



Cabarrus County

2019 State of the County Health Report

IN THIS ISSUE

- Cabarrus County Profile
- Priority Health Issue Updates
- Mortality and Morbidity Data
- Emerging Issues
- New Initiatives
- Community Awareness

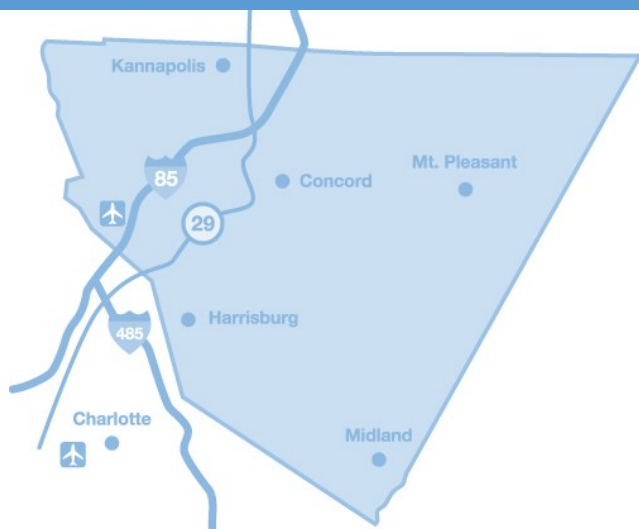
Conducting a community assessment of health and human services is an ongoing process that engages diverse agencies, providers, and individuals in identifying community assets and strengths, as well as unmet needs. Leadership for this collaborative process is provided by the Cabarrus Health Alliance through Healthy Cabarrus. This report, the 2019 State of the County Health (SOTCH), serves as an update to the 2018 SOTCH and 2016 Community Needs Assessment. Information provided within this report is specific to the identified priority health issues: substance use, mental health, and childhood obesity. This report also highlights mortality and morbidity data, as well as emerging issues and new initiatives.

Cabarrus County

Located in south central North Carolina, Cabarrus County spans an area of 364.39 square miles and is bordered by Stanly, Union, Mecklenburg, Iredell, and Rowan counties. Cabarrus is largely urban, but includes a significant number of rural pockets across the county. Municipalities in Cabarrus include Concord, Harrisburg, Kannapolis, Mount Pleasant, and Midland.

To view previous State of the County Health reports or Community Needs Assessments, visit www.healthycabarrus.org/data. If you would like additional information regarding materials or data referenced in this report, or to request a presentation contact Marcella Beam at 704-920-1282.

Cabarrus County Profile



Cabarrus County's population has seen consistent growth since 2000. Between 2010 and 2018, Cabarrus County's population increased by 18.7% percent. In comparison, North Carolina's population increased by only 10%. While the entire region has experienced growth, Cabarrus has experienced nine times the rate of growth compared to Rowan and Stanly. Extreme, rapid growth impacts how agencies and organizations provide services to residents, and often times vulnerable populations such as persons with disabilities, limited English proficiency, children under 5 and persons over 65 are disproportionately affected.

Total Cabarrus County Population:

211,342

2018 POPULATION BY AGE

| | |
|-----------------|----------------|
| 0—14 years old | 44,482 (21%) |
| 15—24 years old | 26,604 (12.6%) |
| 25—39 years old | 41,682 (19.7%) |
| 40—59 years old | 59,374 (28.1%) |
| 60—79 years old | 33,081 (15.7%) |
| 80+ years old | 6,119 (2.9%) |

2018 POPULATION BY RACE & ETHNICITY

| | |
|-------------------|-----------------|
| White | 136,527 (64.6%) |
| African American | 40,155 (19%) |
| Hispanic | 22,825 (10.8%) |
| Asian | 9,299 (4.4%) |
| Two or More Races | 5,072 (2.4%) |

2018 POPULATION BY SEX

| | |
|--------|-----------------|
| Male | 102,992 (48.7%) |
| Female | 108,350 (51.3%) |



Persons in Poverty

| | |
|-----------------------|-----|
| Cabarrus | 9% |
| North Carolina | 14% |

Educational Attainment

Persons 25 and older

| | |
|---|-------|
| No High School Diploma | 10.9% |
| High School Graduate or Equivalent | 25.3% |
| Some College, No Degree | 24.5% |
| Associate's Degree | 9.4% |
| Bachelor's Degree or Higher | 30% |



Unemployment Rate July 2019

| | |
|-----------------------|------|
| Cabarrus | 4.0% |
| North Carolina | 4.4% |



Median Household Income

| | |
|-----------------------|----------|
| Cabarrus | \$64,174 |
| North Carolina | \$52,413 |

Priority Health Issue Updates and Data



Substance Use and Misuse

Adolescence is a critical time for the prevention of substance misuse. Evidence shows that early misuse of substances changes the way the brain functions, which can lead to addiction and other serious problems. The Healthy Cabarrus Substance Use Coalition has prioritized prevention of substance misuse among adolescents, as well as harm reduction and linkages to care for people who inject drugs or are in active substance use.

Healthy North Carolina 2020 Objective: Reduce the percentage of individuals aged 12 years and older reporting any illicit drug use in the past 30 days to 6.64% by 2020.

Baseline: 7.64%



Current: Illicit drug use is *no longer captured* in the same manner within the National Survey on Drug Use and Health (NCDUH). Due to this change, additional health indicators were identified to track progress related to the Substance Use Community Health Improvement Plan.

New Indicators: Percent of high school students who report substance use (alcohol, marijuana, tobacco and prescription medication) within past the 30 days. *See table below.*

Cabarrus Youth Substance Use Survey—High School students who reported substance use within past 30-days

| | 2015 | 2016 | 2017 | 2019 |
|-------------------------|-------|-------|-------|-------|
| Alcohol | 22.5% | 24.2% | 18.4% | 13.7% |
| Marijuana | 20.4% | 19.2% | 17.0% | 12.2% |
| Tobacco (Cigarette) | 9.2% | 7.6% | 4.8% | 1.6% |
| Prescription Medication | * | * | * | 1.2% |

Data Source: Cabarrus Youth Substance Use Survey

*Prescription Medication 30-day use was not asked until 2019.

Cabarrus County EMS – Number of Patients Administered Narcan

| | 2016 | 2017 | 2018 | 2019 |
|-----------------------|------|------|------|------|
| Opioid Specific Calls | 163 | 418 | 236 | 229 |

Data Source: Cabarrus Youth Substance Use Survey

According to Cabarrus County EMS, there were 10 opioid related deaths in 2018 and 13 deaths in 2019. On average, 34% of the opioid overdose patients refused transport by EMS to the Emergency Department each month. Since June of 2017, more than 4,000 naloxone kits have been distributed through the Cabarrus Health Alliance Syringe Exchange Program (SEP) resulting in almost 750 reported overdose reversals.

Substance Use New Strategies and Interventions

Cabarrus Health Alliance (CHA) received the NC Department of Health and Human Services (NC DHHS) **Community Linkages to Care for Overdose Prevention and Response** grant. Through this funding CHA continues to:

- Help prevent fatal and non-fatal overdoses through naloxone distribution
- Improve linkages to clinical care and treatment

- Hire a full-time Peer Support Specialist
- Identify gaps in accessing services for individuals who use substances
- Expand syringe exchange hours of operation

UNC School of Government—Opioid Response Project
Cabarrus County was selected to participate in a two-year collaborative learning model through UNC's

ncIMPACT initiative. The project provides direct support to communities working to enact an integrated and innovative policy and practice response to their local opioid crisis. Through the project, the Cabarrus County Mental Health Advisory Board (MHAB) expanded to include an Opioid Response Core Team. The team along with members of the MHAB and Healthy Cabarrus Substance Use Coalition will focus on five goals:

Accessible treatment for all.

Prevention of prescription medication misuse.

Assess knowledge, attitudes and beliefs about addiction.

Develop a supportive recovery community.

Address harm and risk associated with substance use.



Drug-Free Communities

Local Problems Require Local Solutions

Drug Free Communities (DFC) Grant

In the DFC program's third year, Cabarrus County Schools and Cabarrus Health Alliance partnered to distribute hundreds of alcohol locks and medication lock boxes to families who were required to participate in the district's *Positive Alternative to Student Suspension (PASS)* program. PASS is offered to students who are caught with drugs or alcohol on school property.

| Substance Use Action Plan Progress | Status | Output—Outcome |
|--|-------------|---|
| Train one representative from each Cabarrus County Schools elementary school in Life Skills Training (LST) by June 2018. | Complete | Identified training within Community Health Improvement Plan adjusted to <i>Reconnect for Resilience</i> . |
| Train Cabarrus County Schools secondary (Middle/High) school support staff in Seeking Safety by June 2018. (<i>Reconnect for Resilience</i>) | | Output: 231 teachers/school support staff trained Outcome: Participants reported they were 'Very Likely' to use the skills learned in training in their work. |
| Implementation and adherences of all STOP Act provisions by January 1, 2020. | In-Progress | Outcome: Limits on prescriptions effective January 1, 2018 Mandatory use NC Controlled Substance Reporting System (NC CSRS) - tiered implementation deadlines In-Progress: E-Prescribing of all Targeted Controlled Substances effective Jan 1, 2020 |
| Conduct at least two community-wide medication take-back events annually through December 2019. | Complete | Outcome: System Change— Healthy Cabarrus Substance Use Coalition assists with hosting bi-annual Medication Take-Back Days. |
| Identify at least two additional materials and resources to enhance the PASS Program and implement by June 2018. | Complete | Outcome: 100% of families in PASS program received alcohol locks and/or medication lock-boxes for home use. |
| Develop and implement substance use disorder screening tool to be administered to individuals incarcerated in Cabarrus County by September 2018. | Complete | Output: Tool developed by Daymark Recovery Services, Cabarrus County Sherriff's Deputies trained to screen. Outcome (Jan-August 2019): 1,532 Screened— 650 with positive MH/SU screens 124 refused services, 81 released with transition plan and 25 are currently in treatment |



Mental Health

Mental health plays a major role in people’s ability to maintain good physical health. Mental illnesses, such as depression and anxiety, affect people’s ability to participate in health-promoting behaviors. In turn, problems with physical health, such as chronic diseases, can have a serious impact on mental health and decrease a person’s ability to participate in treatment and recovery. According to the National Survey on Drug Use and Health, in 2018, an estimated 47.6 million adults aged 18 or older (19.1 percent) had some type of mental illness in the past year.



Healthy North Carolina 2020 Objective: Reduce the rate of mental health-related visits to emergency departments to 95.55 (per 10,000) by June 2020.

Baseline: 100.55 ED admissions per 10,000 population

Current Rate: 101.39 ED admissions per 10,000 population—**Increasing Trend**

From 2018 to 2019 Carolinas HealthCare System (CHS) – NorthEast, now Atrium Health—Cabarrus, saw a **20% increase** in overall psychiatric admissions to the emergency department.

Total Number of Psychiatric ED Admissions at Atrium Health—Cabarrus

| | 2015 | 2016 | 2017 | 2018 | 2019* |
|-------------------------------|-------|-------|-------|-------|-------|
| Total Psychiatric Patients | 1,576 | 1,824 | 1,922 | 1,781 | 2,143 |
| Total Pediatric Psych (0-17) | 275 | 306 | 333 | 321 | 416 |
| Total Adult Psych (18-65) | 1,162 | 1,378 | 1,448 | 1,287 | 1,464 |
| Total Geriatric Psych (66+) | 139 | 140 | 143 | 163 | 263 |

*Atrium Health—Cabarrus Emergency Department Electronic Medical Record *2019 Data is projected estimates, not finalized*

Mental Health New Strategies and Interventions

Department of Public Instruction—School Safety Grant

Cabarrus Health Alliance was awarded funds through the NC DPI to pay for mental health services for school aged children within Cabarrus County. The grant was developed to address students need for enhanced access to mental health services: outpatient, Intensive In-Home, school-based, Psychiatric Residential Treatment Facility (PRTF), and other evidence-based therapies. Through *Reconnect for Resilience* trainings, the grant also worked to decrease conflict in the classroom by improving teacher’s ability to understand their own and their student’s physical and emotional responses to stress.

Trauma-Informed Communities Project

Cabarrus County was selected as a site for the North Carolina Trauma-Informed Communities (TIC) Project. The opportunity gave providers, organizations, and service systems an opportunity to critically examine their practices when interacting with children with serious emotional disturbance (SED), identify the need for additional trauma-

informed services in the broader community, and plan for enhanced collaboration across systems of care.

Sequential Intercept Mapping (SIM) Exercise

In November 2019, the Mental Health Advisory Board hosted a SIMs Exercise. The strategic planning workshop provided an opportunity for participants to visualize how mental health, substance abuse, and criminal justice systems intersect. The SIMs workshop concluded with the development of a revised action plan with four priorities.

Wake Up For Wellness

Mental Health America of Central Carolinas (MHA) and the Mental Health Advisory Board hosted Cabarrus Counties first ever *Wake Up for Wellness* breakfast. Nearly 100 individuals representing community agencies, law enforcement, clinicians and elected officials attended to learn more about MHA’s programs and services in Cabarrus and Mecklenburg Counties, and how MHA hopes to grow its presence in Cabarrus County.

| Mental Health Action Plan Progress | Status | Output—Outcome |
|---|----------|--|
| Develop and implement a case management program for incarcerated individuals who screen for a mental health diagnosis at 'book in' by September 2018. | Complete | Output: Hired SteppingUP Coordinator and Reentry Case Manager Outcome: 162 individuals served by Reentry Case Manager, 480 total interactions |
| Develop and implement a mental health screening tool to be administered to individuals incarcerated in Cabarrus County by September 2018. | Complete | <i>See Substance Use Action Plan progress.</i> |
| Identify or develop an online platform, accessible by the public, which includes all mental health services and resources by June 2020. | Complete | Output: Atrium Health Community Resource Hub (Aunt Bertha) and the Cabarrus County Crisis Response Booklet (print document) |
| Train Cabarrus County Schools secondary (Middle/High) school support staff in Seeking Safety by June 2018. (<i>Reconnect for Resilience</i>) | Complete | <i>See Substance Use Action Plan progress.</i> |



Childhood Overweight and Obesity

Childhood obesity is a serious problem in the United States and in Cabarrus County, with nearly one in three children in the community classified as overweight or obese. Local overweight and obesity rates among children and adolescents have increased slightly over the last year, while still remaining below the 2013 baseline. The long-term effects of obesity can play on a child's physical, social, and emotional health are a major concern. A child with obesity is more likely to have obesity as an adult, and an adult with obesity has a higher risk of developing heart disease, type 2 diabetes, metabolic syndrome, and many types of cancer. Through efforts of Children WIN and Cabarrus Wellness Coalition, communities can support families by making the healthy choice the easy choice.

Healthy North Carolina 2020 Objective: Increase the percentage of high school students (14-18) who are neither overweight nor obese to 65% by 2020.



Baseline: 62%

Current Rate: 61% — *Decreasing Trend*

Percent of Children Identified as Neither Overweight or Obese in Cabarrus County

| | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 |
|-------|------|------|------|------|------|------|
| 2-4 | 73% | 74% | 72% | 81% | 80% | 80% |
| 5-8 | 70% | 71% | 70% | 74% | 74% | 71% |
| 9-13 | 63% | 63% | 62% | 64% | 64% | 62% |
| 14-18 | 62% | 63% | 62% | 62% | 62% | 61% |
| Total | 66% | 67% | 66% | 69% | 69% | 67% |

*Overweight or Obese are classified by having a BMI in the 85 percentile and higher. Data Source: Atrium Health— Cabarrus Electronic Medical Record



Childhood Overweight New and Obesity Action Plan Progress

Atrium Health opened The Levine Children's Healthy Futures Clinic, the systems first full-service weight management clinic for children 2 to 17 with a BMI greater than the 95th percentile. The clinic motivates patients and their families to make healthy lifestyle changes to things like diet and physical activity, in turn helping lower their risk of chronic diseases.



5210 Day of Play

The Cabarrus Wellness Coalition—Community Programming work group, organized the county's first **5210 Day of Play**. The event kicked off with the "5210 5K and Fun Run" followed by activities like archery, fishing, Zumba, and more, all free of charge. The event also included educational activities about the 5210 healthy principles.



- 5—Eat at least 5 servings of fruits and veggies daily
 - 2—Limit screen time to less than 2 hours a day
 - 1—Be active at least 1 hour a day
 - 0—Stay away from sugary drinks
- More than 300 adults and children attended the event, many of whom had not visited Frank Liske Park before.

"Farm—Fork—Future (F³)"

Cabarrus County Schools received a **Farm to School grant** from the U.S. Department of Agriculture Food and Nutrition Service. The grant will be used to create a K-12 gardening curriculum for the district's 10 STEM schools. The curriculum will cover the gardening process from planting to production, including the technology used in the process. The school district plans to work with Cabarrus Health Alliance, Dole Foods and N.C. State University's Plants for Human Health Institute.



| Childhood Obesity Action Plan Progress | Status | Output—Outcome |
|--|--------------|---|
| Train at least one cafeteria staff representative from 50% of Cabarrus County Schools and Kannapolis City Schools, including both Nutrition Director, in the Smarter Lunchroom Movement strategies by August 2017. | Complete | Output: 100% of cafeteria managers (or designee) participated in Smarter Lunchroom Movement training and some of the behavioral economics strategies Outcome: System Level Change—Cafeteria managers participate in an annual refresh training |
| Increase the number of school gardens by 4 in Cabarrus County Schools and Kannapolis City Schools by September 2018. | Complete | <i>Documented in the 2018 State of the County Health Report (SOTCH).</i> |
| Implement two group Lifestyle Triple P cohorts by September 2020. | Not-Complete | Output: Only one group Lifestyle Triple P cohort hosted. |
| Increase the number of organizations promoting increased water consumption through "Re-Think Your Drink" marketing materials from 1 to 5 by June 2020. | Complete | Output: 8 organizations promoted water messaging—CHA, Cabarrus County Government, Cabarrus Active Living and Parks, Atrium Health Cabarrus, YMCA, City of Concord, Concord Parks & Recreation, Kannapolis Parks & |

Mortality and Morbidity Data

Rates of morbidity, mortality, and emergency hospitalizations can be reduced if community residents access services such as health screenings, routine tests, and vaccinations. Prevention indicators can call attention to a lack of access or knowledge regarding one or more health issues and can inform program interventions.

| | Cabarrus | North Carolina |
|---|----------|----------------|
| Fetal Death Rate per 1,000 Deliveries | 7.5 | 6.9 |
| Neonatal (<28 days) Death Rate per 1,00 Live Births | 3.7 | 4.8 |
| Post-neonatal (28 days – 1 year) Death Rate per 1,000 Live Births | 2.2 | 2.4 |
| Infant Death Rate per 1,000 Live Births | 5.9 | 7.1 |
| Unadjusted Child (0-17) Death Rate per 100,000 population | 44.3 | 54.5 |

Data Source: State Center for Health Statistics - 2020 County Health Data Book

| Leading Causes of Death <i>*Unadjusted Death Rates per 100,000 Population, Ranking by Geographic Area</i> | Cabarrus | | North Carolina | |
|---|----------|----|----------------|---|
| Total Deaths – All Causes | 772.1 | | 890.2 | |
| Cancer—All Sites | 159.3 | 1 | 191.6 | 1 |
| Diseases of the heart | 153.1 | 2 | 181.9 | 2 |
| Alzheimer's disease | 49.8 | 3 | 39.4 | 5 |
| Chronic lower respiratory diseases | 47.0 | 4 | 52.1 | 3 |
| Other Unintentional Injuries | 45.0 | 5 | 38.6 | 6 |
| Cerebrovascular Disease (Stroke) | 40.3 | 6 | 48.9 | 4 |
| Pneumonia & Influenza | 20.4 | 7 | 19.7 | 8 |
| Diabetes mellitus | 19.7 | 8 | 27.9 | 7 |
| Nephritis, nephrotic syndrome & nephrosis (kidney disorder) | 17.8 | 9 | 18.9 | 9 |
| Suicide | 12.3 | 10 | - | - |

Data Source: State Center for Health Statistics - 2020 County Health Data Book

| Leading Causes of Death by Age | |
|--------------------------------|---|
| Ages 0—19 | |
| 1 | Conditions Originating in Prenatal Period |
| 2 | Birth Defects |
| 3 | Motor Vehicle injuries |
| Ages 20—39 | |
| 1 | Other Unintentional Injuries |
| 2 | Motor Vehicle Injuries |
| | Suicide |
| Ages 40—64 | |
| 1 | Cancer—All Forms |
| 2 | Diseases of the heart |
| 3 | Other Unintentional Injuries |
| Ages 65—84 | |
| 1 | Cancer—All Forms |
| 2 | Disease of the heart |
| 3 | Chronic lower respiratory disease |
| Ages 85+ | |
| 1 | Disease of the heart |
| 2 | Alzheimer's disease |
| 3 | Cancer—All Forms |

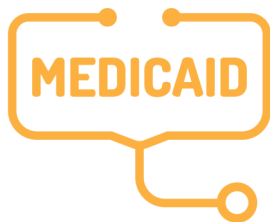
2018 State of North Carolina and 2016-2018 County Life Expectancy at Birth

| Life Expectancy | 2016 | 2017 | 2018 |
|-----------------|------|------|------|
| North Carolina | 77.4 | 77 | 77.6 |
| Cabarrus | 78.5 | 78 | 78.4 |
| Rowan | 75.3 | 75.1 | 75.2 |
| Stanly | 76.3 | 75.8 | 75.9 |
| Union | 79.5 | 79.6 | 79.7 |
| Iredell | 77.6 | 77.3 | 77.5 |
| Mecklenburg | 80.2 | 80.3 | 80.4 |

Improving life expectancy at birth was selected as a Key Cross-Cutting Performance Indicator for Health North Carolina 2020. Specifically, the goal is to: *Increase North Carolina's Life Expectancy to 79.5 years by 2020.* Life expectancy is often used to gauge the overall health of a community. Shifts in life expectancy are often used to describe trends in mortality.

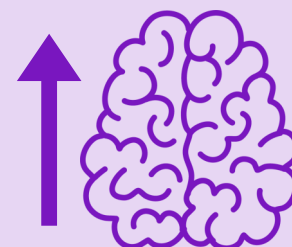
There is a racial disparity in life expectancy upon birth in Cabarrus County. White or Caucasian babies are expected to live until 78.9 years of age upon birth, while African American babies are estimated to 1.8 years less (77.1).

Emerging Issue



In November of 2019, the North Carolina Department of Health and Human Services announced that NC Medicaid managed care implementation and open enrollment were suspended. The transition in the state from fee-for-service to managed care began in 2015, following legislation by the NC General Assembly. Open enrollment for the new managed care plans began in October in Cabarrus County. Although Medicaid services will and did continue as previously administered, the suspension of transformation caused confusion among recipients.

The rate of increase of death associated with Alzheimer's disease was noted in the 2017 and 2018 State of the County Health Reports, that trend continues. Rate of death per 100,000 population increased from 36.2 in 2016, to 45.6 in 2017 and now 49.8 in 2018. According to the 2020 County Health Data Book, Alzheimer's disease ranks as the third leading cause of death. Besides a rapidly growing aging population, no specific conclusion can be drawn.



Rate of Alzheimer's Death continues to increase.

New Initiatives

Results Based Accountability

Cabarrus Health Alliance adopted Results-Based Accountability™ (also known as RBA) as a new way of taking action to improve the lives of children, youth, families, adults and the community as a whole in Cabarrus County. As CHA and Healthy Cabarrus enter the 2020 Community Needs Assessment process, the associated Community Health Improvement Plans will align with RBA's framework.

WIC Online Appointment Scheduling

In December 2019, Cabarrus Health Alliance launched an innovative online appointment tool for Women, Infant and Children (WIC) participants. The goal of the project is to test the impact of an online appointment scheduling system on improving WIC recertification within fourteen months of children ages one through four. The tool is expected to increase customer satisfaction and retention rates by responding to participant-identified complaints in appointment-making and lobby wait times.



Substance Use Network Collaborative and Clinic

The Substance Use Network (SUN) launched by the CHA Medical Director, Russell Suda, and the Cabarrus Partnership for Children aims to develop a cross-sector collaborative system of care to support the health, safety, well-being and recovery of substance use pregnant patients, their infants, and families. Given the increasing rate of opioid use during pregnancy, as well as the high cost of caring for opioid-exposed pregnant mothers and newborns, the SUN collaborative hopes to increase early detection of substance use in pregnancy, coordination of care for the pregnant patient as well as the infant, and reduce costs associated with time spent in the NICU.

Cabarrus County H.U.B.B.

The Cabarrus County H.U.B.B. (Helping the Underserved Be-Loved and Belong) is a new approach that officially launched in 2019 to transform families from poverty to prosperity. Using a four-part approach, the initiative links a variety of local organizations to address gaps in services and provide wrap-around services for residents.

1. Socio-Economic
2. Behavioral Healthcare
3. Physical Healthcare
4. Faith Community

Community Awareness

Communication with key stakeholders and community members regarding the identified community health priorities is vital to community health improvement. Following review by the Board of Health and Healthy Cabarrus Executive Committee, copies of the 2019 State of the County Health Report will be disseminated to the Healthy Cabarrus Community Planning Council, as well as target community locations. Targeted locations include local libraries, community centers, park and recreation departments, federally qualified health centers, in addition to other sites with high community member presence.

The 2019 Cabarrus County State of the County Health Report is produced by Cabarrus Health Alliance, in partnership with Healthy Cabarrus.