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COMMUNITY AND ENVIRONMENTAL DETERMINANTS OF HEALTH
MONTGOMERY 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: No existing efforts were shared.

*Barriers: there is a l*ack of infrastructure and funding to improve it, along with the need of affordable transportation. The group would like for another agency (entity) to take over the Rural Health Center role and provide funding that targets rural communities.

Develop regional industries and local resources (e.g. farm to table, fishing, tourism, agriculture, solar)
Existing efforts: The Cooperative Extension is collaborating with the Farm to Table program in Richmond; promoting tourism (e.g., People First Tourism's canoeing); Community Supported Agriculture (boxes of vegetables), and Farm School (teaches farmers the "business side" of farming). There is also a five year plan in place to develop a sustainable agricultural industry.

Barriers: No barriers were shared.

Recruit and retain industry
Existing efforts: Participants shared that the county has recently attracted a new industry for wood pellets.

Barriers: The community lacks additional activities and events (recreational options) that draw and attract new people. In addition, youth leave for college and never return. Also, participants reported that many established businesses do not want competition from other industries offering higher wages.

Create workforce development programs to support local economy
Existing efforts: Montgomery County Community College offers a Small Business Center which helps to create jobs. Also, the Business Visitation Committee works with industry leaders to determine what they need, and then provides training to better prepare students to enter the workforce in these industries. The Community College also has StarWorks, a business incubator group focused on new ideas such glassblowing, pottery, metal work, and raising cattle. Finally, the participants reported that project implementation and development is funded through the Rural Center, the Golden Leaf Foundation and Small Town Economic Prosperity (STEP) grants. The group would like to see these efforts continue.

Barriers: Contributors shared the lack of high quality child care and lack of affordable education as barrier for this strategy.

Other Strategies:

1) Assure that funding from multiple sources/funders is set aside specific to rural counties/communities so they are not competing with the larger/urban counties/communities.

2) Targeted research from rural communities that show how programs, such as Nurse-Family Partnership, can be implemented with "model fidelity" so they can bring such programs to their area.

COMMUNITY AND ENVIRONMENTAL DETERMINANTS OF HEALTH
MONTGOMERY 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
Successful action steps: There are a number of successful early childhood education programs in the Montgomery County area. For example, Montgomery County has a local Smart Start partnership. They offer a resource library for families, parents, teachers and community members, and provide continuing education for child care providers.

Barriers and policies to overcome barriers: Participants noted that budget cuts have limited their ability to provide the same level of services to all in need. There is no longer a local resource and referral network; the R&R—which provides continuing education courses for child care providers—is offered in Fayetteville (which is 1.5 hours away). Budget cuts have affected programs. For example, the Parents as Teachers program was eliminated because of funding cuts. Fewer children are being covered through the More at Four program, so the local partnership for children instituted a new screening tool to help identify at-risk children. In addition, participants noted that there are not a lot of high quality 4 or 5 star child care centers, and that the centers that do exist are unaffordable to families unless they qualify for subsidies.

Also, as a result of the limited funding, the agencies are working together more closely to try to fill gaps. There are collaborative efforts between the local partnership for children, cooperative extension, and health department to meet unmet needs.

Better recruitment and retention of strong teachers
Successful action steps: In the past, county commissioners have offered incentive programs to their own students to enter the teaching profession and to come back to teach in the community (a "grow-you-own" type of incentive program). However, this ended because of funding limitations.

Barriers and policies to overcome barriers: The participants noted the lack of funding for teacher salaries. Parents have a hard time volunteering to help in schools because many of the parents are working multiple jobs, and/or have their own transportation barriers. Further, many teachers do not know how to use volunteers effectively. Participants noted that in some communities, churches were helping to create after school programs with tutoring and enrichment programs for certain at-risk populations. These churches offer food and transportation, in addition to academic tutoring. However, these programs are not available in every county, and even when available, it is not available in every school. Additionally, many of these programs limit the number of children who can participate.

Increase technology /internet infrastructure
Successful action steps: Some of the schools are giving students electronic devices (IPADs, etc.) to have access to the internet. The schools are all hard-wired, so they have access to the internet and many offer IT labs in school. Some of the schools have smart boards, but the teachers do not all understand how to use them. Some teachers also have web pages where they keep their assignments, and allow parents access to see student progress. Many of the tutoring programs (such as the church programs described earlier) are offered in organizations that have internet access (such as churches).

Barriers and policies to overcome barriers: While many of the schools have internet access, it is not available throughout the whole county. There are some spots where it is hard to get internet reception, and many families cannot afford to have internet access.

Increase K-12 parent engagement and involvement (eg, PTA/PTO, classroom visits)
Successful action steps: Participants noted that student sporting events are a great way to reach teachers (nights and weekends). They noted that it is often hard to get parents to come regularly to school events because many of the parents work 2nd and/or 3rd shift jobs, which interfere with their ability to attend school events.

Barriers and policies to overcome barriers: The participants noted that it is often hard to keep parents engaged in their child's education. One of the participants discussed a Cabarrus County initiative (Schoology) which makes it easier for parents to keep track of their student's progress. Parents can sign up with a password, and then will receive updates on the student's assignments, progress, grades, etc. However, the schools in Montgomery do not regularly use this system as a means of communicating with parents, although some of the parents in the group thought this might be a successful strategy to keep parents more engaged. And while some families lack access to the internet, participants thought that most families would have access (either at home or through smart phones).

Promote innovative/non-traditional education programs
Successful action steps: There are several youth involvement/enrichment programs offered in the community, including 4-H clubs, boy scouts and girl scouts, and other club activities. Churches also offer youth programming.

Barriers and policies to overcome barriers: There are not enough resources to provide services to all children who need enrichment programs. One of the participants talked about a partnership between two churches to offer youth programming. One of the churches offered transportation to the youth while the other helped with food and other activities. Both organizations provided leaders to help with the youth programs. Participants noted that communities might be able to tap volunteers to help with community engagement, youth tutoring, etc. through the local colleges and universities (including community colleges).

Increase adult learning opportunities and professional development
Successful action steps: Montgomery and Moore Counties both have community colleges. Montgomery County Community College offers successful forestry and gunsmith programs. Montgomery County also offers pottery programs (because of the surrounding Seagrove pottery jobs). Moore County has a successful nursing program and horticulture program (for the local golfing resorts). The Cooperative Extension also offers courses to become a master gardener.

Barriers and policies to overcome barriers: Transportation and financial barriers make it difficult for some people to attend four-year colleges. To address some of these barriers, the community colleges offer partnerships with local educational institutions so that some of the 4-year degree programs are offered on the community college campus (or through satellite). For example, Gardner-Webb offers a bachelor's degree in Human Services through Montgomery Community College. Moore County Community College has a similar program with St. Andrews, Pembroke, Fayetteville State, and Methodist colleges and universities. The community colleges also offer satellite courses for distance learning.

COMMUNITY AND ENVIRONMENTAL DETERMINANTS OF HEALTH
MONTGOMERY 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 participants would like a different path of getting news and information distributed and suggested the use of technology to increase communication. Also, participants wanted to utilize and involve alumni leaders.

Barriers: Participants reported difficulty with communication between various stakeholders within the communities. In addition, there are race and culture barriers, causing tensions and divisions. Participants would like to see leaders come into the community (folks will not and cannot come to services outside the community) to introduce themselves, build relationships, and identify available resources. Finally, participants stated the need for a common portal for leaders to share information across the county.

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 2020 Committee Health used Community Health Assessment to inform decision-making and 2020 helps collect the data by distributing surveys.

Barriers: Participants expressed that Troy is a decentralized county that few outsiders come to.

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: The Healthy 2020 Committee was one of several successful collaborations within the community. The Veterans Administration conducted outreach efforts to provide education and services to veterans and families in rural communities. Furthermore, Montgomery County Aging Planning Committee has a legislative network that advocates on behalf of seniors. Likewise, participants

recognized the "Women of Influence" work within the aging community. The Health and Human Services department provides a cross-cultural resource guide in Spanish.

Barriers: Participants stated there is a tendency for professionals/leaders to stay within their own groups, thereby not reaching out to other groups. For example, the county tried to implement a lay health worker program but that was unsuccessful. Participants reported the need to access different communities and their resources. They wondered who and what agency might serve as central point of contact for the county. Also, participants expressed that fewer meetings are better, so professionals/leaders should combine initiatives/meetings. The Citizens for a Responsible Curriculum and Montgomery County Community Resources team were doing good work but the team was defunded, resulting in a loss of leadership.

Identify and support development of local leaders in all disciplines to strengthen rural communities.
Existing efforts: The Chamber of Commerce provides leadership training. Participants suggested that the county identify current or potential community leaders and invite them to make formal meetings accessible to the community meetings. Likewise, participants also encouraged the county to identify new, potential leaders and invite them to the table as well.

Barriers: Participants shared that experienced leaders are retiring and migrating out. Also, there are barriers. For example, participants suggested the use of interns to complete work that disbanded groups and defunded positions did in the past. Furthermore, leaders must learn the language and culture of different groups. Also, United Way or other organizations tried to do Leadership Development in Montgomery County, but efforts have not been sustained.

Additional strategies:
- Identify current or potential community leaders and invite them to formal community formal meetings. Who are they?
- Identify new, potential leaders and invite them to the table

HEALTH BEHAVIORS
MONTGOMERY 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 physical activity and nutrition**
2. **Work within the education systems (including early education through college) to support physical activity and nutrition**

Educate families to support physical activity and nutrition
Existing efforts: Participants would like for environmental changes to be implemented by way of policy at organizations, on both local and state levels, that result in improvements. For example, Family Dollar has a new policy to market skim milk to consumers. In addition, the Supplemental Nutrition Assistance Program (SNAP) and Electronic Benefits Transfer (EBT) program have been implemented at the Moore Farmers Market, which also includes the acceptance of Women, Infants and Children (WIC) programs. Also, the Home and Community Care Block Grant provides nutrition assessment for residents. The "Corner Store" pilot initiative works with convenience store owners in low-income communities to find ways to offer healthier, more affordable foods and beverages. Additionally, The Community Transformation Grant Project (CTG) is a state funded initiative designed to promote tobacco free living, active living, and healthy eating among residents of Region 6. Currently, seniors are awaiting vouchers for participation in The Senior Farmers' Market Nutrition Program (SFMNP) grant that provides low-income seniors with coupons in exchange for foods (fruits, vegetables, honey, and fresh-cut herbs) at community supported agriculture programs. The group shared the need to increase access to safe opportunities for being active and eating healthy foods in both natural and built environments. Furthermore, "*The Happy Kitchen"* is a healthy cooking program offered by FirstHealth Community Health Services. People Living Active Year Round (PLAY) is another successful effort happening in Montgomery County. There is also the Farm Fresh Ventures program by way of the North Carolina Cooperative Extension, whereby residents come together to sell their products through a weekly produce box subscription. Another food program is the "Food Corps" which provides "Farm to Table" services with the intent of supporting future food system leaders. Also, the group would like to use marketing strategies to reinforce healthy eating and active living messages by integrating healthy wellness into community planning. Likewise, they would like to see efforts expanded to reach community members beyond families and schools, and beyond educational interventions. The participants reported a physical activity program called "Fit & Strong" that is accessible at Senior Centers.

Barriers: Changes in administration leadership has resulted in lack of sustainability in funding priorities regarding (human resources). Participants also shared that there is a lack of specialists in Montgomery County and would like them transported into Montgomery County. In addition, there are a lack of vehicles to deliver Healthy Eating and Active Living messages. Furthermore, the group shared that cultural habits are hard to change, and the environment supports unhealthy choices. Therefore, they suggested changing the environment to support healthy eating and active living. They would like for there to be economic incentives to drive healthy food choices in institutions. For example, participants wanted to market Healthy Eating and Active Living strategies to places like McDonalds - The Community Transformation Grant Project (CTG) may support these efforts. Finally, transportation is one of the top 10 concerns within Montgomery County.

Work within the education systems (including early education through college) to support physical activity and nutrition

Existing efforts: The Expanded Food and Nutrition Education Program (EFNEP), and the Nutrition and Physical Activity Self-Assessment for Child Care (NAPSACC) are state programs in collaboration with the "Be Active Kids Play Daze" effort. In addition, there are programs through school-based health centers in Montgomery County such as "Operation Fit Together" for children K-5 and the "Take 10 Curriculum." Additional efforts include the school community gardens and the "Farm a School" education made available to parents. Furthermore, the "Color Me Healthy Training" is a nutrition and physical activity program for children ages four and five. The Healthy Kids, Healthy Communities (HKHC) initiative came out of the FirstHealth Montgomery policy change effort and is funded by Robert Wood Johnson.

Barriers: Due to the rules and regulations within school cafeterias and Meals on Wheels, it is challenging to work with them to provide healthy eating options. Also, communication regarding healthy eating must be tailored to different stakeholders. As a result, there is a lack of consistency in educational materials regarding healthy eating and active living.

Additional Strategies:
1) Environmental – make implement policy at organization, local, and state levels that result in improvements
2) Natural and built environment to increase access to safe opportunities for being active and foods healthy
3) Use marketing strategies to reinforce healthy eating active living messages
4) Expand efforts to reach community members beyond families and school/ education (i.e., those without children, seniors, etc.)

HEALTH BEHAVIORS
MONTGOMERY COUNTY
REDUCE SUBSTANCE ABUSE
PRIORITIES AND STRATEGIES

TASK FORCE STRATEGIES TO REDUCE 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 Community Health Assessment for Montgomery County has placed substance abuse as one of its top 3 priorities. The county health department also hosted a roundtable talk in September with all its partners. Also, FirstHealth has implemented a new policy in the emergency room which prohibits prescribing narcotics for the chronically ill (except for acute pain). In addition, participants shared that some pharmacies (usually independent ones) checked the Controlled Substance Reporting System before filling prescriptions for narcotics. If there were discrepancies they printed the information and sent it to the primary care provider (PCP). One provider has implemented testing of clients seeking refills regularly for the therapeutic level of prescribed medication to guarantee clients are taking it before prescribing additional medication. Additional funding is needed to install more "lock boxes" in communities for drop off at police stations/other secure locations.

Barriers: Participant said it was difficult to find a way to "educate" providers so that they will actually participate in trainings. In addition, clients know which providers in the community will prescribe narcotics without much assessment and the word spreads.

Use Project Lazarus (a community-based overdose prevention and opioid safety program) as a model to reduce the use of other substances.
Existing efforts: The county currently has a small Project Lazarus grant and is seeking additional funding.

Barriers: No barriers were shared.

Promote the use of drug treatment courts, an intervention program where non-violent addicted offenders enter court-supervised treatment, rather than prison.
Existing efforts: No existing efforts were shared.

Barriers: Participants perceived that the people with the power to make a difference are often in "denial" that there is a problem.

Use school-based interventions for substance abuse prevention.
Existing *efforts:* The county has implemented both DARE (Drug Abuse Resistance Education) and GREAT (Gang Resistance Education and Training) in schools.

Barriers: Nothing listed.

Additional Strategies:
1) Educate general public on this issue and the dangers of keeping narcotics no longer needed and used around the house.

Polices to overcome barriers/ways State can help:
- Provide required education for all providers on the problems created by "over prescribing"
- Require all pharmacies to check Controlled Substance Reporting System before filling a prescription
- Develop social media messages and find a way to get them out. Current county policies prohibit government employees to use social media, which reduces their ability to send public health messages to the public.
- Help newspapers in small communities understand the importance of these types of messages as "news"

HEALTH BEHAVIORS
MONTGOMERY 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: Currently, there are behavioral health services being offered in the area through NC Mentor, Therapeutic Alternatives, and DayMark. NC Mentor and Day Mark offer crisis services to assist families who need immediate assistance in their homes or community. The emergency department in Pinehurst, as well as DayMark, utilizes tele-psychiatry services for patients who are in urgent need of a consultation with a mental health provider. There are also a few group homes in the county for children with more severe mental health issues that cannot be feasibly managed by parents or schools.

Barriers: There are several barriers to strengthening community supports in the county, primarily dealing with the shortage of mental health providers in the community. DayMark, one of the key mental health providers in the community, is not able to staff a full-time psychiatrist. Furthermore, because the county has a limited number of mental health resources, there is a stigma associated with accessing services from some of the well-known mental health providers such as DayMark. Additionally, emergency services for patients with mental health issues are not adequate. When patients need crisis beds, providers have to look outside of the county to find available facilities. This problem is particularly acute among families with children with mental health conditions. Parents often do not follow the instructions given by their providers when they are in crisis situations with their children, leading them to admit their children prematurely to the ED. Once the child is admitted, nurses have to spend a considerable amount of time finding facilities with crisis beds that also admit children. Because there are no facilities in the county, providers must transport children to facilities far away from their homes.

Strategies to overcome these barriers: Ideally, tele-psychiatry services could be expanded in the county to meet the ongoing needs of mental health patients rather than just for emergency services. The stigma associated with mental health providers could be overcome if neutral providers such as the county's health department had the necessary funding to offer substantive mental health services. Although there are crisis services offered by some of the mental health providers in the area, parents of children with mental health conditions need more support in identifying safe, monitored environments for their children in after school hours; in addition, these parents need sources of ongoing education to help them manage their children's mental health conditions to avert unnecessary admits to the ED.

Use primary care and public health settings to screen for and, when appropriate, provide treatment for mental health and substance abuse problems.
Existing efforts: Participants shared that FirstHealth does always follow the protocol of screening patients for mental health and substance abuse problems. However, this is in the acute care unit. Children receive support in both middle schools and high schools, and schools generally have a nurse or social worker on staff that can address mental health needs. In addition, FirstHealth has implemented a stricter narcotic

policy to reduce the abuse of narcotics for chronic pain by not allowing automatic refills of chronic pain medicine without physician consultation.

Barriers: Although schools do have health care providers and counselors available, these personnel are not staffed in elementary schools. In many cases, the staff-to-student ratio does not allow for at-risk students to receive the appropriate amount of care. Further, the health department, which could serve as a resource to schools, has been losing money and cannot adequately provide these services. Because there is a stigma associated with the services provided by the well-known mental health providers in the county such as DayMark, people need to have more opportunities to be screened in the primary care or public health setting. The participants noted that it has been a challenge to bring all of the providers in the community together to address the mental health/substance abuse problems in the community. Due to the inability to have a community meeting, there is no evidence to prove that the independent providers are properly screening their patients.

Strategies to overcome these barriers: Funding must be re-committed to the health department so that it can also act as a source of mental health screening and treatment for people in the county. If meetings cannot happen with the county's providers, then there needs to be some form of outreach in order to ensure that all providers are aware of the mental health problems in the county and that they are properly screening their patients.

Educate communities about the signs and symptoms of mental health disorders and suicide.
Existing efforts: Participants were not able to identify any existing efforts to educate the community about mental health disorders.

Barriers: The lack of education is most likely due to a lack of resources to make this possible. Mental health providers in the community are already at capacity, so they cannot afford to engage in proactive educational efforts, especially if their staff has to spend all of their time working with patients.

Strategies: This problem stems from funding issues as well as from the shortage of mental health providers in the community. As the participants previously addressed, parents of children with mental health disorders need to have more opportunity to be educated on these issues, so that they can feel more empowered to safely care for their children in crisis situations.

ACCESS TO AND AVAILABILITY OF SERVICES
MONTGOMERY 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.**

Work with employers to maximize insurance coverage
Successful activities: Participants discussed First Plan, which is a health insurance product offered through the First CarolinaCare health insurance company (part of FirstHealth of the Carolinas). First Plan targets small businesses and offers reduced premiums to employers in addition to subsidies to low-wage workers if the business can enroll 100% of the employees who do not have other coverage.

In addition, First CarolinaCare offers a discount on premiums for people who participate in wellness activities and meet wellness goals. The insurance company will go on site, provide regular screenings, and give feedback to their employees. Many of the large employers are offering this benefit to their employees.

Challenges: Participants reported that employers are nervous and confused about the new law. They are talking about whether they should drop coverage.

Educate the public about the state's option for Medicaid expansion
Successful activities: There are no organized activities to educate the public about the potential Medicaid expansion.

Challenges: Participants noted that many of the health care providers (hospitals, physicians) understand that the state had an option to expand Medicaid, but that most of the public does not understand. They thought it would be very helpful if more people understood that the state could expand Medicaid. They also noted that many low-income people might not enroll even if the state did expand Medicaid, as it is hard to get low-income people to apply for existing benefits, even when they are eligible.

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.
Successful activities: There are no community health centers in Moore County. Robeson Health Care Corporation just opened a clinic in Montgomery County (also covering Hoke County). However, they do not have full-time providers yet. There are some other safety net resources in the region, in addition to the small community health center presence. The Office of Rural Health and Community Care provides funding through HealthNet and MAP (medical access plan) to help provide services to the uninsured in Richmond, Hoke, and Montgomery Counties. There are also medication assistance programs, to help link uninsured patients to free or reduced cost pharmaceuticals. The Richmond Health Department also provides some primary care services, and there are limited free clinic services available in the community. There are also school based health centers in some of the schools in the region. FirstHealth also offers some services, including free care, dental clinics, and mobile health services.

Challenges and strategies to overcome those challenges: While there are many different safety net resources, there are not sufficient resources to meet the needs. Montgomery County free clinic closed because of the lack of funding. Moore Free Clinic has also been struggling financially. It is difficult to get providers to volunteer, and to get the necessary resources to run a free clinic. Furthermore, the community does not know about existing safety net resources—even when they do exist. For example, participants reported that doctors do not understand they can use the HealthNet system to obtain care management services for the uninsured with chronic illnesses. Patients do not always know about existing safety net resources either, so they often rely on the emergency department for care.

FirstHealth is a major contributor towards the safety net system, both in terms of direct services provided, and because they have grant writers than help other community organizations write grants to support community health and safety net needs. However, this contribution is not always recognized in the community.

Educate the public about the insurance options available under the ACA, including the potential for Medicaid expansion (NEW)
Successful activities: Participants shared that there is very little going on to educate the public about the new insurance options.

Challenges and systems to overcome challenges: People do not know about the ACA insurance options, and there is not much being organized to educate the public. However, FirstHealth of the Carolinas has just been certified as a certified application counselor.

ACCESS TO AND AVAILABILITY OF SERVICES
MONTGOMERY 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: FirstHealth is currently using telepsychiatry in the ED, and its primary purpose is to prevent bed boarding caused by people being admitted to the hospital involuntarily (involuntary commitments). There has been some initial diabetes education done through telehealth (recruitment into health education program and limited education).

Barriers: Participants shared that it has been difficult to recruit and retain staff psychiatrists and tele-psychiatrists. In fact, coverage has been spotty over the last 2 years. The county now has 9-5 coverage with tele-psych. Average length of stay in the emergency department is 24-48 hours. The group members had a long discussion about linguistic and cultural challenges, and how this may not be easily overcome with telehealth models. There are large immigrant Laotian and Hmong populations. They may be reluctant to use telehealth. Participants discussed the tele-primary care model used in a very rural/isolated health department that was staffed by nurse and remote primary care provider through high-resolution cameras, tele-stethoscope, otoscope, etc. This may be useful model for remote areas.

Support and expand school-based and school-linked health centers
Did not discuss

Funders and policies should support new models leveraging leadership, coordination, and sustainability
Did not discuss

ACCESS TO AND AVAILABILITY OF SERVICES
MONTGOMERY 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 professionals into undeserved areas
Existing efforts: Participants felt that the fit between new recruits to the county and the community depended on an individual's existing network and luck. The county has made efforts to identify people from other rural communities because they believe these people are more likely to serve in rural Montgomery County. Local philanthropy needs to add to the loan repayment programs through the Office of Rural Health and Community Care to increase incentive and demonstrate community commitment to new recruits. Capel (a local carpet manufacturer) does this in small way.

Barriers: Did not discuss.

Involve broader segments of community (e.g., schools, business, and community leaders) in recruitment efforts.
Existing efforts: Existing efforts were not discussed.

Barriers: The whole community needs to be involved in recruitment to showcase the strengths of the community. The recruit and his or her partner need to get familiar with the community to better ensure a match.

Support health professionals new to rural communities
Existing efforts: Experienced providers may need loan repayments, and new providers may not be well equipped to run a practice or supervise non-physician clinicians, so experienced providers can provide training and supervision to help less experienced providers. There has been some collaboration and mentorship for new doctors within the FirstHealth system.

Barriers and efforts to overcome barriers: There should be a path to training that prepares new doctors for full scope rural practice.