

COMMUNITY AND ENVIRONMENTAL DETERMINANTS OF HEALTH
BEAUFORT COUNTY
EXPAND JOBS AND ECONOMIC SECURITY
PRIORITIES AND STRATEGIES

STRATEGIES TO EXPAND JOBS AND ECONOMIC SECURITY IN RURAL NORTH CAROLINA

- 1. Invest in infrastructure (e.g. water, sewer, technology, transportation, health care)**
- 2. Develop regional industries and local resources (e.g. farm to table, fishing, tourism, agriculture, solar)**
- 3. Recruit and retain industry**
- 4. Create workforce development programs to support local economy**

Invest in infrastructure (e.g. water, sewer, technology, transportation)

Existing efforts: There are NC Small Town Economic Prosperity (STEP) grants from the Rural Center that bring communities together to decide what they want to do to improve their town. In order to make the downtown area of Windsor more appealing (after the recent loss of many businesses), the county decided to clean up the area and create fake storefronts, so downtown looked more “vital.” Lenoir has a “Lenoir 2020” initiative that focuses on education, public safety, amenities, etc.

Barriers: Participants noted that there is less support to provide housing for low-income residents over the past few years. Funding for low-income housing is being replaced by tax credits for high population areas. There is a lack of grant writers in small rural communities.

Strategies to overcome these barriers: Participants express the need for ECU (or other colleges in the area) to set up a 1-800 number for “I need a grant writer.” They also suggested that the state establish a low income tax credit that is only for rural areas. It is also important to get legislators to establish a rural Eastern caucus to give status and voice to this region.

Develop regional industries and local resources (e.g. farm to table, fishing, tourism, agriculture, solar)

Existing efforts: There has been an increase in the establishment of new churches in eastern North Carolina. There is money for growth through the churches. The county also has existing natural resources and excellent craftspeople that could be used for “tourism” or maximizing new businesses.

Barriers: Demographics of population in area. Websites for businesses, crafts people, etc. are not accessible by all search engines, or the search engines contain outdated information. Thus, it is difficult for individuals and businesses to find services, goods, etc. from other community members.

Strategies to overcome these barriers: Participants suggested working across the region to develop tours that attract visitors and capitalize on their natural resources and crafts (e.g., could create a “Crafts Trail” with maps for visitors.) The county requires resources to assist with updating websites.

Recruit and retain industry

Existing efforts: Lenoir has a mobile van that provides job information in the community; they are working on a Family Access Portal to assist people in finding jobs and other community resources. There is also a regional Family Self-sufficiency Program that serves 110 families.

Barriers: There is a lack of collaboration across regions instead of focusing on one county (e.g., discussed airport in area with a runway long enough to handle flights to anywhere, but people drive to Raleigh to catch a plane.)

Strategies to overcome these barriers: There need to be incentives for collaboration or regional approaches. Community members should work to get Commissioners and others to think regionally.

Create workforce development programs to support local economy

Existing efforts: The county is incorporating health education into Head Start. Community colleges offer Career Readiness Certificates that show that students have the skills to do the job they are seeking; this starts with an analysis of the work being done in local industries. New Hope (for felons who have served their time) offers a person who has earned a certificate a mentor for 2 years. The mentor employer works with the former felon to help him adjust and make sure he stays in that job.

Barriers: Participants reported that military personnel who finish their deployment leave the area because since they were not born in North Carolina, they do not qualify for the Certificate program.

Strategies to overcome these barriers: The military needs to establish a transition program for those leaving the military that allows them to stay in the community and qualify for the training.

Additional strategies:

1. Establish tax incentives that foster collaboration and a regional approach
2. Assure the “Rural Center” concept and targeted funding survive (regardless of what happens to the Center.)

**COMMUNITY AND ENVIRONMENTAL DETERMINANTS OF HEALTH
BEAUFORT COUNTY
IMPROVE EDUCATIONAL OUTCOMES
PRIORITIES AND STRATEGIES**

STRATEGIES FOR IMPROVING EDUCATIONAL OUTCOMES IN RURAL NORTH CAROLINA

- 1. Increase support for quality childcare and education (birth-5) and parenting supports to improve school readiness**
- 2. Better recruitment and retention of strong teachers**
- 3. Increase technology/internet infrastructure**
- 4. Increase K-12 parent engagement and involvement (e.g. PTA/PTO, classroom visits)**
- 5. Promote innovative/non-traditional educational programs and strategies**
- 6. Increase adult learning opportunities and professional development**

Increase Support for quality childcare and education (birth-5) and parenting supports to improve school readiness

Existing efforts: Beaufort County was one of the counties selected for the Early Learning Grant from Race to the Top (along with Chowan, Bertie and Hyde counties). Funding and support is available to help improve school readiness, including: literacy initiatives (Mother Read and Reach out and Read); increased numbers of Child Care Health Consultants who are working to help child care centers improve health and social emotional wellbeing; Infant Toddler-part day free programs for 6-18 months; efforts to expand the number of high quality child care slots (4 and 5 star); implementing the Triple P universal parenting program, and a universal home visiting program modeled after Durham Connects (which will reach out to any parent, regardless of income). In addition to these new initiatives, Beaufort County also has a local Partnership for Children, which focuses on improved quality in childcare, and offers Parents as Teachers, play groups, and other services. Head Start is also available.

Barriers: Transportation is a barrier in this community. It is hard to engage families, in part because of transportation barriers. Participants also noted that there are some resources available for very low-income families (child care subsidies). Wealthier families can afford to put their children in high quality care. But, lower-middle-income families have a hard time affording high quality child care. In addition, participants noted that there are not enough developmental child care slots for children with special health needs.

Because of funding cuts, some of the local organizations have had to reach out to other groups to increase their collaboration (to share limited resources). This could include collaborations between the local partnership, East Carolina University (ECU) faculty physician groups, community college, etc.

Better recruitment and retention of strong teachers

Existing efforts: Beaufort County used to have a local scholarship for local students who agreed to enter the teaching profession and return to Beaufort to teach. However, those funds were cut. Now, there is an initiative at ECU (Wachovia Partnership). Students can go to the local community college for training for the first two years. The third year is on the ECU campus. The 4th year is devoted to student teaching. Participants thought this might make it easier for lower-income people to enter the teaching profession (since they could do 2 years in the community college system), but noted that the program has not had many enrollees.

Barriers: Participants noted that the issue is not so much one of recruitment—but more on retention of good teachers. They noted that teachers face a lot of challenges including low teacher pay, behavioral problems in schools, travel time, and the feeling that teachers do not have the resources needed to really address children's

needs. The NC General Assembly also cut the teacher's assistants who used to help in the classroom. Participants noted that the teaching salaries are so low, and that the other resources are so limited, that teachers have to use their own pay for school supplies. They also noted that another barrier is the recent legislative change which eliminates any pay increase for teachers who obtain a master's degree. Rural counties cannot offer the supplements that urban areas offer, so rural teachers are often recruited to more lucrative teaching positions.

There are small mini-grants available to help teachers buy school supplies, and there is a recognition program for teachers (teacher of the week) that includes a \$100 prize. Participants thought it would be helpful to have a good mentoring program between more experienced and new teachers, so the more experienced teacher could help the younger teachers achieve some type of work-life balance. There are some churches in the community that also help with tutoring, etc., but these church-school partnerships do not exist in every county, or for every school.

Increase technology /internet infrastructure

Existing efforts: All the public schools and community colleges are hard wired with internet access. Libraries are also hard wired (which provides access to the community). Some of the schools provide access to computers to community members. Beaufort County's Early College program also provided tablets to their students.

Barriers: While many of the public buildings are hard-wired, many of the people lack internet access in their homes. The cellular/internet coverage is spotty in some parts of the region. It is also too expensive for some families to afford. Some of the colleges allow non-enrolled community members to access their libraries so that they can use the internet. In addition, participants noted that Bojangles and McDonalds offer internet access to the public.

Increase K-12 parent engagement and involvement (eg, PTA/PTO, classroom visits)

Existing efforts: Martin, Beaufort, and Hyde Counties all have a telephone system to call parents and let them know about special events in schools. This works in some schools, but not as well in others. Participants thought parents of elementary school students were more engaged than those in middle/high school.

Barriers: Many families have parents that work 2nd or 3rd shifts which makes it harder for them to participate in school activities. Geography, travel, and transportation are also barriers. Some of the participants suggested that one reason that elementary school parents may be more active is because of the location of the schools. Elementary schools are located closer to the families' homes, whereas middle and high schools are larger feeder schools and therefore may not be as conveniently located as elementary schools. Participants thought that the best way to reach parents is either through sports events, or during school performances.

Promote innovative/non-traditional education programs

Existing efforts: Participants discussed several promising practices that involve high school and/or adult learners. The local high school and community college offer the Career and College Promise program. This enables 11th and 12th graders to be dually enrolled in high school and community college, so that the courses they take in high school are automatically transferred to the community college and/or other participating universities. At the end of the 5 years, the student graduates with both a high school diploma and an Associate's Degree. Beaufort Community College also has an Early College program—it's a 5 year combined high-school, community college degree. This program is offered on the Beaufort Community College campus. Schools in Beaufort (also Alleghany, Bladen, Hertford, Jones, Madison, Martin, Rutherford, Surry, Warren, and Yancey) also offer NC IRIS program (NC Investing in Rural Schools). This program is modeled on the Early College program. It provides opportunities for high school students, usually from low socioeconomic backgrounds, to earn up to 21 college credits while in high school and to take college prep courses.

The participants also noted the availability of an Agriculture School. It is a regional high school that is available in the northeastern counties. The school focuses heavily on science and STEM programs (basically a magnet high school which focuses on agriculture and STEM).

Regionally Increasing Baccalaureate Nursing (RIBN) is an initiative between ECU and some of the local community colleges. Students can attend a nursing program at a community college and get their ADN then take their third year BSN nursing program at the community college, and then transfer to ECU for the final year of their BSN program.

Barriers: One of the barriers is that students who want to take career and technical classes need to travel to the community college. Some of the programs listed above offer transportation while others do not. The lack of transportation is a barrier to participation. Participants noted that they are working to create a bus system so that students can enroll in the community college for the necessary courses.

Increase adult learning opportunities and professional development

Existing efforts: In addition to the high-school/college programs noted above, the NC Community College System offers different adult education and continuing education courses. The community college has identified job opportunities in the community, including forestry and logging. However, these industries can be dangerous (lots of injuries). The NC Agromedicine Institute offers continuing education courses on agricultural health and safety.

The community college has had some success in helping retrain individuals who are laid off to gain new skills. They have been able to help workers with the Workforce Investment Act Funding for Displaced Workers.

Barriers: Although financial aid is available to some people who lose their job due to the Trade Adjustment Act, the funding is limited and may not be sufficient for people who also have need for remedial education (math, reading, etc.). In addition, there are financial barriers which prevent some students from completing college. Some of the surrounding 4 year colleges have set up satellite colleges or offer courses at the community college. They offer a 2+2 program. The students get a 2 year degree at the community college, and then can complete a 4 year education through courses offered by the private colleges at the community college. Mt. Olive, NC Wesleyan offer these programs, including degrees in psychology, criminal justice, and business administration. The private colleges charge different rates. Some charge the NC public college rates; others charge their full private tuition. Participants also noted the growth in MOOCs (Massive Open Online Courses) that enable people to take courses from professors at Harvard, MIT, and Berkeley. People can audit the classes for free.

Participants also noted the unique educational and training needs for people who recently have been released from prison. Participants noted that some of the local churches provide reentry training programs to ex-offenders.

**COMMUNITY AND ENVIRONMENTAL DETERMINANTS OF HEALTH
BEAUFORT COUNTY
FOSTER STRONG, COLLABORATIVE LEADERS
PRIORITIES AND STRATEGIES**

STRATEGIES FOR FOSTERING STRONG, COLLABORATIVE COMMUNITY LEADERS

- 1. Encourage communication between community leaders (e.g., health, business, education, faith) to support local economic development, education, health care, and other issues of vital importance to the community.**
- 2. Educate state and local leaders about health and health care issues, including the economics of health care and the impact of the health of the community on other areas of development. Encourage them to factor health data into their decision-making.**
- 3. Support or build opportunities for local leaders to come together around health issues in a way that encourages collaboration and supports the implementation/replication of successful programs/policies/practices (e.g. Healthy Carolinians or Partnership for Children model).**
- 4. Identify and support development of local leaders in all disciplines in order to strengthen rural communities.**

Encourage communication between community leaders (e.g., health, business, education, faith) to support local economic development, education, health care, and other important community issues.

Existing efforts: The rural health plan narrative focuses on health care (i.e., “barriers to care”), but leadership seems to be more general (e.g. a focus on problems facing the community rather than a specific focus on health care). Leaders are finding ways to diversify leadership to expand the diversity of leadership to build leadership in rural, smaller towns and communities. With regards to improving communication, leaders are bringing in outside “expert” people to deliver some messages that the community cannot deliver (or the community cannot hear from those leaders). The Health Alliance sponsors a group meeting in Lenoir County meeting once a month. The Board at Martin Community Action brings leaders together who are both formal and informal community leaders. There is also the North Carolina Chamber that promotes its Work Well initiative (a workplace wellness initiative).

Barriers: The economic development regions are in flux, which is a barrier. However, people are gathering together to solve the gaps in services – gaps to provide or fulfill a mission.

Educate state and local leaders about health and health care issues, including the economics of health care and the impact of the health of the community on other areas of development. Encourage them to factor health data into their decision-making.

Existing efforts: The county pulls formal community leaders together for learning experience to discuss how health is related to economic development. For example, the Blue Cross Blue Shield Community Leaders program and the Leadership Academy are two examples in Halifax and Craven counties. Pitt County is implementing Communities Putting Prevention to Work (using CDC funding) to address obesity and tobacco use, by sharing health department personnel resources with the community. Pitt County is also supporting partners to attend trainings on why health matters to economic development. There are 13 counties in Eastern Region that came together to develop a legislative agenda containing a health component.

Barriers: Although, the Chamber is not health focused, some of its activities are related to health. Participants asked whether the North Carolina Chamber of Commerce should support health initiatives for economic development. Another barrier is that not all local and county chambers work together and agree on priorities. Additionally, some community leaders do not draw the connection between health issues and economic

development. The Eastern Carolina Workforce Development Board covers 9 counties in the east. This might be a good place to focus on health care as it relates to workforce development. Participants also reported a lack of data that would be helpful to make informed decisions.

Support or build opportunities for local leaders to come together around health issues in a way that encourages collaboration and supports the implementation/replication of successful programs/policies/practices (e.g. Healthy Carolinians or Partnership for Children model).

Existing efforts: Residents came together to prioritize health topics. Lenoir 2020 selected a diverse group of community leaders, identified specific topics to be discussed, and identified speakers to talk at each meeting to address a particular health topic. An additional effort in Beaufort County is the Partnership for Children that brings residents together to improve the education system. This initiative has been successful in bringing leaders together and there was a convener to strategize on how to keep the initiative going.

Barriers: Participants noted that there is not always a community group that can bring people together. Also, residents need information about how they can get involved, and they need information about programs or models that have been successfully implemented elsewhere. Participants also noted that it is expensive to bring in outside facilitators or experts to speak or train community members.

Identify and support development of local leaders in all disciplines to strengthen rural communities.

Existing efforts: There are a few efforts underway such as the Obesity Task Force, the Lenoir Partnership for Children, along with the Lenoir Wake Up Lenoir initiative (which is the “1st 2,000 days” of child’s life early childhood’s connection to future workforce). The Beaufort County Chamber of Commerce is also training young leaders (18-40) to foster future leaders. In addition, Lenoir (along with several more townships in Eastern NC) has one young leaders group that provides mentoring opportunities for juniors in high school. In the recent application process there were more than 30 applicants and only 15 were accepted.

Barriers: There is high leadership turnover, especially among county managers, that jeopardizes forward movement using position as stepping stone to “bigger, better” jobs. The participants reported that youth who leave often do not come back, so the community needs to have leadership opportunities so that youth have opportunities to return home to. This would help retain young professionals and junior leadership in Lenoir. Also, this would get people involved to build a stake in the community.

**HEALTH BEHAVIORS
BEAUFORT COUNTY
PROMOTE HEALTHY EATING AND ACTIVE LIVING
PRIORITIES AND STRATEGIES**

TASK FORCE STRATEGIES TO PROMOTE HEALTHY EATING AND ACTIVE LIVING

- 1. Educate families to support healthy eating and active living**
- 2. Work within the education systems (including early education through college) to support healthy eating and active living**

Educate families to support healthy eating and active living

Existing efforts: There have been improvements in healthy lunches over past few years, and a Healthy Eating and Active Living Collaborative in Washington. There is also an initiative underway by the Community Transformation Grant (CTG). Correspondingly, a faith-based group provides a 6-8 week program regarding healthy eating and the lay health educator model for active living. There is a City Recreation Plan and the local newspaper and media are making Beaufort County an attractive place to be active. The Health Department is improving outdoors by creating 2 walking trails. Likewise, Beaufort County Community College interactive walking trails are currently pending. The Beaufort County Development Corporate Market and Aurora Farmers Market are participating in efforts as well. “Lifestyle Farming” versus farming is viewed as economically viable. Carolina Farm Stewardship Association offers food access at community meetings. There is an employee newsletter at Vidant Health sharing all active living opportunities. Additionally, Vidant Health in Beaufort and the Kate B. Reynolds foundation provides money to fund healthy and active living initiatives. Furthermore, The Eat Smart, Move More model is being actuated by the Cooperative Extension.

Barriers: Many residents reported that there is a lack of communication before programs or policies are implemented, thus affecting community engagement and sustainability. They suggested that the community advocate for local and state incentives to counties for low wealth rural communities, create policies to promote and expand access to active living and healthy eating. For example, use joint use agreements, considering health in planning, have conversations with communities (what are community level challenges & opportunities around healthy eating and active living, i.e., street lights and sidewalks), small business getting involved, and creating a growing awareness about economic development. While, Washington is attractive, look at other parts of the county by using a tailoring approach, engage stakeholders in other communities. Expanded Food and Nutrition Education Program (EFNEP) in Martin County is vacant, funding is a barrier. There is no Expanded Food and Nutrition Education Program in Beaufort County. Support local farmers groups to produce and supply local markets; the main grocery stores shut down early in the day and there is no access to transportation; costs prevent people from accessing food as well. There is limited production of produce via local farmers; challenge is regularly supplying the demand by local grocery stores. Though the Farmer Incubator Projects was implemented to support potential local farmers the challenge of funding, donations of land, and equipment still remains. Need dedicated staff for farmers markets - provide incentives to diversified farmers who are already growing produce and also create incentives for young people to get into agriculture, i.e. from what’s left of Rural Center. Additionally, there are no county level Parks & Recreation in Beaufort County and sports teams may be unaffordable for low income folks, thus outdoor activities are limited. Work with faith-based communities and linking resources through *Carolina Farm Stewardship Association (CFSA)* and Kate B. Reynolds, along with other initiatives. Dedicate resources to engaging community leaders in smaller communities – can’t keep taking on new projects, train new leaders in community. While it is great everyone is doing great things, they have done so in isolation, it is beginning to come together, the solution is to create a space to come together. Also cooking food at facilities that have freezing capacity, for example, they froze pounds of collards for lunches.

Work within the education systems (including early education through college) to support healthy eating and active living

Existing efforts: There is a joint use of making school facilities available, such as the exercise studies program at Beaufort Community College. This just started but is well-received by the community. Also, Physical Education classes rotate with other specials one week on the six week break. Likewise, Vidant Health Community Benefits Program sponsors - My Healthy Plate, Triple Play, Healthy Habits, and Program with the Food Bank of Albemarle. Another active initiative is the, “Farm 2 School” grant and also the Kaboom Projects.

Barriers: No barriers were shared for this strategy.

New Strategies Identified:

- Support local farmers to grow produce to supply local markets
- Advocate for local and state policies to promote and expand access to active living/healthy eating

**HEALTH BEHAVIORS
BEAUFORT COUNTY
REDUCE SUBSTANCE ABUSE
PRIORITIES AND STRATEGIES**

TASK FORCE STRATEGIES FOR REDUCING SUBSTANCE ABUSE

- 1. Promote and educate doctors on the use of the statewide controlled substance reporting system to help identify people who abuse and misuse prescription drugs.**
- 2. Use Project Lazarus (a community-based overdose prevention and opioid safety program) as a model for substances in addition to opioids.**
- 3. Promote the use of drug treatment courts, an intervention program where non-violent addicted offenders enter court-supervised treatment.**
- 4. Use school-based intervention for substance abuse prevention.**

Promote and educate doctors on the use of the statewide controlled substance reporting system to help identify people who abuse and misuse prescription drugs

Existing efforts: The newspaper in Beaufort County provides articles on this topic.

Barriers: For tobacco, the fact that it is a legal substance is a problem. Because of the lack of jobs, many low-income teens, young adults, or felons who have served their time cannot get jobs and decide to make money to support their family by selling drugs. There appear to be no penalties for physicians who over-prescribe or prescribe to people who, if they searched the CSRS, are seeking drugs to sell.

Strategies to overcome barriers: Could be doing more in community (eg, in low income housing, and other locations) to educate the public about the dangers of prescription drugs and proper disposal.

Use Project Lazarus as a model for substances in addition to opioids

Existing efforts & barriers: No one in the group was familiar with this project so there was no discussion.

Promote the use of drug treatment courts, an intervention program where non-violent addicted offenders enter court-supervised treatment

Existing efforts: The Dare County model was discussed as a good example of a collaborative community approach. No efforts in counties represented were known.

Barriers: There is lack of money and no real “system” in rural areas for treatment and transition back to community; political leaders lack will to spread the Dare County model.

Strategies to overcome barriers: The participants requested more education on how Dare County implemented their model and its associated costs with who pays for funding for other counties to “test” or “try” that approach.

Use school-based intervention for substance abuse prevention

Existing efforts: No one from the school system was in our group. Participants were aware of evidence-based school-based programs but not whether they were in place.

Barriers: Youth and young adult culture (music, videos, athletes, etc.) has made this acceptable; the “everybody does it so it can’t be bad” thought process.

Strategies to overcome barriers: None identified as time ran out.

Additional Strategies:

1. Advocate for improved state and local tobacco prevention policies.
2. Develop more clinic-based strategies that can be implemented in clinical practices.

**HEALTH BEHAVIORS
BEAUFORT COUNTY
IMPROVE MENTAL HEALTH
PRIORITIES AND STRATEGIES**

TASK FORCE STRATEGIES FOR IMPROVING MENTAL HEALTH

- 1. Build/strengthen community supports to improve mental health**
- 2. Use primary care and public health settings to screen for and, when appropriate, provide treatment for mental health and substance abuse problems**
- 3. Educate communities about the signs and symptoms of mental health disorders and suicide**

Build/strengthen community supports to improve mental health

Existing efforts: Beaufort, Martin and Hyde counties have a community collaborative with community health workers, social workers and prisons. The Department of Juvenile Justice funds the program and it has been in place for 7 years. The Craven County Crisis team comes out into communities to assess problems. Mobile mental health services are working. ECU has an e-behavioral health program (telemedicine). Also, the Teddy Bear Program serves children that are victims of child abuse and is working in Greenville.

Barriers: Prevention is a major barrier. The county needs someone in the school system to assess children for behavioral issues. There are not enough clinicians in the area. Pediatric offices do not help to assess programs. There are no proactive programs for kids that are high risk, i.e. single parent families, divorced parents, parents in jail. There is not enough support within the health care system. People in health care have to essentially “babysit” people with mental illness since there are not enough treatment resources. The state does not fund mental health and there are no inpatient resources. Therefore, there is no place for mental health patients to go. The community needs people that are trained to build that trust with people and children.

Use primary care and public health settings to screen for and, when appropriate, provide treatment for mental health problems

Existing efforts: There are integrated care models with social workers and psychologists at ECU. Social workers are placed in primary care offices and the CCNC networks are being utilized. There are a large number of health care professionals in the area that care about and have an interest in making progress with mental health. PACE program is a solution that offers care for the elderly. PACE uses a team-based approach to improve overall wellness in program. Some counties so have emergency departments.

Barriers: There are too many people are going to the emergency department. Some go to the psychiatric ward and no one is monitoring their medications. There is a lack of quality mental health providers. Participants reported insufficient collaboration between primary care doctors and psychologists. There is a higher prevalence of mental illness in children. However, parents do not know how to distinguish between typical aggressive behavior and early onset of behavioral issues. Participants wondered who is creating a holistic system of care. Hyde County does not have an emergency department.

Educate communities about the signs and symptoms of mental health disorders and suicide

Existing efforts: Diversity training is being offered at ECU. It is offered to faculty and students. There is a steady enrollment in the psychology program at ECU but more are needed. ECU is offering safe zone training for LGBT community. Beaufort Community College is offering students access to counselors to help with stress and they are connecting them to additional resources.

Barriers: It is hard to see if someone has a mental health issue because it is not like a physical issue. Community members face problems with payments and reimbursements and there are not enough psychologists to serve. Medical social workers could help. The availability of services is limited. There has been an increase in diagnoses of ADD and ADHD in schools. As a result, participants reported that parents are “treating with a pill.” Employers should offer exercise and work life balance for employees. It is hard to find employment with an existing diagnosis. In small towns, people share information. Therefore, it is hard to keep them employed. People are ashamed to tell employers. Students joke and shame each other about mental health diagnoses.

**ACCESS TO AND AVAILABILITY OF SERVICES
BEAUFORT COUNTY
MAXIMIZE INDIVIDUAL INSURANCE OPPORTUNITIES
PRIORITIES AND STRATEGIES**

Strategies for Improving Access by Maximizing Individuals' Insurance Opportunities

- 1. Encourage employers to offer affordable coverage to more employees**
- 2. Advocate for Medicaid expansion to cover low-income adults**
- 3. Leverage safety net resources to bridge the gaps in insurance coverage for individuals, with a focus on those who are not able to obtain affordable health insurance coverage.**

Encourage employers to offer affordable coverage to more employees.

Existing efforts: There are no specific efforts to encourage employers to offer more affordable coverage to employees. However, participants did think that with the elimination of medical underwriting, there will be a greater emphasis by insurers to identify those enrollees with chronic health problems or other high cost conditions that may require greater oversight to help ensure they get the right care at the right time. Among those with insurance coverage, there is also a move to shift more of the costs onto the consumers, to encourage them to be prudent purchasers of care.

Barriers and strategies to overcome barriers: In rural counties, there are a lot of small businesses, but not many large businesses. Creating healthier workplaces would lead to greater productivity. Thus, participants thought there should be greater emphasis on promoting worksite wellness initiatives. They suggested that Chambers could be a strong ally in promoting worksite wellness or smoking cessation programs. The participants also thought that Chambers could help promote the availability of the small business tax credit to help their small business members understand the financial assistance that may be available if they offer insurance coverage to their employees.

Expand Medicaid to cover more low income adults

Existing efforts: Participants did not report any local efforts to try to get the state to expand Medicaid.

Barriers and strategies to overcome barriers: Participants noted that some of the local health clinics and hospitals were interested in Medicaid expansion, in order to help pay for the services they provide to the uninsured. However, they were unaware of any organized effort around Medicaid expansion.

Leverage safety net resources to bring gaps in insurance coverage focusing on those who are not able to obtain affordable health insurance coverage.

Existing efforts: There are a number of different safety net resources in the community, including Hope Clinic (Pamlico free clinic), Agape Services and Metropolitan Community Health Centers, Merci Clinic (free clinic in Craven county). Prime Time is a faith based program that hires community health nurses to visit the frail elderly in their homes (and help with transitions of care, prevent rehospitalization). Unfortunately, this program only serves a very small number in need. Health departments generally do not provide comprehensive primary care. The participants noted that there were no school based health services. However, there is a school-based mental health program, using the Frontier model. East Carolina Behavioral Health is paying mental health practitioners to provide services in the school setting (as there is less stigma in schools).

Barriers and strategies to overcome barriers: People do not know about all the services that are available, so many times people go to the emergency department for non-emergency services. Also, some of the safety net

organizations are at capacity (others have unused capacity). Participants were reluctant to advertise the safety net programs that are at capacity (such as Hope Free Clinic), for fear of being overwhelmed with new patients.

NEW STRATEGY: Educate the public about new insurance coverage options available under the ACA, as well as existing safety net resources

Existing efforts: Participants noted that insurance agents and the grange were hosting community educational meetings. For example, the Grange is going to civic organizations to offer educational sessions. The one participant from the Grange noted that they meetings are not well attended. He thought that people were waiting for the “bugs” to get worked out in the marketplace website.

Barriers and strategies to overcome the barriers: Participants noted that it was important to work with organizations that already have relationships in the community, including the local Chamber.

**ACCESS TO AND AVAILABILITY OF SERVICES
BEAUFORT COUNTY
SUPPORT NEW MODELS OF CARE THAT EXPAND ACCESS TO HEALTH SERVICES
PRIORITIES AND STRATEGIES**

Strategies to Support New Models of Care to Expand Access to Health Services

- 1. Expand telehealth efforts**
- 2. Support and expand school-based and school-linked health centers**
- 3. Funders and policies should support new models leveraging leadership, coordination, and sustainability**

Expand telehealth efforts

Existing efforts: There are several successful telehealth programs in the area. The East Carolina University (ECU) Center of Excellence was recently awarded a \$2 million grant for mental health. The Community Care Plan, a local network of Community Care of North Carolina, uses remote monitoring with heart failure patients. The group noted that it has worked well for some patients with telephone follow-up for those that need it. Additionally, the ECU School of Dental Medicine community service learning centers use telehealth for oral pathology consults between providers. Roanoke Chowan Community Health Center is helping avoid hospitalizations with patient monitoring 7 days a week. They received a \$1.75M grant and will be providing telehealth services in Oregon. The group thought the model could be helpful with free clinics for dental and vision consultations. They also discussed how cost effective remote patient monitoring could be while expand access and serving as an economic development tool.

Barriers: The group noted several barriers to implementing telehealth. There are financial challenges of provider billing not covering the full costs. Poverty is another barrier. Patients need electricity for the monitors to work. Group members gave examples of someone selling their monitor and another patient pulling their own teeth because of financial barriers. The decreased use of land line telephones has been a barrier, but some companies have developed equipment that works with cell phones. Resistance to technology is an additional barrier. Some seniors don't like technology, but some can be coached on how to use it. The group also discussed lack of buy-in from medical community; lack of comfort with behavioral health by primary care providers; and lack of services including dental, vision, and mental health.

Support and expand school-based and school-linked health centers

Existing efforts: There are several school-based and school-linked health centers in the area. Greene County Health Care, Inc. has a robust school-based program. East Carolina Behavioral Health (ECBH) uses the frontier model to embed mental health in schools. ECBH provides therapy on site at schools through licensed clinical social workers or licensed professional counselors. Other models of primary care practice would serve children during the day and family members at night. The group thought the same model could be replicated with the faith-based community.

Barriers: Financial viability is a major barrier for school-based or school-linked health centers. ECBH has stigma associated with mental health as an additional barrier.

Funders and policies should support new models leveraging leadership, coordination, and sustainability

Existing efforts: The group thought it was important to think about new ideas and suggested some of their own. Funders should support think-tank/incubator/forum for grass roots ideas in health care like the community meetings. Local people have great ideas, but may need connections to help transfer them into grants/pilot/next steps. It could serve as a vetting process with support for idea generation and connect people with similar ideas.

Additionally, a participant suggested that practice could open appointments where the patient did not show up to others who may be waiting.

Barriers: Some members of the group felt that the establishment often shifts the burden to someone else and for that reason needs more grass roots people in health care. An additional barrier was the lack of sustainability of many programs. Lastly, the group discussed the lack of technical expertise that may accompany a really good idea and the inability to transform it into a viable project.

**ACCESS TO AND AVAILABILITY OF SERVICES
BEAUFORT COUNTY
IMPROVE RECRUITMENT, RETENTION, AND DISTRIBUTION OF KEY HEALTH PROFESSIONALS
PRIORITIES AND STRATEGIES**

Strategies for Increasing Access by Improving Recruitment, Retention, and Distribution of Key Health Professionals (i.e. primary care providers, general surgeons, dental providers, and mental health professionals)

- 1. Ensure adequate incentives to recruit health professionals into underserved areas**
- 2. Involve broader segments of community (e.g., schools, business, community leaders) in recruitment efforts**
- 3. Support health professionals new to rural communities**

Ensure adequate incentives to recruit health professional into undeserved areas

Existing efforts: The Vidant System has a robust scholarship program. A collaboration between East Carolina University, the North Carolina Community Health Center Association, and the North Carolina Office of Rural Health resulted in a SEARCH grant that placed trainees in rural community rotations with a project designed by the community. The Federal Education Loan Scholarship is aimed at health professions and teaching fellows and requires a work commitment in North Carolina.

Barriers: Many of the scholarship and repayment programs are only for the graduate level and no longer include undergraduate education or current employees. New physician graduates and residents have a low level of productivity compared to other health professionals. They are building skills, but have low business acumen and no experience. The focus of many health care systems is meeting the future demand of the ACA rather than developing professionals. Some private schools pay providers and practices to serve as exclusive sites that may limit the number of rural experiences for students at public health professionals programs.

Involve broader segments of community (e.g., schools, business, and community leaders) in recruitment efforts

Existing efforts: The Foundation for Nursing Excellence RIBN program involves community leaders in recruitment. The Workforce Development Initiative links middle and high school students with health professional experience. Some examples include the Health Science Activity in Pitt County and Explore programs in other counties. The grade level of the student and college or graduate level of the health professions program depend on the specific program.

Barriers: The group noted that it was important to define when recruitment starts for example Hyde county student could become a Hyde county health professional. Many students go straight through their education without clinical experience. A transition to practice, like residency, would be helpful for those students. Primary care can be associated with burn out. Minority students may not want to return to rural areas that they come from.

Support health professionals new to rural communities

Existing efforts: Training students in community builds relationships. It allows the professional to sell the community, invite them to cultural and /or sports events and shows the students and new professionals the support and socialization opportunities.

Barriers: There is a need for cultural fit between the new provider and the community. The community needs buy in from provider’s spouse and family. Often a barrier is the educational opportunities for children. In a particular case, some beliefs of a student were not known and the student was offended by some comments community members made. Rural communities are not usually as diverse as more urban areas and can turn off some students and new professionals. Rural communities stick together and only want people with a true commitment to the area. That loyalty may seem unfriendly to newcomers.