

Randolph County Public Health State of the County Health Report 2020

This document provides a review of the priority health issues determined during the 2019 Community Health Assessment (CHA) conducted by Randolph County Public Health. This information is designed to update community members, leaders, agencies, organizations and others on the progress made in addressing identified priority health issues.

Progress on Community Health Improvement Plans (CHIPS)

Randolph County Public Health (RCPH) met with the CHA Advisory Committee on August 27, 2019 to identify priorities in order to create the CHIPS. Three priorities were identified as a result of this meeting; mental health, early and middle childhood and health-related quality of life and well-being.

In March, 2020 RCPH opened an emergency operations center (ECO) in response to the COVID-19 pandemic. The pandemic response delayed our CHA timeline of reconvening the CHA Advisory Team to develop and submit the completed CHIPS.

RCPH has completed or is in the process of working on the following:

- Adopting Results-Based Accountability
- Transitioning CHIPS from paper-based to web-based documents
- Setting up results, indicators, programs, and performance measures in Clear Impact Scorecard
- Linking to the HNC 2030 Scorecard to create greater awareness of population accountability

Morbidity and Mortality Changes since 2019 CHA

The following chart shows the leading causes of death for Randolph County during the 2014-18 timeframe.

Randolph County	Cause of Death	Rate
1	Cancer	249.0
2	Diseases of the heart	240.0
3	Chronic lower respiratory diseases	97.0
4	Alzheimer's Disease	58.6
5	Cerebrovascular diseases	50.9
6	All other unintentional injuries	46.0
7	Diabetes Mellitus	32.1
8	Suicide	23.0
9	Chronic Liver Disease and Cirrhosis	18.8
10	Influenza and Pneumonia	17.4

The differences in the leading causes of death since the 2019 CHA are as follows (data was from 2013-17):

- Diseases of the heart was ranked number one, while cancer was ranked two
- Cerebrovascular diseases dropped from number four to five
- Suicide replaced Nephritis, Nephrotic Syndrome and Nephrosis for number eight
- Chronic Liver Respiratory Disease replaced Influenza and Pneumonia for number nine
- Influenza and Pneumonia replaced Motor vehicle injuries for number ten

Cancer Deaths:

- Lung = 83.7 (previously 74.0)
- Female breast = 31.7 (26.1)
- Prostate = 18.4 (17.0)
- Colon / Rectum = 15.3 (19.5)

Cancer Morbidity (2020 Cases):

- Lung = 138 (134)
- Female breast = 164 (152)
- Prostate = 113 (114)
- Colon / Rectum = 70 (69)

Infant / Child Mortality:

- Infant = 9.7 (8.6)
- Child = 81.3 (55.8)

Emerging Issues since 2019 CHA

Tuberculosis (TB)

In December 2019, an elderly patient presented to Randolph Health having symptoms consistent with TB. On December 31, 2019, the physician reported that the patient was positive for TB. The patient began a regimen of TB drugs on January 1, 2020. Public Health staff began Directly Observed Therapy (DOT) at the patient's home. Many man hours were spent locating the patient's contacts. As a result, there were 21 people exposed with seven of those being children. None of the contacts developed TB. Due to transportation barriers, multiple home visits were made by health department nurses to test and read results of individuals. The patient completed TB treatment on July 29, 2020.

In July 2020, a middle-aged patient presented to High Point Hospital having symptoms consistent with TB. On July 29, 2020, the physician reported that the patient was positive for TB. The patient began a regimen of TB drugs on July 29, 2020. Public Health staff began DOT via FaceTime due to the COVID-19 Pandemic. There were six adults exposed. None of the contacts developed TB. Due to extensive medical problems, the patient's TB treatment had to be extended for 39 weeks. The patient will complete TB treatment in May 2021.

COVID-19

On March 4, 2020 RCPH opened an Emergency Operations Center (EOC) in response to the COVID-19 pandemic. This included opening a COVID-19 phone line that was operational Monday-Friday, 8am-5pm. The EOC deescalated February 3, 2021.

On March 23, 2020 Randolph County had its first reported, lab-tested positive case of COVID-19. The individual who tested positive reportedly traveled outside of North Carolina, but within the continental United States. To date there have been 15,160 cases of COVID-19 in Randolph County and 230 deaths. On December 30, 2020 RCPH began vaccinating staff and first responders. As of May 21, 2021, RCPH has administered 14,409 first dose vaccines for the virus, 13,589 second doses, totaling 27,998.

General Communicable Disease Trends

- There was an increase in sexually transmitted infections (STI) in FY2019-20 compared to the previous year. Due to stay-at-home orders, isolation and quarantine from COVID-19, STI numbers increased.
- There was a decrease in communicable disease numbers due to the COVID-19 Pandemic. This was a result of more doctors doing telehealth and not in-person visits, therefore testing was not being performed.

New/Paused/Discontinued Initiatives since 2019 CHA

In March, 2020 RCPH opened an emergency operations center (ECO) in response to the COVID-19 pandemic. The pandemic response delayed our CHA timeline of reconvening the CHA Advisory Team to develop and submit the completed CHIPS. In July, 2021 RCPH will reconvene the advisory team to determine how to execute objectives to address the identified priorities from the 2019 CHA.