



# State of the County Health Report 2021

Human Services



# Community Health Improvement Plan (CHIP)

## Priority 1: Access to Care:

Utilized various mobile units in the community, including Union County's Mobile Health Unit for COVID-19 vaccinations and testing.

Developed infrastructure for the Healthy Union Advisory Coalition, as well as the Access to Care, Mental Health and Substance Use Disorder subcommittees.

Provided nearly twice as many prevention, education, and awareness campaigns to underinsured and underserved population than in prior years.

## Priority 2: Mental Health and Substance Use Disorder:

Union County Public Schools (UCPS), Atrium Health and Partners Health Management continued to offer Mental Health First Aid Courses in the community.

Union County has created and shared the following messages: nicotine in e-cigarettes, signs of nicotine addiction, help to quit smoking, know the risks of vaping, e-cigarette dangers, and information about Juul.

UCPS launched "Start with Hello" campaign to bring attention to the growing epidemic of social isolation and to empower young people to create a culture of inclusion and connectedness.

Union County's Behavioral Health Collaborative continued to connect students and their families to social, emotional, and behavioral/mental health support, despite restrictions.

Updated the Tobacco Ordinance and presented to the Consolidated Human Services Board, which approved the proposed ordinance. The ordinance is awaiting approval by the Board of County Commissioners.

# Morbidity and Mortality Changes

## Union County 2021 Summary Report

(Data Source: North Carolina State Center for Health Statistics, except where noted)

	Health Indicator	Report Period	Union County (UC)	UC Previous Report Year/Period Trend	North Carolina
<b>Maternal, Child &amp; Infant Health</b>	<b>Infant Mortality</b> (<1yr) (rate/1000 live births)	2016-2020	4.5	↓	7
	<b>Fetal Deaths</b> (per 1,000 deliveries)	2015-2019	7.8	↓	6.7
	<b>Neonatal Deaths</b> (<28 days) (per 1,000 live births)	2015-2019	3.0	↓	4.7
	<b>Post Neo-Natal Deaths</b> (28 days-1 year) (per 1,000 live births)	2015-2019	*	↓	2.4
<b>Chronic Conditions (Mortality) (age-adjusted rate per 100,000 population)</b>	<b>Heart Disease</b>	2015-2019	136.6	↓	157.3
	<b>Cancers – All Sites</b>	2015-2019	148.1	↑	158
	Trachea, Bronchus & Lung	2015-2019	35.7	↓	42
	Breast	2015-2019	20.7	↓	20.6
	Colon, Rectum & Anus	2015-2019	12.3	↑	13.3
	Prostate	2015-2019	20.7	↓	19.5
	Cerebrovascular Disease (Stroke)	2015-2019	32.5	↓	42.7
	Chronic Lower Respiratory Disease	2015-2019	37.3	↓	44
	Alzheimer’s Disease	2015-2019	52.1	↑	36.9
	Pneumonia & Influenza	2015-2019	14.3	↓	16.7
	Diabetes Mellitus	2015-2019	19.3	↑	23.8
	Septicemia	2015-2019	16	↑	12.7
	Nephritis, Nephrotic Syndrome & Nephrosis	2015-2019	18	↔	16.5
	Chronic Liver Disease & Cirrhosis	2015-2019	8.2	↓	10.6
<b>Injury (Mortality) (Rate per 100,000 population)</b>	Motor Vehicle Injuries	2015-2019	11.6	↓	14.7
	All Other Unintentional Injuries	2015-2019	28.1	↑	39.3
	Suicide	2015-2019	10.2	↑	13.4
	Homicide	2015-2019	3.0	↑	6.8
<b>Communicable Diseases (Rate per 100,000 population) Data collected by NC EDSS Surveillance</b>	Chlamydia	2020	395	↓	607
	Gonorrhea	2020	119.8	↓	264.3
	<b>HIV Disease</b> *(age-adjusted mortality rate) data source NCSCSHS				
	Newly Diagnosed AIDS Average Rates	2020	2.5	↓	5.7
	Newly Diagnosed HIV Average Rates	2020	5.4	↓	12
	<b>Newly Diagnosed Early Syphilis Average Rate</b> (Primary, Secondary, Early Latent Syphilis)	2020	12.3	↑	22.1
	Pertussis	2018	3.39	↔	3.71
Tuberculosis	2020	1.3	↓	1.5	

## Leading Causes of Death

- Cancer remains the leading cause of death since 2009 and the rate has increased over time.
- Lung and colon cancer incidence have decreased over time in Union and North Carolina. Prostate cancer rates increased and are higher than the state rates. Overall cancer incident rates in Union County are slightly lower than the state.
- Diseases of the heart and motor vehicle accidents have seen downward trends in death rates over the last several years and are lower than in North Carolina overall.
- However, some of the other leading causes of death rates in Union County have increased, such as Alzheimer’s Disease and Septicemia, both which have higher rates than the state overall.
- Infant mortality in Union County has trended downward since 2010 and is below both the state average and the Healthy North Carolina 2030 (HNC 2030) goal.
- Rates of newly diagnosed HIV cases have trended downward in Union County since 2016 and remain below the state average.

### COVID-19

There were 289 COVID-19 deaths in 2021, a 175% increase from 105 deaths in 2020.

### LIFE EXPECTANCY

Union County’s life expectancy is higher than the state value and has increased since 2013, while the state average has decreased. However, the Union County life expectancy of 80 years is still below the HNC 2030 goal of 82 years.

## New Initiatives

### Union County Public Health Division FY2021

#### 2022 CHA

In July 2021, in collaboration with Atrium Health and Novant Health, we launched our 2022 Community Health Assessment (CHA). The goal of CHA is to identify factors that affect the health of the population and determine the availability of resources within the County.

The following timeline was developed:

- October 2021- August 2022 | Secondary Data Presentations during our Healthy Union Advisory Coalition meetings

- January 18, 2022- March 31, 2022 | CHA Survey Distribution and Focus Groups
- September 2022 | Coalition determines focus areas
- March 2023 | 2022 CHA Report due
- Sept. 2023 |Community Health Improvement Plan (CHIP) due

### SECONDARY DATA PRESENTATIONS:

The first 30-45 minutes of our Healthy Union Advisory Coalition meetings were used to present secondary data in different health areas.

### COMMUNITY COVID-19 VACCINE OUTREACH

Union County Public Health will continue to be a COVID-19 vaccine provider and prioritize our vaccine campaign to ensure the community has equitable access to vaccines and accurate information about vaccines.

Our vaccine team, including community outreach and clinical staff, work in tandem to identify priority sites in the community for vaccine pop-up clinics.

- The team communicates regularly with assisted living facilities, group homes, Skilled Nursing Facilities, the Union County Jail and community homeless shelter to ensure vaccine access to residents and staff. This includes providing vaccines on site or in some cases assisting the facility to become vaccine providers.
- Our vaccine team developed a partnership with the Union County EMS community paramedicine team to vaccinate homebound people.

### COMMUNICABLE DISEASE OUTREACH CAMPAIGNS

Union County Public Health offers free screening and treatment of sexually transmitted infections (STI’s), and partners with local providers to ensure adequate treatment of all Union County residents diagnosed with a STI.

The pandemic negatively affected access to STI care all over the country, due to reduced screening, limited resources, and stay-at-home orders. Reports of STI’s dropped briefly during the early months of the pandemic, but quickly increased and are now higher than in previous years. These include resistant bacterial and viral infections, and congenital syphilis, which can cause permanent defects or death. Broad STI screening and effective treatment are more important than ever.

Our STI clinic is now operating a full schedule and we plan to increase appointment availability over the next year to meet

the county's demand. At the end of 2021, the CDC published updated guidelines for the treatment of STI's. Our team will be providing outreach to area providers in an attempt to ensure all Union County residents receive timely, accurate diagnosis and treatment.

Union County is expanding our epidemiology capacity to assess community health data, monitor trends and stimulate focused public health initiatives such as a communicable disease dashboard. Similar to our display of COVID-19 information, residents will access this new dashboard to increase their awareness of communicable disease trends in the community.

### **INCREASE CHILDHOOD IMMUNIZATION RATES**

Union County Public Health consistently meets state benchmarks for vaccination rates in our clinic. We are also responsible for childhood vaccine rates throughout the county, and the benchmarks for the county as a whole were not met in 2021.

Additional annual training for Union County staff has been added this year and a newsletter, "Immunization Buzz," will also be distributed to staff. Local providers will also receive a monthly newsletter, "Immunization Focus," for their increased awareness of immunization administration.

A "Back to School Vaccine Clinic" will be held prior to any exclusion date, to ensure that no children miss school because of delinquent immunizations.

Our team will continue to monitor immunization counts and mail reminder cards to all children in the county who are not up to date on their vaccinations.

Social media will also be used to notify a wider audience of opportunities for vaccination, and staff who assisted the county during the pandemic response will be redirected to focus on vaccine education in the community.

### **COVID-19 EDUCATION AND VACCINATION EFFORTS TO REACH HISTORICALLY MARGINALIZED POPULATIONS**

Since the release of the vaccine, we noticed the minimal number of minority participants in our vaccine efforts, as is parallel with trends across our state and nation. We ramped up some intentional marketing, outreach, and education to address these disparities, as previous data shows this population tends to be hesitant in receiving the vaccine.

- Sent weekly emails with testing locations and COVID prevention education, as well as information on vaccine safety (CDC) and the vaccination phases.
- Delivered fliers that promoted our vaccine clinics and hotline to schedule appointments, and vaccination education through FAQs & short videos targeting these populations (NCDHHS's "Get Your Shot, You Have A Spot").
- Administered phone calls and emails to our known community partners and agencies, including Pastors of African-American and Hispanic Churches, civic groups, such as the NAACP, City Councilmen, non-profits, and known minority leaders in our community.
- Provided messaging to share on social media pages, in meetings, in church newsletters, local LatinX radio stations, and on pulpits.
- Created a PowerPoint presentation with pictures of minority community leaders receiving their vaccines and smiling during the process in order to ease fears of vaccinations.
- Used "Word-of-Mouth" and positive experiences to increase the percentage of the minority population seeking the vaccine.
- Union County Public Communications Department designed billboards, coordinated radio interviews, and produced a Q-and-A video, which was widely viewed, with our Medical Director and several minority community and church leaders.
- Conducted outreach and pop-up vaccine clinics across the county, concentrating in the Eastern portion of the county where the SVI (Social Vulnerability Index) is the highest.
- Provided COVID-19 vaccine clinics at several small and large businesses throughout the county over the past year.

## SUD ROOTS SUMMIT PLANNING

During 2021, the Healthy Union Coalition Substance Use Disorder (SUD) Subcommittee met monthly, but programs and services in the SUD arena remain siloed and there were significant gaps and needs in Union County.

To address these issues, the Healthy Union Executive Committee suggested having a summit meeting to gather everyone who might touch a person with SUD around the table, including providers, health care, law enforcement, courts, schools, etc.

Wingate University's Collaborative for the Common Good (CCG) and the Healthy Union Advisory Coalition representatives started planning for a ROOTS Summit on April 26, 2022 with the following goals:

- Map out current SUD services and partners in Union County
- Determine gaps and needs in Union County
- Lay the groundwork and foundation for a community plan/strategic plan to address SUD in the community (including programs and services)

## Union County Environmental Health Division FY2021

### WATER QUALITY INITIATIVES

Surface and ground water quality concerns continue to drive requests for well water sampling and well (down-hole camera) assessments in Union County. Environmental Health created a framework for a well rehabilitation and repair program using American Rescue Plan Act funds.

This program will assist qualifying homeowners with the testing, repair and/or replacement of contaminated wells.

Our partnership with the University of North Carolina-Chapel Hill Superfund Research Program and Clean Water for North Carolina on a multi-faceted well water outreach project continues.

Environmental justice factors are used to identify focus areas of Union County that may have higher environmental burdens and vulnerable populations.

Engineering research to identify improved well construction practices and develop lower-cost treatment options for arsenic and co-contaminants is being conducted. This research will be used to develop tools to improve public health practices and educate decision makers on future land development options.

## LEAD AND ASBESTOS IN CHILD CARE FACILITIES AND PUBLIC SCHOOLS

North Carolina Session Law 2021-180, Section 9G.8. (a) directed the Commission for Public Health (CPH) to adopt rules as necessary to implement requirements for the testing and remediation of lead in drinking water in public schools and the inspection for and abatement of asbestos and lead-based paint hazards in public schools and child care facilities.

Temporary rules to establish these requirements have been proposed and public comments are being sought. American Rescue Plan Act funds are to be used to remediate these environmental health hazards.

## ON-SITE WASTEWATER DISPOSAL SYSTEM REPAIR AND REPLACEMENT PROGRAM

Approximately 35% of Union County residents utilize on-site wastewater (OSWW) disposal systems to treat the wastewater generated in their homes and businesses. System age and limited soil and site conditions have contributed to the increasing number of malfunctioning OSWW disposal systems. This is a serious public health issue.

Environmental Health is developing a framework to utilize Community Development Block Grant funding to implement a program to assist qualifying property owners with the maintenance, repair, or replacement of failing systems.

### Environmental Health COVID-19 Response

The Environmental Health Division continues to adapt and support the public health response to the COVID-19 pandemic in Union County. While the rate of community spread of the disease fluctuates, Environmental Health Specialists (EHS) assist with guidance and implementation of the NC DHHS Public Health Tool Kits for child care facilities and schools.

We continue to conduct COVID-19 risk assessments at the start of all facility inspections with a focus on minimizing disease spread through preventive measures, identification of symptomatic employees and proper cleaning and disinfecting procedures. Environmental Health investigates resident complaints related to COVID-19 in regulated facilities. Present trends seem to indicate that our COVID-19 response is moving toward case monitoring and surveillance activities such as wastewater outflow testing.

## Emerging Issues

- Impact of COVID-19 response on substance use disorders and behavioral health needs in the general community (depression, suicide, etc.).
- Impact of COVID-19 response on youth educational delays/set-backs and disruption of supportive assistance particularly for high risk population groups.
- Impact of COVID-19 response on delays in preventive health care that could lead to later diagnosis and effective management of chronic health conditions.
- Impact of COVID-19 response on possible reduction in health promotive behaviors that reduce the risks contributing to chronic health conditions (physical activity, diet/nutrition, alcohol & substance use, etc.).
- Impact of Medicaid reform on access to care for underserved population groups.

## Paused Initiatives

### HEALTH EQUITY COMMITTEE

During 2019, the Health Equity Committee (HEC) provided educational workshops during meetings. Due to decreased attendance and interaction during meetings, the leadership committee met during early 2020 and unanimously agreed to refocus the committee on access to care issues. The revamped Health Equity Collaboration meeting was scheduled to meet on March 25, 2020, but this was canceled due to COVID-19. Due to limited Health Department resources during COVID-19, the committee was put on hold. Our goal, in 2022, is to re-evaluate how this committee fits in with the Healthy Union Advisory Coalition, as several of the HEC members are involved with our Healthy Union Advisory Coalition and we may merge this group or develop a new subcommittee that represents Historically Marginalized Populations to continue our work among these populations.

### MINORITY DIABETES INITIATIVE

In October 2019, Union County Human Services Agency entered into a Memorandum of Agreement with the Cabarrus Health Alliance to bring a new minority diabetes program called Journey to a Healthier Me to Union County. We started our first cohort with employees at Union County Human Services Agency in early Feb. 2020, with the goal of launching this into the community in the spring 2020. Unfortunately, due to COVID, this program was put on hold. We have revisited this initiative about every six months since that time, but we continue to wait until the Cabarrus Health Alliance can conduct in-person classes for optimal results. Our hope is to restart this initiative in 2022.



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