

Chapter XII

HEALTH AND HUMAN SERVICES

ELEMENT

XII-1 INTRODUCTION

The purpose of this section is to describe goals and strategies that promote a healthy living environment for the betterment of the community. A healthy community environment is influenced by many factors. Research focusing upon the interaction between health and the environment shows that health is not only affected by the direct pathological impacts of various chemical, physical, and biological agents, but also is strongly influenced by factors on broader physical and social environments. These include; urban development and transportation, safe housing, and opportunities for recreation.

XII-2 ASSESSMENT

Mason County has one incorporated city (Shelton), and two Urban Growth Areas (Allyn and Belfair), with most of the county population located in the extensive rural areas. Seniors and retirees choose to live in Mason County due to its proximity to large population centers and the relative affordability of local housing.

- A majority of Mason County residents live in unincorporated parts of the county (**83%**) as compared to 17% in the incorporated area (Shelton).
- Mason County has a larger percent (**16.7%**) of the population that is 65 years of age or older compared to Washington State (**11.3%**)
- Washington’s Office of Financial Management is forecasting the percentage of population 65 years of age and older in Mason County will increase to **27.9%** by 2025.

Mason County fares poorly in the death rates (age-adjusted*) from selected diseases when compared to the rest of Washington:

- Death from diseases of the heart: Mason County rate of **2.23**/1,000 people compared to state rate of **1.90**/1,000
- Death from major Cardiovascular Disease: Mason County rate of **2.97**/1,000 people compared to state rate of **2.73**/1,000.
- Death from Influenza & Pneumonia: Mason County rate of **25.7**/1,000 people compared to state rate of **18.5**/1,000.

- Death from Chronic Lower Respiratory: Mason County rate of **58.2/1,000** people compared to state rate of **46.2/1,000**.
- Death from Chronic Liver Disease: Mason County rate of **17.0/1,000** people compared to state rate of **9.2/1,000**.

*age-adjusted rate; rate per 1,000 age-adjusted to US 2000 population.

Mason County also fairs poorly in terms of death rates for all adults, and life expectancy when compared to the other 38 Washington counties:

- Among all adult over 18 years of age, Mason County has the **10th highest** death rate in the state, with an age-adjusted rate of **1,324/100,000** people as compared to the state average of **985/100,000** people.
- Mason County has the **3rd highest** premature adult death rate in the state.
- Mason County children born in 2001 have a life expectancy of **76 years** compared to **78 years** for state. This is the **5th** lowest life expectancy rate in the state.

Mason County motor vehicle death and non-fatal hospitalization rates are high compared to state figures:

- Mason County’s motor vehicle death rate is **23.5/1,000** people compared to sate rate of **12.5/1,000**.
- Mason County’s motor vehicle accidents non-fatal Hospitalizations rate is **88.2/1,000** compared to state rate of **47.6/1,000**.

Research shows that the health of a community is not exclusively determined the quality of the health care system; social determinants of health have been identified as most influential indicators of health. Social determinants of health are associated with income, education levels, and other social factors. On many of the social determinants of health factors, Mason County does not compare favorable to the state average.

- Mason County has the 11th lowest per capita income among Washington counties, with an average of **\$24,689** compared to a state average of **\$33,254**. (2003)
- The percentage of family households living under the poverty level in Mason County is **15%** compared to state average of **11%**. (1999)
- For Mason County family households with young children; **23%** are living under the poverty level, compared to a state average of **15%** (1999)

There have been significant changes in family structure as well. Between 1990-2000, the number of children living with “other relatives” grew at a faster rate within the county (99% increase)

compared to state (56% increase). In 2000, over 12% of Mason County children under the age of 17 years were living in a household that did not include either biological parent, compared to the state average of 8%. Additionally:

- The birth rate of unmarried mothers in Mason County is significantly higher than statewide, **41.3%** to **28.0%** respectively (5-year rate 1997-2001).
- Mason County’s rate for children served by Children with Special Health Care Needs Program is nearly double the state rate, **10.2/1,000** children compared to **6.0/1,000** (2004).
- The number of accepted child abuse and neglect cases rates is greater in Mason county, **52.7/1,000** children, than the state rate of **36.5/1,000** (2004)

Although Mason County compares well to the state in percent of adult with some college education, the county does not compare favorable with regard to the percent of adults with a BA degree or higher;

- **16%** of Mason County residents have a BA degree or higher, compared to the state average of **28%**. (2000)
- Nearly **17%** of Mason County residents over the age of 25 have not completed high school or it’s equivalency, compared to a state average of **13%**. (2000)

In 2005, the National Association of Counties (NACO) through funding by the Federal Office of Rural Health Policy, completed a survey of Mason County residents to learn public opinion and useful information regarding Mason County’s health care system. The survey revealed that over **25%** of Mason County residents felt there are not enough doctors in Mason County. This affirms the findings of the US Department of Health and Human Services, which has consistently designated Mason County as a Health Professional Shortage Area (HPSA) for primary care providers, dental care providers and mental health care providers. This survey additionally revealed that:

- In the past 18 months, at least one member of over **64%** of Mason County households has been to a specialist.
- Nearly **75%** of the patients treated by a specialist cited a referral or health coverage as the reason for selecting this specialist.

Other factors related to life style behaviors (such as physical activity) can be directly influenced by the communities we live in and contribute to the overall health of the community:

- Mason County residents are more reliant of their private vehicles compared to the state: **91%** of Mason County residents use private vehicle to travel to work compared to **86%** statewide.

- Only **2%** walk or bike to work, compared to state average of **4%**.
- Only **1%** use public transportation, compared to state average of **5%**.
- **42%** of Mason County work force worked outside the county.
- **32%** have commutes that are between 30-59 minutes one-way, while **13%** travel an hour or more to get to work.

These commuting patterns are not unexpected in a rural community, but can be contributing factors in lowering the percentage of citizens exercising routinely.

XII-3 ANALYSIS

As a rural community, populations are dispersed and services are limited in many communities. As a result, most county residents are highly dependent upon the automobile as the primary means to access goods and services. This can limit opportunities for walking or bicycling as a means for exercise. The county could offset this through the development of public trails to promote walking or bicycling, and improving the quality and accessibility of county recreational facilities. The county could also increase efforts to inform the citizenry of the many opportunities for exercise and relaxation within Mason County provided by the numerous County and State Parks, and Olympic National Park.

Within the more densely populated urban growth areas, alternative modes of transportation are encouraged. However, much of the supporting infrastructure is not yet in place. The County has plans to develop a Master Parks Plan in 2006, and should integrate this plan with the parks and public trails called for within the various sub-area plans of the urban growth areas. This would further support the development of walking or biking trails within the urban growth areas, and improve access to the many recreational facilities within Mason County.

Access to local, affordable, quality health care is important to promote community health. However, as in other rural communities, patients regularly travel out of the area to receive medical services and treatment. Primary reasons for this include: (1) the limited number of health care providers located in Mason County; (2) recent migrants to the county choose to retain the services of providers they are already familiar with, (3) local providers are not affiliated with the group insurance plans provided by local employers, and: (4) Northeast Mason County residents (Allyn and Belfair) are closer to emergency and urgent care providers located in Kitsap County than Mason General Hospital. Local access to medical services likely result in a greater number of residents taking advantage of these services, thus improving community health. Improving local access to medical services will be more critical as the proportion of residents over 65 years of age increases, and would support economic development objectives regarding expansion of the health care sector. Results of the NACO survey should be utilized in the preparation of refined goals, policies, and strategies that address community needs and improve health care services within Mason County. This could include identifying and developing strategies specifically crafted to:

- Identify gaps in the health care service and delivery system in Mason County, such as the shortage of primary care providers, and identify strategies to address these gaps,
- Promote and support programs and services that meet the specific health and social needs of the range of households within Mason County,
- Study the feasibility of establishing a **Medical Savings Account Plan** for Mason County citizens, and;
- Establish a **Federal Qualified Health Clinic** (FQHC) in Mason County.

County, regional and state social programs also influence the health of families and the community. Social programs can offer a range of services, including supplying food to needy families, subsidized child care, and providing leaning aids for developmentally disabled children, to name a few. These programs respond to families and individuals in crisis; but by providing various means of support can have a profound, positive affect on the entire community. Mason County should strive to promote a community where people can balance work, family, friends and community involvement. This can be achieved in part by promoting and supporting a system of practical, functional, and accessible social programs.

It is particularly important that local groundwater and critical aquifer recharge areas are protected in Mason County, as private and small community wells are the source of drinking water for most Mason County residents. A number of policies and programs that help protect critical aquifer recharge areas and assist in the management of watershed areas are already in place and carried out at a local and state level. Group A (public water supply wells) and Group B (smaller public water supply wells) systems are required to perform periodic testing to verify delivered water meets accepted quality thresholds; however, once installed there is no requirement for periodic testing of private wells. Additionally, Group A and B wells are typically deeper than private wells, making these community wells less susceptible to contamination than the more shallow private wells. Thus, by encouraging community water supply systems, the County would increase the likelihood of residents having access to reliable, clean drinking water. Mason County may wish to consider crafting supplemental policies that would increase the quality and reliability of the water supply system by promoting community wells to reduce the need for less regulated new private wells, and reevaluating countywide storm water management policies as increased development occurs in the urban growth areas.

XII-4 GOALS AND POLICIES

General County-wide Planning Goals and Policies:

Goal 1:

Mason County shall promote and support local and regional health care planning, and ensure health care planning focuses on the primary local health care needs.

Policies:

1.1: Mason County will improve public and private sector participation in health and human service planning and implementation activities.

1.2 Mason County shall periodically conduct an update to the community health assessment.

[Refer to XII.5 A. for implementation strategies and objectives.]

Goal 2:

Mason County shall support policies and practices that promote safer drinking water.

[Refer to XII.5 B. for implementation strategies and objectives.]

Goal 3:

Mason County shall promote and support policies and programs that improve local access to public trails and recreational facilities.

Policies:

3.1: Mason County will advocate for new road development and road upgrades that will accommodate safe bike/pedestrian pathways.

3.2: Mason County will work with Washington Department of Transportation during the planning of highway upgrades to build safe bike/pedestrian pathways in desired locations.

3.3: Mason County will support policies that advocate alternative (non-automobile) access to community amenities.

3.4: Mason County shall evaluate and improve methods advising residents of the abundant county, state, and federal recreational facilities within Mason County.

[Refer to XII.5 C. for implementation strategies and objectives.]

XII-5 IMPLEMENTATION STRATIGIES AND OBJECTIVES

Strategies and Objectives to promote a healthier living environment:

A. Mason County shall develop an action plan to determine which human and health-related planning processes/efforts will benefit from County participation and input, and will ensure that the County is appropriately represented in these planning activities. Methods and objectives would include:

1. To work with the community to identify gaps in health care service and delivery system, and identify strategies to addresses these gaps.
2. To identify on-going planning processes, identify the lead agency, and evaluate the role of County representation in the planning process.

3. To consider establishing a Community Health Care Task Force to address health care issues.
 4. To complete an inventory of county staff involvement in on-going health and human service planning activities.
 5. To identify the most appropriate stakeholders to represent the county, and ensure that that representative has the needed information/data to properly advocate for the community, as a whole.
 6. Mason County will use its political capital to encourage absent stakeholders and critical partners to participate in county-wide planning activities to achieve healthier lifestyles.
- B. Evaluate existing programs and policies regulating lands within critical aquifer recharge areas, consider establishing policies and programs encouraging community water supply systems, and consider updating countywide storm water management policies . Considerations would include:
1. Reducing the number of new private wells within the urban growth areas by promoting the development of infrastructure (drinking water, sewer, transportation) that is necessary to support the development of high-density housing in designated areas.
 2. Exploring strategies (policies, incentives, and/or practices) that encourage multiple-party wells.
 3. Exploring strategies (policies, incentives, and /or practices) that encourage multiple-party on-site treatment systems or community sewer systems.
 4. Consider periodic updates to the countywide storm water management policies and programs that address potential negative effects of increased urban style development.
- C. Support implementation of the Public Trails Policies and establishment of a network of pedestrian and bicycle paths within Mason County. Components may include:
1. Supporting and promoting pedestrian-oriented development that provides access to community amenities (like shopping, social/health service facilities, places of worship, schools, and recreational facilities) within designated portions of the urban growth areas.
 2. Carefully consider the need and anticipated usage of trails when prioritizing county-funded trails projects.
 3. Consider establishing unimproved trails (i.e. gravel or decomposed granite) and evaluating usage over a period of time prior to committing funds for paving or constructing other trail improvements.