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A MESSAGE FROM THE DIRECTOR

Whether you are a family of one or are caring for an entire household, it is likely that you have crossed paths with the programs and services that Buncombe County Health and Human Services (BCHHS) provide.

Core programs such as Immunizations and Communicable Disease Services, Child and Adult Protective Services, Economic Services, and Environmental Health Services provide a foundation of support for individuals and families. Other services like Family Planning, Veterans Services, WIC, and the School Nurses help improve our health and quality of life at any age.

Challenges like infant mortality or the opioid crisis cannot be improved through one agency or single resource, which is why we seek to work with diverse communities and organizations to coordinate and support partnerships that address complex problems facing our citizens. Through a combination of evidence-informed programs, best practices, and connections within our community, we are leveraging resources to improve outcomes for individuals, children, and families in our county.

We hope that this annual report illustrates how BCHHS acts as an intersection where needed resources come together to improve our community’s ability to be safe, healthy, and self-sufficient.
Buncombe County Health and Human Services (BCHHS) is the largest department within Buncombe County Government. The Department is composed of Economic Services, Public Health, and Social Work Services. This year’s annual report illustrates the unique ways BCHHS supports families and businesses in our community through a combination of mandated services and services provided as additional assistance to citizens. BCHHS acts as both an enforcement and educational entity, helping to keep families strong and safe. We also partner with our community to build capacity and foster self-sufficiency through outreach, education, and direct services.

Buncombe’s population has grown to over 253,000. That’s a 6 percent increase in population between 2010 and 2014.* People between the ages of 18 and 65 represent 56.9% of our population with a median household income of $45,167 in 2015.*

* Measured in the 2011-2014 American Community Survey as compared to the 2006-2010 count.

The individuals and stories featured in the FY17 Annual Report are only representative of the population that we serve and are not actual clients of BCHHS. The stories are used to illustrate how individuals in Buncombe County intersect with the services that we provide.

Services for All Generations
As the number of “millennials” and “generation X” demographic groups expand, more residents are starting their careers, growing their families, and beginning to care for aging parents.

Robin and Matt are an example of a growing Buncombe County family. Robin is self-employed as a graphic designer and her partner, Matt, wants to open a landscaping business. They have 2 small children (Stella-5 and Aja-2.) Robin and the children have insurance coverage through the Affordable Care Act (ACA). Their family receives Woman, Infants, and Children (WIC) services which include child health screenings and vouchers to buy healthy food. In 2017, the WIC program brought $2,953,613.97 in federal funds into our local economy.

Stella has type 1 diabetes and is enrolled in elementary school where her health is monitored by a school nurse during the school day. School nurses help coordinate care for students and train staff to meet the special health care needs of their students. There are 55 public schools in Buncombe County families, serving 30,328 students. In FY 2017,
School nurses facilitated 1,200 student health trainings.

School nurses not only provide vision screenings to all students in public schools and monitor immunization records of students, but they also help contain disease outbreaks in schools.

During a norovirus outbreak, over 100 children and staff had to leave school due to a quickly spreading illness. Rapid response was necessary to prevent further disease transmission, which involved collaboration with the Communicable Disease Staff, Environmental Health Specialists, School Nurses and School Administration. In partnership with the State Communicable Disease Branch and State Lab of Public Health, over 100 students were tested and Norovirus was confirmed as the cause of the illness. Public Health Communicable Disease and Environmental Health staff worked with the school to properly disinfect and helped assure the school had adequate supplies of soap and paper towels for students and staff since hand-sanitizer is not effective against Norovirus.

Matt and Robin live in an older home, where lead paint can be a health hazard for young children. Baby Aja was tested at her 12 month well child visit for unsafe lead levels in her blood. The BCHHS Lead Nurse provided follow up to the family to identify possible lead hazards in their environment.

In NC, state and county officials conduct an investigation to help pinpoint the source of the lead exposure when higher blood lead levels are discovered in children.

Robin’s mother recently began treatments for cervical cancer. She was one of 1,339 people who were able to access screening services from the Breast and Cervical Cancer Control Program (BCCCP). Thanks to BCCCP Medicaid and the home health benefits of Medicare, Robin feels comfortable with the home health provider who cares for her mother.

As a veteran, Matt is eligible for the services provided through Buncombe County Veterans Services. The Veterans Services Office assists and advocates for military veterans and eligible family members who are entitled to benefits and services from the U.S. Department of Veterans Affairs, the state of North Carolina, and other agencies. Services include disability claims, education benefits, health care assistance, and home loan assistance, as well as connecting veterans to a multitude of other resources in our community.

In FY 2017, Buncombe County Veterans Services Officers assisted 534 veterans to obtain nearly $3 million dollars in new benefit payments. This is in addition to previous years’ continuing benefits, which improve the quality of life for those who have served our country and infuse money into the local economy.

There are 15,657 households with an older adult, small child, or a person with a disability enrolled in Medicaid in Buncombe County.
Sarah is a single parent with a 2 year old daughter, Caroline. She is a Certified Nursing Assistant in Asheville.

While pregnant with Caroline, Sarah was able to connect with a nurse from the Nurse Family Partnership (NFP) Program. NFP provides targeted, evidence-based services to improve pregnancy outcomes. These highly trained nurses work with pregnant women by teaching preventive health practices, including thorough prenatal care from their healthcare providers, improving their diets, and reducing use of cigarettes, alcohol and illegal substances. In FY 17, NFP provided support to 86 pregnancies. Through NFP, 262 new mothers received home visits and personal nursing support. Sarah’s experience with NFP inspired her to consider a career in nursing.

Sarah and her family are also eligible for Food and Nutrition Services benefits to provide extra funds for healthy food for their household of three. As a Work First participant, she was able to receive financial assistance while she obtained her Certified Nursing Assistant (CNA) certification. Sarah was able to receive funds to help cover the costs of uniforms, books, and other items essential for her training and employment as a CNA. She was able to re-enter the workforce as a CNA with the help of childcare assistance to help with the cost of licensed childcare for Caroline. The Child Care Subsidy program helps working families to overcome the barrier of affordable, quality childcare, so they can hold a job and be independent. In FY 2017, over $6,000,000 in federal and state childcare subsidy payments were distributed to Buncombe County families.

Sarah is a kinship caregiver for her 8 year old niece, Lindsay. Lindsay entered foster care due to parental substance abuse and was subsequently placed with Sarah. Sarah has started the process to adopt her niece and is working with a licensing social worker, the birth parents and other community agencies to maintain family connections, assure safety and achieve permanency for her niece. BCHHS completed 65 adoptions in FY17.
INFRASTRUCTURE THAT SUPPORTS A HEALTHY, THRIVING COMMUNITY:

A Regional Hub for Healthcare

The hospitality and healthcare services are a vital part of our local economy in Buncombe County. These growing industries depend on a robust community infrastructure to stay safe and thriving. BCHHS provides a network of services that support the regional and local economies of tourism and health.

Buncombe County is the regional hub for healthcare in Western North Carolina including Mission Hospital, Mountain Area Health Education Center (MAHEC), the VA Hospital, numerous long term care facilities, retirement communities, mental health providers and hospice care. BCHHS is a core partner in coordinating essential health and safety supports within these major systems of care.

Timely and comprehensive disease reporting allows Public Health practitioners to respond and monitor the changing health status of their community. Their actions also identify the need for prevention activities designed to reach the right people at the right time. The Communicable Disease (CD) Team also coordinate with medical and mental health providers to connect citizens to prevention, testing, and treatment for health conditions that impact their quality of life and ability to find and maintain a stable home and work environment.

The CD nurses partner with Mission Hospital Infection Prevention team and healthcare facilities throughout the county to address and monitor any potential infectious disease outbreaks in healthcare settings. They also track disease outbreaks across county and state lines.

CD staff and Sexually Transmitted Disease (STD) Clinic staff provide outreach and testing at various community events. In FY 2017, staff completed 222 syphilis tests, 249 chlamydia tests, and 249 gonorrhea tests. They follow up on test results and help stop the spread of disease through treatment and education.
Buncombe County Environmental Health inspectors performed 4,873 inspections in 2017, including Food and Lodging establishments, schools, and public pools. Inspectors ensure that our food establishments, schools, camps, living facilities, and hotels are safe, clean, and compliant with FDA Food Code and other safety regulations. The FDA Food Code is a preventative and educational inspection process that can stop foodborne illness before it starts and helps to reinforce the knowledge base of food service professionals. These efforts help keep food service employees healthier, and minimize the risk that residents and visitors contract foodborne or other transmissible illnesses. The dynamic food scene of Asheville requires a strong partnership between food service professionals and health inspectors. An impressive 99% of restaurants in Buncombe County have a sanitation grade of “A” with 100% of all restaurant inspections completed within the target time frames.

The CD team also follows up on bite reports to ensure that people receive prompt medical care. In FY 2017, 49 people completed post-exposure prophylaxis treatment for potential or confirmed rabies exposures.

BCHHS tracks important data on zoonotic viruses (a disease that can be transmitted from animals to people) such as rabies. The Environmental Health (EH) and CD team work in conjunction with animal control officers and medical providers throughout Buncombe County to prevent and control the spread of rabies. In FY 2017, Rabies exposures resulted in 411 animal quarantines, and each animal owner receiving education about the importance of vaccinating their pets.
PROVIDING RESPONSIVE SERVICES FOR OUR CITIZENS

Community Engagement Team:

The BCHHS Community Engagement Team was built on the desire to hear from communities and support their ideas for change. This partnership focuses on individuals and organizations whose missions include creating networks of support, identifying sustainable income opportunities, building individual and community resilience and enhancing community connections.

The Community Engagement Team helps to coordinate partnerships such as the Community Connectors and the Fresh Food Pop-ups along with MANNA Food bank. The Community Connectors and MANNA Food Bank made 235,138 pounds of food available in low wealth communities in FY 2017. Community Engagement Staff also supported the Tipping Point Grants and Grantees, the “Unsung Heroes” event, the Asheville Housing Authority Community Socials and “The Ripple Effect” event featuring family rights activists, Mia Birdsong. Other projects include ongoing work for the MARC Grant (Mobilizing Action for Resilient Communities) and facilitating the Isaac Coleman Community Investment Initiative. The Community Engagement Team continues to provide a bridge between systems and individuals to support a common vision that connects people and ensures healthy public places in our community.

Population Health:

CHA/CHIP (Community Health Assessment/Community Health Improvement Plan) is an essential public health function. This collaborative work is an investment in the health of our community. The CHA process involves the systematic collection and analysis of data that impacts community health and considers contributing health risk factors. BCHHS works closely with Mission Health Systems, MAHEC and WNC Healthy Impact to produce the CHA every three years. The three Community Health Priorities are obesity and chronic disease prevention, infant mortality, and maternal substance use disorder.

Measures such as the infant death rate tell us about maternal health, the accessibility and quality of primary health care, and the availability of supportive services in the community. Infant mortality rates vary substantially among racial and ethnic groups; the death rate continues to be 3.1 times higher for African American infants than for white infants. This data informs the CHIP strategies for improvement and helps the cross-sector team identify contributing health risk factors that can be addressed through the CHIP and by the many stakeholders across our community. BCHHS serves as the anchor institution for CHIP by funding the work, focusing
on the vision and convening the CHIP Advisory board to set and act on priorities. The CHIP teams advocate for systems level changes for the entire population and help create a balance between communities and systems working together for a collective impact in health improvement.

Responding to the Opioid Crisis

Over 17 million painkillers were prescribed in Buncombe County in 2016. This equals almost 68 pills for every adult and child in the County.

Last year, there were approximately 400 babies delivered at Mission Hospital with a positive drug screen resulting from maternal substance use. Neonatal Abstinence Syndrome (NAS) results in complicated and costly hospital stays and presents challenges in assuring effective care coordination and services. The average length of hospital stay for a baby diagnosed with NAS is almost 17 days, with estimated costs of over $66,000.

In response to the growing opioid epidemic in WNC, the BCHHS Social Work Division worked with Mission hospital to embed a social worker within the mother baby unit of Mission Hospital. The social worker brings a timely and consistent response to all incidents of substance misuse and infants affected by NAS, coordinates with hospital staff and ensures a smooth transition between counties when a Child Protective Services report is made.

There were a total of 3,821 births and 3,733 deaths in Buncombe County from July 2016 to June 2017. BCHHS developed a local system to track deaths and causes of death in real time. This allows a rapid and accurate response to emerging issues, such as the opioid crisis. This data is also used to inform BCHHS priorities and formulate action steps to address needs such as infant mortality and racial disparities in health outcomes.

Advocating for Older Adults:

Nineteen percent of people in Buncombe County are over the age of 65. Nationally, approximately 1 in 10 Americans over the age of 60 have experienced some form of elder abuse. One study estimated that only 1 in 14 cases of abuse are reported to authorities.* In Buncombe County there were 1,101 reports of abuse or neglect of older or disabled adults that were screened in for evaluation in 2016. To help raise awareness of elder abuse and services available to older adults in Buncombe
Buncombe County Health & Human Services (BCHHS) strives to provide accountable government that is positioned for success and focused on results. Through strengthened organizational capacity, smart partnerships, and excellence in our programmatic and fiscal operations, we improve client and community well-being by expanding access to integrated services. The Human Services Support Team includes Planning & Evaluation, Business Intelligence, Communications, CQI Leadership, and Quality Assurance for Health and Human Services. As an arm of the County Manager’s office, this team’s purpose is to ensure that organizational outcomes are achieved while balancing programmatic and fiscal needs with the ultimate goal of assuring that core, mandated services are delivered in the most effective manner possible for Buncombe County residents. We accomplish this by working with the departments to provide the necessary tools and supports that allow Health

A Regional Approach to Foster Parent Recruitment:

There are 10,000 children in foster care in North Carolina and around 300 children in foster care in Buncombe County alone. The number of children coming into care has remained mostly the same over the past 5 years, while the number of foster homes has declined, leading to a foster home shortage. In an effort to place all children in their home communities, ongoing recruitment of quality foster homes is necessary. A regional recruitment effort, United for Foster Care WNC, kicked off the response to this growing need for foster parents throughout the region. Child placing agencies from across WNC held a family friendly recruitment and educational event at Asheville Outlets which helped to educate the community about the issues that cause kids to come into foster care and how foster children are being served in our area.

Supporting BCHHS Programs and Services Today and in the Future:

Buncombe County Health & Human Services (BCHHS) strives to provide accountable government that is positioned for success and focused on results. Adult Protective Services, Land of Sky and other groups across our community help to care for our aging populations and disabled adults. Adult Protective Services workers investigate reports of abuse, neglect or exploitation and help connect eligible adults to home health services, adult day care, and aging services—such as transportation or guardianship case management.


County, BCHHS and partner agencies hosted an awareness walk that was attended by over 300 people. BCHHS Adult Protective Services, Land of Sky and other groups across our community help to care for our aging populations and disabled adults. Adult Protective Services workers investigate reports of abuse, neglect or exploitation and help connect eligible adults to home health services, adult day care, and aging services—such as transportation or guardianship case management.
and Human Services staff and our contractors to provide responsive, efficient, customer-focused services. Human Services Planner Evaluators provide analytical support for BCHHS decision making and program implementation. Business Intelligence (BI) develops tools, reports, dashboards to enable Divisions to continually monitor their key performance indicators. In addition, BI staff analyze data and trends alongside the Planner Evaluators. The organization relies on them to flag issues of concern and opportunity. Quality Assurance provides thorough reviews of records to assure the organization is in compliance with Federal and State mandates and policies. The Communication Specialists assist programs with external and internal communication needs. The Public Information Officer provides timely response to the media and citizen questions and requests for public information.

**Continuous Quality Improvement (CQI) and Quality Assurance (QA)**

The goal of the Continuous Quality Improvement (CQI) and Quality Assurance (QA) implementation was to create a framework to assure compliance with state and federal requirements in all programs and pinpoint opportunities for improvement to assure the best outcome is achieved for those that we serve. Evidence of this accomplishment is demonstrated through quality review data for all programs, the development of training in response to results, and a targeted focus on the process of improvement. The success of improvements can be measured in a variety of ways, including increased morale for caseworkers, enhanced training and coaching opportunities across all programs and a focus on involving staff to create solutions. Our CQI system helps assure accurate and timely benefits, quality health care and quality social work services for families and individuals by identifying areas needing improvement on audits. These efforts ultimately create a positive impact and demonstrate fiscal stewardship of public dollars.
DATA TABLES
ECONOMIC SERVICES

FOOD AND NUTRITION SERVICES (FNS)

Food and Nutrition Services (FNS) provides a safety net, keeping food on the table in tough times of hardship and recovery. Of the 17,630 households receiving FNS at the end of FY2016, 58% had children or an elder adult (60+). FNS also supports local jobs by bringing significant dollars into the local economy.

<table>
<thead>
<tr>
<th>Number of households receiving FNS</th>
<th>16,034</th>
<th>Average days to process FNS application (Target: 30 days)</th>
<th>10 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dollar value of FA benefits (all FY17)</td>
<td>$42,035,009</td>
<td>Average dollars monthly Household FA benefit</td>
<td>$209</td>
</tr>
</tbody>
</table>

WORK FIRST

Work First helps families get back on their feet when parents have little or no income to support their children. It provides temporary cash support for the children, job training, and employment services for parents through contracted services with Goodwill Industries.

<table>
<thead>
<tr>
<th>Number of Work First cash recipients</th>
<th>359</th>
<th>Number of non-parental caretakers getting cash</th>
<th>156</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of adults entering employment</td>
<td>66</td>
<td>Average entry dollars hourly wage, newly employed</td>
<td>$10.00</td>
</tr>
</tbody>
</table>

EMERGENCY ASSISTANCE

Emergency Assistance is a County partnership with three community charities for one-time help to families in a temporary financial crisis. Payments go directly to the utility or housing company owed money. Our charitable partnership realizes that working together to keep a family from losing their home through a one-time payment not only helps keep that family whole – it is also a more unified, effective, and less expensive community response to crisis and poverty.

<table>
<thead>
<tr>
<th>Number of families served</th>
<th>1,446</th>
<th>Average benefit per household</th>
<th>$271.77</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dollar value of Emergency Assistance (all FY17)</td>
<td>$397,076</td>
<td>Additional funding sources and programs available through Crisis Intervention Program, Energy Neighbors, Family Preservation, and General Assistance</td>
<td>$1,884,502</td>
</tr>
</tbody>
</table>
MEDICAID

Medicaid plays a vital role to ensure that low-income children, pregnant women and disabled or aged adults have health care coverage. Medical costs can be crippling, so uninsured people often put off care. Moreover, if they become sick, their only option may be the Emergency Room - which drives up health costs for everyone.

| Percent of county population enrolled in Medicaid | Number of families and children covered (children and caretakers) | 31,450 |
| Number of elderly/blind/disabled adults | Average number of days to process Adult Disability applications (Target: 90 days) | 71 days |
| Average number of days to process Family and Children’s Medicaid applications (Target: 45 days) | 25 days |

HEALTH CHOICE

Health Choice offers low-cost children’s insurance to many families who are just over the income limits for Medicaid. Together, these two programs reduce the high personal, social, and economic costs of delaying timely, preventive health care. These programs also bring in substantial dollars that compensate our medical providers and stimulate the local economy.

| Yearly fees to cover child/ren (based on income) | $0 (if low income) | $50/child, $100 max/ family |

COMMUNITY OUTREACH

We all appreciate convenience, efficiency, and choice. HHS designed Community Outreach to connect people with Economic Services when working with a community agency. That partner site is often closer to a person’s home or work – or the outreach “location” may be an agency a resident calls on the phone during evening hours. It’s where clients have come for help – where they’re comfortable. Using new screening technology (Medicaider), partner organizations fulfill their own missions more effectively, thereby strengthening our community continuum of support.

| Number of clients receiving services through out-post staff | 3,547 |

Community CarePartners; Charles George VA Medical Center; MAHEC; Mission Hospital; Minnie Jones Health Center (WNCCHS); WIC West
CHILD CARE SUBSIDY

The Child Care Subsidy program helps families struggling to make ends meet to overcome the barrier of affordable, quality childcare, so they can hold a job and become independent. County HHS partners with Southwestern Child Development, an experienced regional expert in this field. Southwestern’s efficient operation has maximized our use of capped annual funding from the State. Allocations have been cut in recent years, despite increased community need in the face of a recession.

<table>
<thead>
<tr>
<th>Total child care subsidy dollars</th>
<th>$6,399,423.71</th>
<th>Avg. number of children served per month</th>
<th>1,793</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of children on waiting list for child care</td>
<td>36</td>
<td>Avg. number of months on waiting list</td>
<td>0</td>
</tr>
<tr>
<td>Percentage of need met</td>
<td>98%</td>
<td>Percent of total child care dollars expended</td>
<td>100%</td>
</tr>
</tbody>
</table>

CHILD SUPPORT

Buncombe County’s Child Support unit combines investigative and legal expertise to get children cash support and other benefits from their noncustodial parent. Secure child support payments can lift a family out of poverty and avoid future reliance on economic services programs. The County partners with Veritas for this service. Nationwide, the economic downturn has reduced child support compliance as fewer absent parents have the means to pay.

<table>
<thead>
<tr>
<th>Unduplicated children receiving support</th>
<th>10,235</th>
<th>Collection rate on past due support</th>
<th>71.87%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total dollars collected for Buncombe</td>
<td>$13,649,090</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PUBLIC HEALTH

REPRODUCTIVE HEALTH

The Family Planning Program provides confidential family planning services to support women’s health in the childbearing years and the best possible birth outcomes for our babies. Family Planning also offers services to males.

<table>
<thead>
<tr>
<th>Number of Family Planning clients served</th>
<th>1,770</th>
<th>Number of Family Planning clinic visits</th>
<th>3,727</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent of women that were using a highly effective or most effective contraceptive method (pill, patch, ring, injection, implant, IUD)</td>
<td>76%</td>
<td>% of Women using Long Acting Reversible Contraceptives</td>
<td>24%</td>
</tr>
</tbody>
</table>
PREVENTATIVE HEALTH SCREENING

The Breast and Cervical Cancer Control Program (BCCCP) and the WISEWOMAN program (heart health screening) provide preventive health screening and education for low-income, uninsured women.

| Number of women screened for heart disease risk | 1,090 |
| Number of women screened for Breast and Cervical Cancer | 1,339 |
| Number of women diagnosed and treated for cancer | 15 breast and 10 cervical |

PUBLIC HEALTH EMERGENCY PREPAREDNESS

The Preparedness program focuses on enhancing Health and Human Services ability to quickly and effectively respond to a wide range of public health threats, including infectious diseases, natural disasters, and biological, chemical, nuclear, and radiological events.

| Compliance with NC PHP&R directives and programs | 100% |

IMMUNIZATION, COMMUNICABLE DISEASE AND STD/HIV

Immunization and STD/HIV services prevent epidemics and the spread of communicable diseases through ongoing prevention activities, testing and treatment services and a rapid, effective response to urgent and emerging community outbreaks.

| Number of immunizations given (including flu) | 11,217 |
| Percent BC HHS children properly immunized at 2 | 96% |
| Communicable disease investigations | 3,600 |
| Confirmed reportable diseases | 2,062 |
| Communicable disease clinic visits monthly average (HIV, STD, TB) | 407 |

ONSITE GROUNDWATER

Onsite groundwater services assure protection of groundwater through properly installed septic systems and permitting of new wells.

| Number of septic permits issued | 2,462 |
| Number of well permits issued | 524 |
| Average days from the date clients are ready begin work to the date of initial visit by onsite staff | 4.0 |
FOOD AND LODGING

Food and lodging provides inspections of regulated food, lodging, nursing home, day care, and summer camp facilities to protect residents and tourist populations.

<table>
<thead>
<tr>
<th>Facility inspections</th>
<th>4,873</th>
<th>Restaurants in compliance with inspection standards</th>
<th>100%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Restaurants receiving Grade “A”</td>
<td></td>
<td>99%</td>
<td></td>
</tr>
</tbody>
</table>

SCHOOL HEALTH

School health programs reduce health barriers that impact educational success. School Nurses are based in our County and City schools, prioritizing the care of students with significant health needs and identifying those at risk for serious health concerns. Nurses develop individual care plans for these students in consultation with parents, physicians, and school staff. Key to this work is health promotion and education that supports a lifetime of healthy choices.

<table>
<thead>
<tr>
<th>School staff trained to give medications</th>
<th>675</th>
<th>Number of Students Care Managed</th>
<th>204</th>
</tr>
</thead>
<tbody>
<tr>
<td>School staff trained to provide health procedure</td>
<td></td>
<td>1,200</td>
<td></td>
</tr>
</tbody>
</table>

NURSE FAMILY PARTNERSHIP

Nurse Family Partnership (NFP) is an evidence-based nurse home-visiting program that targets low-income first-time parents. NFP partners with them from pregnancy through their child’s second year. NFP’s goal is to improve pregnancy outcomes, improve child health and development, and increase economic self-sufficiency.

<table>
<thead>
<tr>
<th>Number of babies born</th>
<th>86</th>
<th>Number of mothers served</th>
<th>262</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of NFP babies born low birth weight</td>
<td>8.58%</td>
<td>% of NFP children with substantiated abuse/neglect</td>
<td>5.36%</td>
</tr>
</tbody>
</table>

VETERANS SERVICES

The Veterans Services Office advocates for the 19,000 veterans in Buncombe County and connects them to services, benefits, and resources to improve their quality of life.

<table>
<thead>
<tr>
<th>New Veteran Cases Opened in 2017</th>
<th>534</th>
<th>Monthly Benefits and Claims Awarded (New Payments)</th>
<th>$748,124</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accrued Benefits (New Payments)</td>
<td>$2,109,680</td>
<td>Monthly and Accrued Benefits Grand Total</td>
<td>$2,857,804</td>
</tr>
</tbody>
</table>
WIC / NUTRITION

The Women Infants and Children (WIC) nutrition program provides education, nutritious foods, and breastfeeding support to improve the health and nutritional status of low-income women and children.

| Average number of enrolled per month in WIC | 4,292 |

SOCIAL WORK SERVICES

PERMANENCY PLANNING

Permanency planning allows Social Work Services to partner with families and other community agencies to achieve timely permanence for children, whether that is safe reunification with their family, guardianship with a relative or kinship provider, or adoption.

<table>
<thead>
<tr>
<th>Children in Foster Care</th>
<th>356</th>
<th>Average number of children in custody with Social Work Services, per month</th>
<th>334</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children who exited foster care to be reunified with their families remained safely in their home and did not re-enter Foster Care</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

FOSTER PARENT TRAINING AND LICENSING

Social Work Services trains, licenses, and supports families who open their home to children who cannot safely live with their families.

<table>
<thead>
<tr>
<th>Average number of licensed foster homes, per month</th>
<th>88</th>
<th>New foster families</th>
<th>29</th>
</tr>
</thead>
<tbody>
<tr>
<td>Families approved for adoptive placement</td>
<td>26</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ADOPTION ASSISTANCE

Adoption Assistance helps children achieve permanency and may provide families with help when they adopt a child with special needs from foster care.

| Children receiving adoption assistance | 568 | Number of adoptions finalized | 65 |
CHILD PROTECTIVE SERVICES

Child Protective Services investigates and assesses all allegations of child abuse, neglect, or dependency.

<table>
<thead>
<tr>
<th>Responses to reports of abuse, neglect, or dependency of children</th>
<th>3,220</th>
<th>Children involved</th>
<th>4,497</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children who did not enter foster care</td>
<td></td>
<td></td>
<td>97.1%</td>
</tr>
</tbody>
</table>

FAMILY IN-HOME SERVICES

Family In-Home Services allows Social Workers to partner with families to strengthen their ability to safely parent their child in their own home.

<table>
<thead>
<tr>
<th>Total number of families served</th>
<th>409</th>
<th>Total number of children served</th>
<th>916</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children who remain at home or with kin while receiving In-Home services (thus avoiding foster care)</td>
<td></td>
<td>94.1%</td>
<td></td>
</tr>
</tbody>
</table>

ADULT PROTECTIVE SERVICES (APS)

Adult Protective Services provides a timely, comprehensive, and respectful response to the needs of elders and adults with disabilities who are victims of abuse, neglect, or exploitation.

<table>
<thead>
<tr>
<th>Responses to reports of abuse, neglect or exploitation of elderly and disabled</th>
<th>1,145</th>
<th>Percent of Evaluations with Mistreatment Confirmed</th>
<th>41%</th>
</tr>
</thead>
</table>

ADULT CARE HOME LICENSURE AND MONITORING

Adult Care Home Licensure and Monitoring is responsible for responding to complaints related to compliance with regulations and issues of resident safety. Buncombe County Health and Human Services refers areas of concern to the Department of Health and Human Services Regulation, the entity that has authority for enforcement.

<table>
<thead>
<tr>
<th>Adult care homes monitored</th>
<th>84</th>
<th>Complaints investigated</th>
<th>220</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent of investigations with confirmed mistreatment</td>
<td>26%</td>
<td>Average number of adults using Adult Day Care, per month</td>
<td>41</td>
</tr>
</tbody>
</table>
BUNCOMBE COUNTY
HEALTH AND HUMAN SERVICES

ADMINISTRATION
Jim Holland, HHS Director and Assistant County Manager

Our overall mission at Buncombe County Health and Human Services is to keep our community strong by working to align our community resources in ways that are efficient and lead to better outcomes for our citizens. Through an integrated Health and Human Services, we give individuals and families the tools and supports they need so they are better able to make those good choices.

HHS SUPPORT TEAM
Christina McEntee, Division Director

The Health and Human Services Support Team provides assistance to programmatic areas through planning, evaluation, budget development and support, quality assurance, and public information and communication. The Team supports HHS programs in a number of ways, including fiscal monitoring, a focus on continuous quality improvement, assuring timely and accurate internal and external communication, program development and planning, establishing priorities and implementing program objectives, and monitoring, evaluating, and modifying services to best maximize dollars.

SOCIAL WORK SERVICES
Tammy Shook, Division Director

Our mission in Adult and Child Protective Services is to partner with individuals, families, and communities to strengthen their efforts toward independence, permanence, and safety.

We aim to prevent abuse, neglect, and exploitation of vulnerable children and adults and to promote self-reliance and self-sufficiency for individuals and families.

ECONOMIC SERVICES
Phillip Hardin, Division Director

Buncombe County’s Economic Services provides services that help low-income families get and maintain work, support employment, promote quality health care coverage, food assistance, energy assistance, and other economic supports for families.

We aim to promote self-reliance and self-sufficiency for individuals and families.
PUBLIC HEALTH
Jan Shepard, Division Director
Dr. Jennifer Mullendore, Medical Director / Clinical Services Division Director

Our mission is to promote and protect the public’s health and to assure through community partnerships that all people in Buncombe County have the opportunity to make healthy choices within a healthy environment.

We aim to: help people attain high quality, longer lives free of preventable disease, disability, injury and premature death, achieve health equity by elimination of disparities to improve the health of all groups, foster social and physical environments that promote good health for all, and promote quality of life, healthy development and healthy behaviors throughout all stages of life.

OPERATIONS
Jennifer Chilton, Division Director

The HHS Operations Division oversees the Financial and Budgetary functions of the agency. This includes oversight of HHS related contracts, operational needs of the agency, State systems, HIPAA compliance as well as Title VI compliance.

HUMAN RESOURCES
Amy Davis, Division Director

Through workforce and organizational development strategies, we support a robust workforce across Health and Human Services. Human Resources partners with all HHS Divisions to implement best practices in hiring and training, support employee resilience, and maintain a safe and healthy workplace.

FAMILY JUSTICE CENTER
Julie Klipp Nicholson, Coordinator

Management of the Buncombe County Family Justice Center, a place where victims of sexual and domestic violence can access an array of supportive services from multiple onsite partner agencies.
We would like to acknowledge the contributions of FY 2017 Senior Leadership Staff, Mandy Stone and Lisa Eby. In July 2017, Mandy Stone was appointed as the Buncombe County Manager and Lisa Eby now serves as the Human Resources and Community Engagement Director for Buncombe County Government. We are grateful for their leadership and vision throughout their years with BCHHHS.

ACKNOWLEDGMENTS

We appreciate the guidance and support of the County Commissioners, County Manager, and Governing Boards.

County Commissioners

Brownie Newman (Chairman)  Ellen Frost
Jasmine Beach-Ferrara       Mike Fryar
Al Whitesides               Robert Pressley
Joe Belcher

Buncombe County Manager

Mandy Stone

Health and Human Services Board

Candice Thul                             Lucy Lawrence
David McClain, MD                        Rachel Keener
Dwight Mullen                           Richard Oliver, DVM
Ed Coryell                               Rick Elingburg
Ellen Frost                              Rick Weigel, MD
Frank Castelblanco                      Sharon West
Jacquelyn Hallum                       Sonya Greck
Jennifer Partlow                        Stephanie Kiser, RPh
Jennifer Wehe-Davis, BSW                Susanne Swanger, Chair
Jim Pitts, PhD                           Terry VanDuyn
Johnnie Grant                           Thomas Priester
Ken Putnam, PE                           Yvette Jives
3 EASY WAYS TO CONNECT TO SERVICES

Visit Our Offices:
40 Coxe Avenue
(Economic Services)
35 Woodfin Street
(Social Work Services)
53 South French Broad Avenue
(Health Services)
7 Yorkshire Street
(WIC Program)
339 New Leicester Highway
(WIC Program)

Call Us:
Economic Services:
(828) 250-5500
Social Work Services:
(828) 250-5500
Public Health Services:
(828) 250-5000

Visit Our Webpage:
www.buncombecounty.org/hhs