diabetes, compared with whites (15.6% versus 8.4% in 2009).
- Compared with whites, American Indians are more likely to have diabetes (11.7% versus 8.4% in 2009).
- Individuals with less education and with lower incomes are also more likely to have diabetes (2009).

\* Source: North Carolina Institute of Medicine. *Healthy North Carolina 2020: A Better State of Health*. Morrisville, NC: North Carolina Institute of Medicine; 2011.

**2020 Update:**

A Diabetes Prevention Program class began in September 2019 and concluded in August 2020 with six participants. In spring 2020, the class transitioned from in-person to conference call format. While the class experienced some initial attrition, no additional participants were lost due to the virtual format. The yearlong class had a retention rate of 40%. An additional class began in November 2020 with six participants. This class, which will conclude in October 2021, has a retention rate of 83%. The November class includes several individuals who are auditing the class (Haywood County Health and Human Services Agency, 2019-21).



## Partners

The partners for the National Diabetes Prevention Program include:

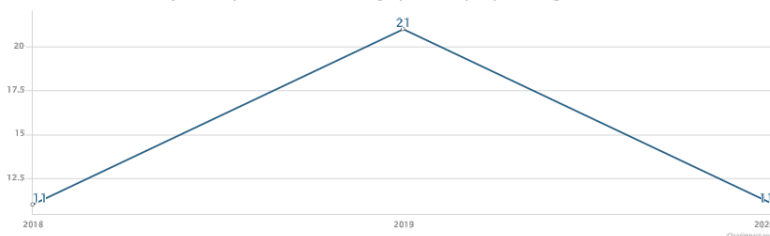
Agency	Person	Role
<a href="#">Haywood County Health and Human Services Agency</a>	Lauren Wood, Megan Hauser	Lead
<a href="#">Blue Ridge Health</a>	Health Care Providers	Support
<a href="#">Haywood Regional Medical Center</a>	Health Care Providers	Support
<a href="#">Midway Medical Center</a>	Health Care Providers	Support
<a href="#">NC State University</a>	Corinne Goudreau	Grant administration
<a href="#">MountainWise Public Health Partnership</a>	Shaina Clark	Support

## Work Plan

Activity	Resources Needed	Agency/Person Responsible	Target Completion Date
Promotion to doctors' offices	Program flyers; referral forms; provider handouts; staff time	Haywood Health and Human Services Agency/ Jeanine Harris, Lauren Wood, and Megan Hauser	March 2020
Promotion to general public	Newspaper article; printed flyers; staff time	Haywood Health and Human Services Agency/ Jeanine Harris, Lauren Wood, and Megan Hauser	March 2020
Bi-annual data reporting and evaluation of performance measures	NC Lifestyle Change Database; reporting templates from NC State University grant administrators; CDC evaluators; HHSA staff time; payment for Lifestyle Change Database subscription; performance measure data	Haywood Health and Human Services Agency/ Lauren Wood and Megan Hauser	November 2019, May 2020 (every November and May)

**PM** **CD** Number of new and returning participants enrolled in the 12-month Diabetes Prevention Program **2020** **11** **-** **↓** **1** **0%** **→**

Data Source: Haywood County Health and Human Services Agency, 2018-2020 (participants auditing class have been excluded)

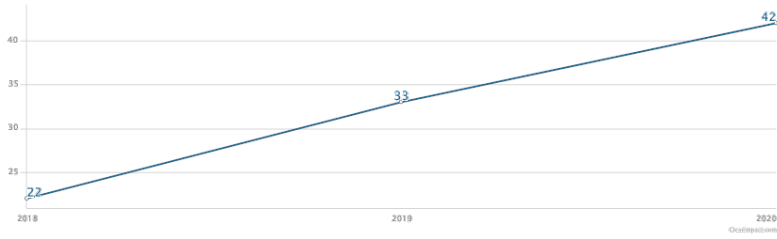


**2019** **21** **-** **↑** **1** **91%** **↑**

**2018** **11** **-** **→** **0** **0%** **→**

**PM** **CD** Percentage of new and returning Diabetes Prevention Program participants achieving at least 5-7% weight loss **2020** **42** **-** **↑** **2** **91%** **↑**

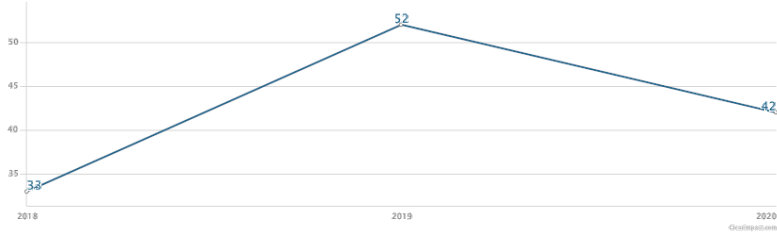
Data Source: Haywood County Health and Human Services Agency, 2018-2020 (participants auditing class have been excluded)



2019	33	—	↗ 1	50% ↗
2018	22	—	→ 0	0% →

**PM** **CD** Percentage of new and returning Diabetes Prevention Program participants reporting 150 minutes or more of weekly activity

Data Source: Haywood County Health and Human Services Agency, 2018-2020 (participants auditing class have been excluded)



2020	42	—	↘ 1	27% ↗
2019	52	—	↗ 1	58% ↗
2018	33	—	→ 0	0% →