

Randolph County

State of the County Health Report

2015

This document provides a review of the priority health issues determined during the 2013 Community Health Assessment conducted by the Randolph County Health Department in conjunction with Randolph Hospital. This information is designed to update the community members, leaders, agencies, organizations and others on the progress made in addressing identified priority health issues. The report highlights the most current data of Randolph County and the state of North Carolina. The data includes demographics, leading causes of death, morbidity/mortality and emerging issues.

Identified Health Priorities include:

Community Health Behaviors

Focus Area: Nutrition

Action Plan: Addressing overweight/obesity by partnering with at least one food retail store and Communities in Schools to provide and promote healthier food and beverage options.

Community Health Behaviors

Focus Area: Physical Activity

Action Plan: Addressing overweight/obesity through the expansion of joint-use-agreements throughout Randolph County for the use of physical activity resources.

Reducing Substance Abuse

Focus Area: Tobacco Use

Action Plan: Reducing tobacco use and creating more tobacco-free areas.

Community Issues

Focus Area: Access to Care

Action Plan: Decreasing the number of uninsured individuals and providing education regarding the variety of insurances available.

Randolph County Public Health Mission Statement

To preserve, protect and improve the health of the community. This mission is accomplished through the collection and dissemination of health information, education and service programs aimed at the prevention of disease, protection of the environment an improvement of the quality of life for our citizens.

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Identified Health Priorities

Community Health Behaviors

Focus Area: Nutrition

Action Plan Objectives:

- By September 2016, assessment of Randolph County's food environment will be completed and at least one corner store will be identified and targeted for possible transition to offering and promoting healthier food and beverage options.
- By September 2016, incorporate at least one healthy food option, per day in backpacks for children participating in the Backpack Pal Program.

Progress to date:

Healthy Corner Store

The health department utilized the USDA Food Access Research Atlas to determine food deserts within the county. The health educator, with help from a Master's of Public Health student intern chose the southeast area of the county for the first corner store initiative. In March, 2015, the Nutrition Environment Measures Survey was used to identify ways to promote and enhance healthful items. (*A food desert is defined as: urban neighborhoods and rural towns without ready access to fresh, healthy and affordable food.*) In July, 2015, the health educator provided marketing items and display materials to Routh's Grocery.

Next steps will include:

- Evaluation of current store: evaluate the success of the project and determine if enhancements attracted more customers and brought in more revenue.
- Assessment and implementation of future stores.

Backpack Pal Program

A new shopping list was created for use of the program by a nutritionist and a group of parents. Volunteers of the program have been advised to add at least one healthy food choice per bag. In addition, the Randolph Hospital Community Health Foundation awarded First United Methodist Church of Asheboro and Communities in Schools a \$3,300 grant to fund a community garden. Produce yielded from the garden will be used in the backpack program.

Community Health Behaviors

Focus Area: Physical Activity

Action Plan Objective:

- By September 2016, baseline data for joint-use-agreements will be collected and relationships will be established in at least three areas of Randolph County, with those entities that have space and opportunity to make a joint-use-agreement feasible.

Progress to date:

The health department has discussed the possibility of a joint-use-agreement with the Asheboro/Randolph YMCA. The Y has a walking track that is open to the public, not just members. It is, however, not known by all residents that this walking track is accessible to them. Therefore, having a joint-use-agreement in place may help residents become more aware of this great resource for physical activity.

Reducing Substance Abuse

Focus Area: Tobacco Use

Action Plan Objectives:

- By September 2016, increase the number of residents who are provided with a safe and healthy smoke/tobacco-free environment by working with at least two municipalities to adopt a smoke/tobacco-free outdoor policy.
- By September 2016, increase the number of providers that offer smoking cessation by training 12 individuals to facilitate six smoking cessation programs throughout the county.

Progress to date:

Smoke/Tobacco-Free Environments

The health department is working with the Randolph County Wellness Coordinator to establish smoke/tobacco-free policies. Possible locations include campuses of the Randolph County Office Building, the sheriff's office, emergency management and the department of social services.

Smoking Cessation

Randolph Hospital coordinated a facilitator training for the Quit Smart Tobacco Cessation Program. Twelve individuals representing the hospital, health department and local medical providers participated in the training that was held on February 20, 2015.

To date, 20 series of Quit Smart classes have been conducted (each series contains three classes). Eighty-five participants have enrolled, resulting in 58 who completed the program and are no longer using tobacco. In addition, Randolph Hospital applied for and received a grant from Pfizer to offer more Quit Smart classes. This extra funding has allowed for classes to be offered every month with a dedicated facilitator. The hospital worked with respiratory therapy and nursing departments to create an easy-to-use referral form to engage inpatients and register them for a Quit Smart class before they are discharged.

Community Issues

Focus Area: Access to Care

Action Plan Objectives:

- By September 2016, decrease the number of uninsured residents within Randolph County by 15.5% through the Insurance Exchange.
- By September 2016, provide education for 4,030 uninsured Randolph County residents regarding the Insurance Exchange.

Progress to date:

Randolph Hospital

Randolph Hospital was the only hospital in North Carolina selected to receive a federal grant to start an Insurance Navigator Program for individuals who potentially qualify for healthcare exchanges. The original grant was for one year and was awarded in September 2013. The hospital applied for a Federal Extension Grant that was awarded September 2014 that will go through August 2015. An additional three-year grant was given to the hospital that began September 2015.

Focus Area: Access to Care (cont.)

The Insurance Navigation Program is designed to help consumers understand new coverage options and find the most affordable coverage that meets their healthcare needs and budget. The hospital employed five navigators who cover the counties of Randolph, Montgomery and Moore. The Insurance Navigation Team works day-in and day-out to reach members of the community who Appointments are scheduled to assist individuals with the application process. The application process is the first step towards actual enrollment. The Navigators are strategically working with community partners to target as many people as possible who may not have insurance because of unemployment, underemployment or those who are disabled, but do not qualify for Medicaid. The team is working with area churches, health departments, Randolph Family Health Care at MERCE Health Center in Asheboro, Christian's United Outreach Center, local physicians' offices and self-employed individuals in order to target those who could benefit from the insurance plans.

The hospital expects to serve 10% or 1,306 of the current 13,059 Randolph Hospital patients who presently do not have any other health care coverage or come to the hospital as self-pay patients. The hospital also plans to have 10% or 2,994 of all uninsured people in Randolph, 10% or 568 from Montgomery and 10% 1,493 of those uninsured from Moore counties directed to the Exchange by the end of the enrollment period. This will total 5,055 people in addition to the current 1,306 of hospital patients. During the time period when enrollment is closed, the Navigators will host periodic community events to educate and inform eligible attendees about their health care options.

From October 2013 through July 2015, the following number of individuals have been contacted by an Insurance Navigator:

- In person first time appointments = 1,700
- Post enrollments appointments = 931
- Phone / internet inquires = 4,063
- Enrollments = 754
- Total one-on-one assistance = 2,539

As of August 1, 2015 the data metrics changed per state reporting, in order to make the data collection more streamlined and efficient for Navigators. Therefore the categories were updated to the following:

- Number who received assistance with general inquires about health coverage: 392
- Number who sought enrollment assistance from a Navigator: 586
- Number who sought post-enrollment assistance from a Navigator: 268

Randolph Family Health Care at MERCE

Randolph Family Health Care at MERCE also started an Outreach and Enrollment Program. Certified Application Counselors received required federal training and are certified to perform "navigation like" duties. The Certified Application Counselors only work with individuals, not small businesses, like Randolph Hospital.

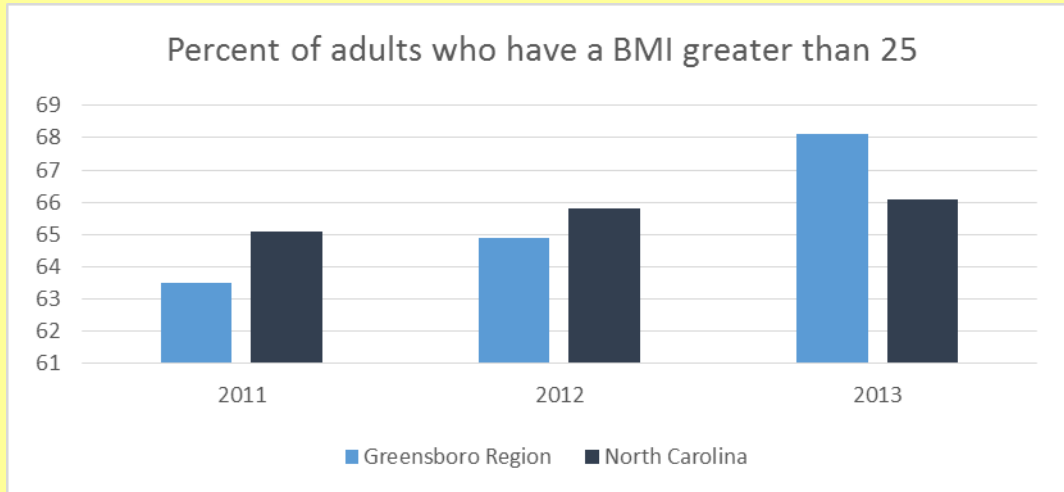
During 2015, the following number of individuals have utilized the Outreach and Enrollment Program:

- Number of those assisted by the Certified Application Counselor = 686
- Number of applications submitted to the Marketplace = 53
- Estimated number of individuals enrolled with the assistance of a trained Certified Application Counselor = 37

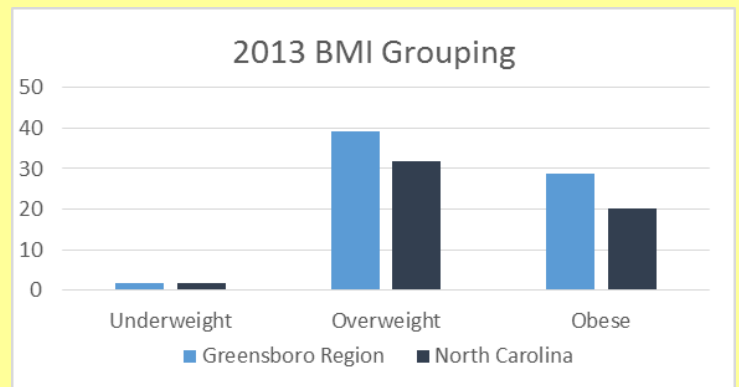
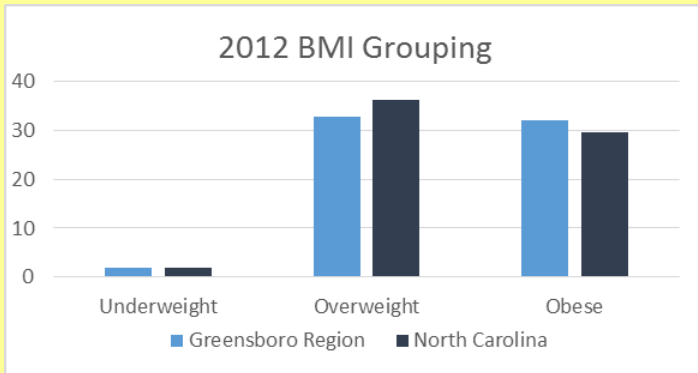
Overweight and Obesity Data

The Behavioral Risk Factor Surveillance System (BRFSS) is a random telephone survey for state residents aged 18 and older in households with telephones. The North Carolina Division of Public Health has participated in the BRFSS since 1987. Through BRFSS, information is collected in a routine, standardized manner at the state level on a variety of health behaviors and preventive disabilities. BRFSS interviews are conducted monthly and data are analyzed annually. Data for the following reports was obtained from the BRFSS (Overweight/Obesity, Physical Activity, Tobacco and Access to Care).

PLEASE NOTE: Due to changes in the weighting methodology and other factors, results from years more recent than 2011 are NOT comparable to 2010 and earlier years. In addition, there is no County Specific Data available for Randolph County since 2010. Instead only regional data was accessible at the time this report was generated. Randolph County is one of eight counties within the Greensboro Region.

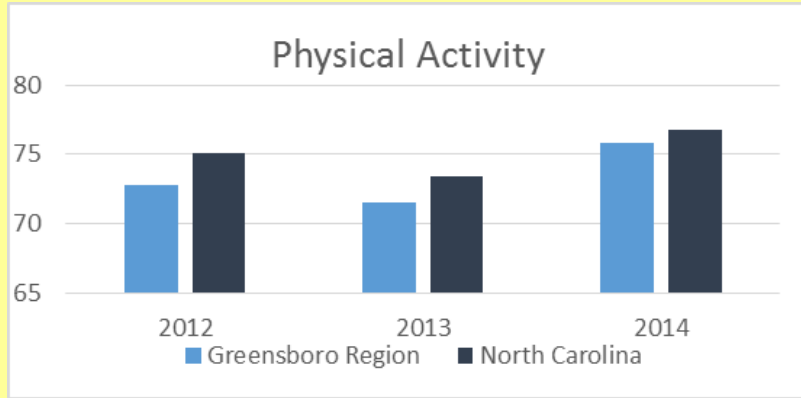


The percent of adults with a BMI greater than 25 has increased each year, since 2011 for both the State and the Greensboro Region. In 2013, the rate for the Greensboro Region was 68.1 compared to the states at 66.1. (2012 = 64.9 / 65.8; 2011 = 63.5 / 65.1).



Physical Activity Data

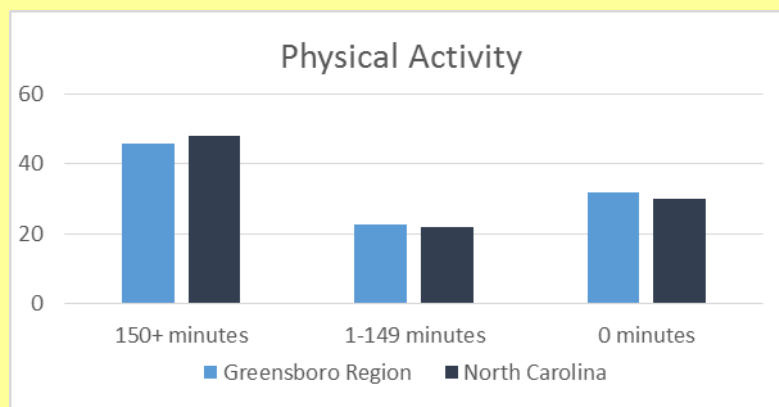
Utilizing the BRFSS Survey Results, the following question was asked to individuals participating in the survey: “During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening or walking for exercise?”



Based on survey results, the Greensboro Region’s participation in physical activity or exercise has increased since 2013, with the following results:

- 72.8% of participants answered “yes” in 2012
- In 2013, 71.8% answered “yes” and
- 75.8% answered “yes” to the question in 2014

2013, Survey results for “Adults that participated in 150 minutes of physical activity per week” were:

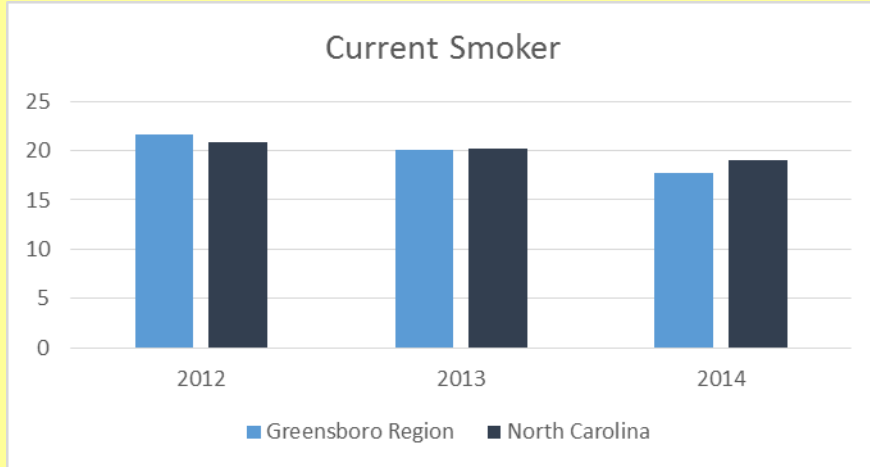


Results for the Greensboro Region were:

- 45.8% got 150 or more minutes of physical activity
- 22.6% got 1-149 minutes
- 31.7% did not exercise at all during the week
- No comparable data is available for 2012 or 2014, as 2013 was the only year this data was gathered.

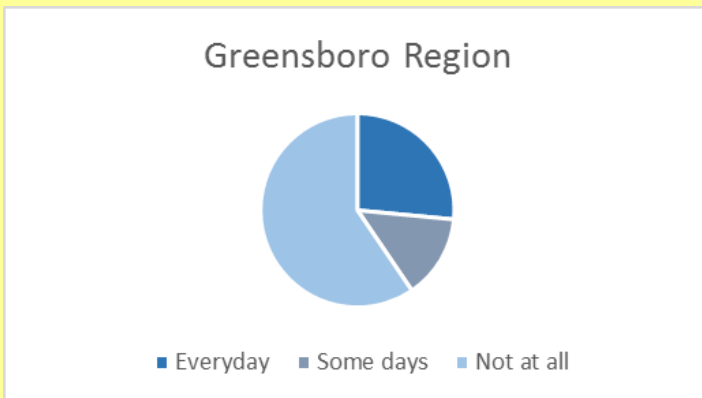
Tobacco

Based on the chart below, the Greensboro Region and the state of North Carolina has had a decrease in the number of current smokers since 2012.



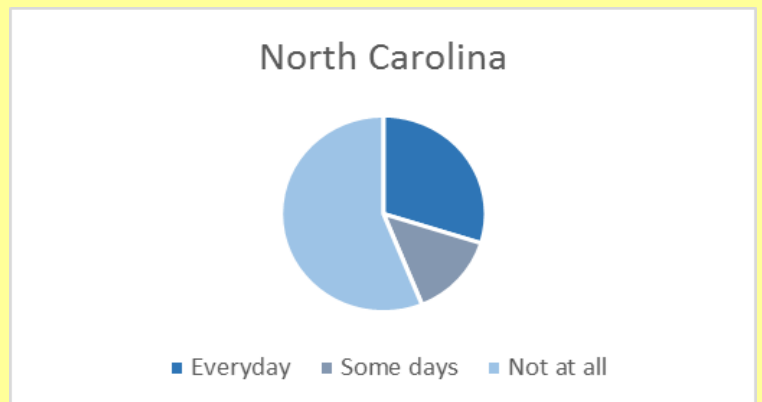
Tobacco Use

In 2014, survey participants were asked: “Do you currently use chewing tobacco or snuff every day, some days or not at all?”



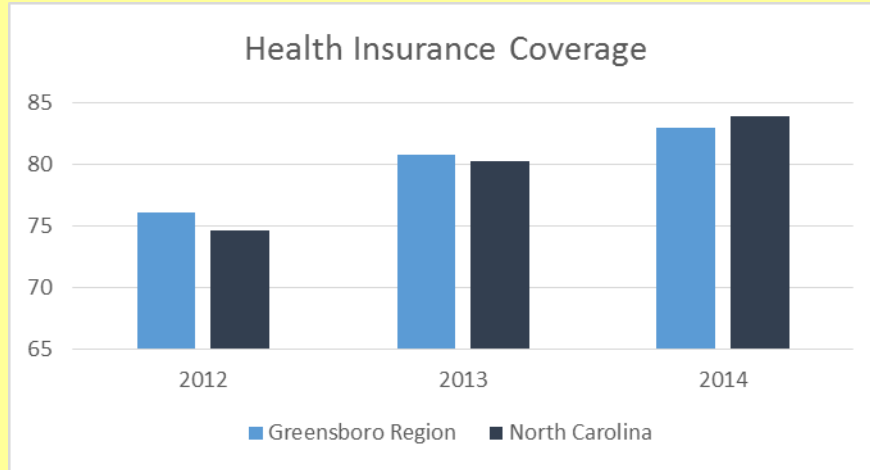
- Everyday = 26.5%
- Some days = 14.0%
- Not at all = 59.5%

- Everyday = 29.8%
- Some days = 14.0%
- Not at all = 56.1%



Access to Care

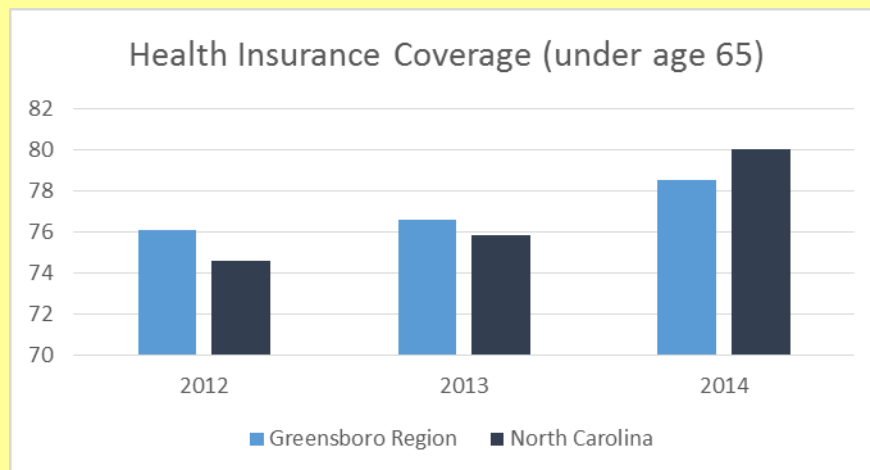
Survey participants were asked: “Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare?” .



The percentages for the Greensboro Region have fluctuated very little throughout the years 2012-2014.

- 76.1% in 2012
- 76.6% in 2013
- 78.5% in 2014

(Note: the percentages reported in 2014 were for those that did not have insurance, as opposed to those that do, being stated in this report)



The results of individuals having health insurance coverage for the Greensboro Region under the age of 65 are:

- 76.1% in 2012
- 76.6% in 2013
- 78.5% in 2014

Morbidity Data

Cancer

| Type of Cancer (per 1,000 live births) | Randolph County | North Carolina |
|---|--------------------|-------------------|
| Female Breast | 152.2 | 157.2 |
| Prostate | 146.4 | 150.4 |
| Lung | 87.6 | 73.3 |
| Colon / Rectum | 41.9 | 41.5 |
| All Cancers | 513.6 | 496.1 |

<http://www.schs.state.nc.us> (County Health Data Book 2009-2013)

Mortality Data

Leading Causes of Death

| Cause of Death (Rates per 100,000 population) | Randolph County | North Carolina |
|--|--------------------|-------------------|
| Cancer | 225.5 | 194.1 |
| Heart Disease | 215.7 | 176.5 |
| Chronic Lower Respiratory Disease | 77.7 | 50.5 |
| Cerebrovascular Disease | 59.5 | 47.2 |
| Other Unintentional Injuries | 36.4 | 31.7 |
| Alzheimer's Disease | 32.9 | 32.6 |
| Diabetes | 28.0 | 27.0 |
| Nephritis, Nephrotic Syndrome, Nephrosis | 27.3 | 18.0 |
| Pneumonia and Influenza | 25.9 | 18.8 |
| Motor Vehicle Injuries | 16.8 | 13.9 |
| Suicide | 16.1 | 13.5 |
| Chronic Liver / Cirrhosis | 15.4 | 11.9 |

<http://www.schs.state.nc.us> (Leading Causes of Death, 2014)

Infant Mortality

| Death Rate (per 1,000) | North Carolina | Randolph County |
|---------------------------|-------------------|--------------------|
| Infant | 7.1 | 4.4 |
| Fetal | 6.7 | 8.1 |
| Neonatal | 4.9 | 4.3 |

<http://www.schs.state.nc.us> (County Health Data Book 2010-2014)

Emerging Issues

Tuberculosis (TB)

In July, 2014, a patient moved into Randolph County from another country. This patient presented symptoms to Randolph Hospital consistent with Tuberculosis (TB) in December, 2014. On December 10, Randolph Hospital reported that the patient was positive for TB. The patient began a regimen of TB drugs on December 11. Health department staff began Directly Observed Therapy (DOT) daily at the patient's home, including weekends and holidays.

Many man hours were spent locating the patient's contacts. As a result, two after hour clinics were held to test contacts for possible TB. An educational session was held at the original patient's church as well. There were 108 people exposed, five of which were located in surrounding counties. Three adults and two children developed symptoms of TB and started DOT. Due to transportation barriers, multiple home visits were made by health department nurses to test and read results of individuals who were previously tested for TB. As of May 19, 2015, five patients are still receiving twice weekly Directly Observed Therapy of TB medications.

Syphilis

In the first three months of 2015, North Carolina had a 56% increase in early syphilis infections. Randolph County has seen a slight increase in the number of cases as well. Communicable Disease staff met with the Regional Disease Intervention Specialists (DIS) to discuss possibilities for the increase. Reasons included more men having sex with men (MSM) and a rise in HIV-positive individuals.

As a result of the increase in cases, nurses have heightened surveillance for individuals, are performing syphilis serologic testing for anyone with signs or symptoms of the disease, and treating cases based on standing orders.

General Communicable Disease Trends

- There was an increase of 10% in sexually transmitted infections (STI) in fiscal year 2014-15 compared to the previous year.
- Pertussis cases decreased in FY 2014-15 by 40 % compared to FY 2013-14.
- Other increases in communicable diseases include:
 - Hepatitis C
 - Salmonellosis

Dissemination Plan

Copies of this document will be distributed to members of the Board of Health, the School Health Advisory Council, the Wellness Steering Committee, and other contributors. The report will also be available on the Randolph County Health website, as well as Randolph Hospital's website. Additional copies will be available upon request.