

Community Health Assessment 2016 Scotland County, NC



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Executive Summary

Background and Purpose

A community health assessment is a process by which community members gain an understanding of the health, concerns, and health care systems of the community by identifying, collecting, analyzing, and disseminating information on community assets, strengths, resources and needs. There are four basic steps to the assessment process:

- Determine the health status of the community
- Assess risk factors associated with identified health problems
- Identify the health care resources available in our community to promote action directed toward the identified problems
- Establish health priorities and the appropriate interventions

Methodology, Data Collection and Analysis

Every three years, local health departments across the state of North Carolina are mandated to complete a comprehensive Community Health Needs Assessment (CHNA). It is a requirement of the consolidated agreement between the health departments and the NC Division of Public Health, and the project requires community involvement and collaboration. Although many hospitals were already partnering with health departments to complete this project, the Internal Revenue Service mandated in 2012, that all not-for-profit hospitals participate in a community health assessment every three years.

In the fall of 2015, Scotland County Health Department and Scotland Health Care System began the implementation of the 2016 Community Health Needs Assessment (CHNA) for Scotland County. The effort focuses on assessing community health needs, local health resources, barriers to care, gaps in services and trends regarding health and healthy lifestyles. The resulting CHNA will be utilized to document community need and link those needs to community benefit efforts. The needs assessment will be utilized to assist the health department and hospital in planning and prioritizing its community outreach and programs through action plans and strategic planning.

Through this assessment, health concerns that affect our population, including available resources that can address these concerns, have been identified. The assessment report serves as a basis for improving and promoting the health of Scotland County residents and can be used as a planning tool to determine the focus and direction in addressing health and community concerns through 2019.

Results of Primary Data via Surveys

The Scotland County Community Health Assessment Survey was developed and distributed throughout the county to collect primary data from the community through hard copies as well as internet surveys. Initially, approximately 500 surveys were either distributed or answered via Survey Monkey, and a secondary survey (approx. 150) was also conducted to further identify or confirm priorities for our County. Survey Results are provided in the Appendix Section. Following is data related to the surveys.

- Leading causes of death – *heart disease, cancer, homicide/violence, diabetes, drug/alcohol use*
- Priority health issues – *high blood pressure, diabetes, heart disease, obesity, cancer*
- Priority risk factors – *lack of physical activity, poor nutrition, use of tobacco, substance abuse, and unprotected sex,*
- Leading factors affecting families seeking medical treatment – *lack of insurance, unable to pay for visit to doctor, fear, lack of knowledge/understanding, and transportation*
- General concerns – *economic, health insurance, literacy, crime, lack of transportation*

- Environmental concerns – *safe places to walk and play, healthier food choices,*
- Educational opportunities – *chronic diseases, substance abuse, smoking cessation, pregnancy prevention, wellness services/programs, sexually transmitted diseases*
- Would like to see more of – *job opportunities, after school programs, recreation facilities, dental services, substance abuse rehabilitation and mental health services*
- Respondents indicated they support tobacco-free public places/buildings in Scotland County

Identified Health Priorities

A variety of data and information was collected and analyzed in order to identify key priority health needs of the community. The prioritization process included review and analysis of:

- 1) Primary - qualitative community feedback
- 2) Secondary - quantitative statistical data

The 2016 Community Health Assessment Survey results indicated respondents felt the top five community health priorities were High Blood Pressure, Heart Disease, Diabetes, Obesity and Cancer. The top five behavior risks identified were lack of physical activity, poor nutrition, use of tobacco, substance abuse (alcohol/drug use) and unprotected sex. The table below depicts the top ten priority health concerns in 2016 with the three health issues highlighted in red as the new areas to focus on.

2016 Health Priorities	2016 Behavior Risk
High Blood Pressure	Lack of Physical Activity
Heart Disease	Poor Nutrition
Diabetes	Use of Tobacco Products
Obesity	Substance Abuse (Drug/Alcohol)
Cancer	Unprotected Sex
Stroke	Child/Spouse/Parent Abuse
Dental Health	Environmental Factors
Mental Health	Seatbelt Use
Asthma/Lung Disease	Crime
Sexually Transmitted Disease	Child Safety Seat Use

In addition to review of the above, additional meetings with stakeholders and community members were facilitated to develop action plans concerning the health issues indicated by the community responses. To select priorities and related strategies, the following criteria were considered:

- Data and community feedback indicated the issue as an important community need
- Scotland County Health Department and Scotland Health Care System has the capacity to impact the issue
- Addressing a selected issue holds the potential to affect other key health conditions, therefore creating a multiplying effect
- Strategies selected align with and support the Scotland County Health Department and Scotland Health Care System's mission and vision
- Strategies selected take in consideration current assets in both the community and within Scotland County Health Department and Scotland Health Care System, along with those identified in the Healthy North Carolina 2020 Objectives

In considering the above, the following were selected as priorities:

1. Obesity (Physical Activity and Nutrition) - Ongoing

Overweight and obesity are significant risk factors for both children and adults affecting chronic diseases such as heart disease, diabetes and cancer. Obesity is a condition affecting many residents in Scotland County and is the number one health problem in children. The 2014 North Carolina Child Health Report Card (NCDHHS) states in 2012, **43.2%** of our children ages 2 to 9 years and **36.3%** children 10 to 17 years, are overweight or obese.

Lack of physical activity and poor nutritional habits are major factors in overweight and obesity. The North Carolina Child Health Report Card 2014 reported **26.7%** of students, age 10-17 yrs, and **36.7%** of children ages 2 to 9 yrs. were physically active the recommended total of 60 minutes or more per day on five days or more.

2. Mental Health (Substance Abuse/Alcohol/Drug Use) – NEW and Emerging Issue

Scotland continues to be served by Eastpointe (Mental Health, Substance Abuse and Suicide Prevention). As of October 2016, there are 18 private providers (for-profit and non-profit) endorsed by them to provide at least one service related to mental health, developmental disabilities, and substance abuse. There are also at least three additional providers with licensed staff providing professional mental health services in Scotland County. Several services remain in short supply – psychiatric services, outpatient substance abuse services, intensive in home services, and day treatment programs. Often, clients need to go to more than one provider to receive services determined to be medically necessary and appropriate. To access mental health in Scotland County, individuals now have to refer the Eastpointe Call Center at 1-800-913-6109 or TTY 1-888-819-5112, or their health care providers.

3. Dental (Oral) Health – NEW and Emerging Issue

In 2012-2013, the percent of children in Scotland County with untreated tooth decay for kindergartners was 24% compared to the State with 13% and 9% with untreated tooth decay for 5th graders compared to the State with 2%. In 2014-2015, with a focus on our Kindergarten students, our Public Health Dental Hygienist with the North Carolina Oral Health Section/Division of Public Health, will provide annual screenings/referral/follow-up; Promote a school-based Fluoride Mouth Rinse Program with 100% participation for all seven Scotland Elementary Schools, Training for Into The Mouths of Babies, (IMB/ Fluoride Varnish Programs), dental education; dental sealant promotion projects at high risk schools; and is a resource on all oral health issues with health care providers, consumers and community organizations.

Scotland County has eight local dentists (or 2.2 per 10,000 population) and most accept Medicaid for their established patients. Children are also referred to **Richmond County Dental Clinic** that provides all types of general dentistry including exams, x-rays, fillings, complete cleanings, dental sealants and extractions to children ages 4 to 20 yrs. In addition, Scotland County Health Department has an MOA with **East Carolina Dental at Lumberton** for dental health referral.

Today, it is possible families can more easily obtain dental coverage for their children in plans offered in the Health Insurance Marketplace. In addition, the North Carolina Medicaid program and North Carolina Health Choice covers dental services for children and an increase in Medicaid enrollment, may lead to more children receiving preventive oral health services.

Community Health Assessment Dissemination

This Community Health Assessment Report will be made widely available to the public, to key stakeholders, agencies and posted on Scotland County's website: www.scotlandcounty.org under "Health Department", Scotland Health Care System's website: www.scotlandhealth.org, made available at Scotland County Library, at each municipality offices, and other agencies upon request along with providing the report to Scotland County's Legislative and Senate Representatives.

~Acknowledgements~

Scotland County Health Department and Scotland Health Care System would like to thank all those who volunteered their time and effort toward planning, developing, and completing the Scotland County Community Health Needs Assessment 2016 (CHNA). Special acknowledgement is given to the Community Health Assessment Core Work Group for their creative contributions and time to this body of work. The Scotland County Community Health Assessment Committee, Core Work Group, members of the Active, Healthy Living Partnership and community members are recognized for their time and consideration in reviewing this assessment data to help create action plans delineating the focus and direction for Scotland County Health Department and Scotland Health Care System.

Thank you to Summer L. Gainey, PhD, LCSW with The University of North Carolina at Pembroke Assistant Professor, Department of Social Work for participation and input; and Julia Harmon, UNCP Health Education Student Intern, who helped with survey input, research and data entry; Patrick Bines, MA, CCP, CTTS, who developed the CHA Survey for distribution on Survey Monkey, helped with data analysis report, provided links to survey on various websites and created Scotland Health Care System's second CHNA Report and especially to all staff, agencies and community volunteers who helped provide input and distribute the surveys county-wide.

It is hoped the work of these individuals, separately and in committee, will serve to enhance health and community services, promote healthy lifestyles and a healthy environment in Scotland County.

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Preface

In the fall of 2015, Scotland County Health Department and Scotland Health Care System began the process and implementation of a Community Health Needs Assessment (CHNA) for Scotland County. This collaborative effort focuses on assessing community health needs, local health resources, barriers to care, and trends regarding health and healthy lifestyles. The resulting CHNA will be utilized to document community need and link those needs to community efforts of our health systems. The needs assessment will be utilized to assist the health department and hospital in planning and prioritizing its community benefit investments and outreach efforts.

The 2016 CHNA Report, an accreditation requirement for Scotland County Health Department, is Scotland County's *fifth* Community Health Assessment since 2001. The community health assessment is a process by which community members gain an understanding of the health, concerns, and health care systems of the community through identifying, collecting, analyzing, and disseminating information on community assets, strengths, resources, and needs.

The concerns of the community (primary data) were received through a health opinion survey disseminated randomly throughout Scotland County in 2015 with a total of nearly 650 surveys received. Secondary (or statistical) data from the NC State Center of Health Statistics, NC Division of Health and Human Services and local organizations were also accumulated to identify health problems, evaluate health resources, and develop strategies for addressing these problems in Scotland County. The assessment provides direction and focus for the Active, Healthy Living Partnership, Scotland County Health Department, Scotland Health Care System, Scotland County Department of Social Services, Scotland Cancer Treatment Center, Scotland Community Health Clinic and many other community agencies and organizations in Scotland County.

Scotland County Health Department must provide the State of North Carolina, Department of Health and Human Services, a comprehensive community health assessment every three years and a State of the County Health Report in each of the interim years. The North Carolina Division of Health and Human Services administers this three-year cycle. Support and training for this community assessment is provided by the North Carolina Division of Public Health.

The Scotland County CHNA Action Plans focusing on the identified top three priorities of Obesity, Mental Health (Substance Abuse) and Dental Health, corresponds with the Healthy North Carolina 2020 focus areas, and will follow in the summer of 2016.



Scotland County Governmental Complex, Laurinburg, NC

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John Blue Cotton Festival, Laurinburg, NC 2016



Section I

Introduction

The Scotland County Community Health Assessment 2016 serves as a basis for improving and promoting the health of Scotland County residents. Through this assessment, health concerns that affect our population including available resources that can address these concerns have been identified. The information will assist health organizations within Scotland County in determining priority health issues, identifying resources, and planning community health programs. Responses were sought from all areas of the county and across the board representation provided from all communities and ethnicities to complete the assessment. The results of this assessment are available as a planning tool to determine the focus and direction in addressing health and community concerns with the Healthy People 2020 Objectives in mind.

~Scotland County, North Carolina~

Geography

Scotland County is nestled on the border of North and South Carolina known as the 'Sandhills Region', just 100 miles from sandy beaches to the east and a few hours from the magnificent mountains to the west. Scotland County is halfway between Charlotte, the state's largest city, and Wilmington, the state's largest port and only two hours from our state capital, Raleigh. Interstate 95 is just minutes away and four U.S. highways intersect the county. The Lumber River flows along the northeastern edge of the County. Laurinburg is Scotland County's largest town and also serves as the county seat. Gibson, Wagram, East Laurinburg, Laurel Hill and part of the town of Maxton make up the various communities in the county. The surrounding counties include Hoke, Moore, Richmond and Robeson County and Marlboro County in South Carolina.

Scotland County has a total area of about 319.14 square miles with 318.99 square miles of land area. Its land size is 18 miles east to west and 25 miles north to south. The elevation of Scotland County is 227 feet above sea level. The county's average temperature is 49 degrees Fahrenheit in January and 80 degrees Fahrenheit in July. The average annual rainfall is 48 inches.

History

The earliest settlers of Scotland County were composed mainly of Highland Scots. It is believed that settlers arrived in what is now Scotland County as early as 1729. Today long-time Scotland County residents can trace their ancestry to a variety of ethnic heritages including African American, Scotch-Irish, English and Welsh. The political beginning for Scotland County occurred in 1899 when the legislature of North Carolina created Scotland County from the original county of Richmond. In the following years, Laurinburg grew as a result of the railroad and the textile industry.

Scotland County is an "All-America" county with Laurinburg, the county seat, capturing three All-America City awards. Though Scotland is one of the smaller counties in North Carolina, it exemplifies a commitment to excellence and a tradition of continuous self-improvement. It stands tall in economic development, community pride and volunteerism.

Scotland County is home to 16 major industries, seven shopping centers, one university, a hospital/health care system, nine public schools, one early college high school, three private schools and nearly 150 Churches, St. Andrews Presbyterian University, Scotia Village Retirement Community, and the Lumber River Canoe Trail.

Demographics

In July 2015, the estimated population of **Scotland County** was 35,509, ranking 67th for total population in North Carolina and designated as "rural" in the United States census. This represents a change of -1.8% since April 1, 2010. Nearly 18,660 (51.6% urban) citizens live in Laurinburg, the County seat, and 48.4% (rural areas). **Laurinburg, Gibson, Wagram, East Laurinburg**, unincorporated **Laurel Hill** and **Maxton** make up the various townships/communities in the county.

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Population density is 113.4 per square mile. The population growth projection for 2019 is 35,870. The median age in Scotland County is 39 yrs.

A table depicting population percentages by race follows using Richmond County as a peer county and the State of North Carolina:

Race	Scotland County	Peer County	North Carolina	Gender	Male	Female
White	46.3%	47.2%	71.2%			
Black	39.1%	48.6%	22.1%	Scotland	49.6%	50.4%
American Indian	11.5%	0.6%	1.6%	North Carolina	48.7%	51.3%
Hispanic	2.8%	3.0%	9.1%			

(Scotland County Quick Facts from US Census Bureau 2015 estimate)

Projected Pop. 2015	Total	Ages 0-19	Ages 20-64	Ages 65+
White	16,199	3,217	9,296	3,586
Non White	19,622	6,128	11,201	2,293
Total	35,821	9,345	20,497	5,879
% of Population	100.0%	29.4%	58.3%	13.6%

North Carolina: Persons 65 years and older, percent 15.1%
(July 2015 estimates - NC State Demographics)

Socioeconomics

Year	Scotland County Per Capita Income	North Carolina Per Capita Income	United States Per Capita Income
2011 to 2015	\$15,849	\$25,920	\$28,930

(Scotland County US Census Bureau 2011-2015)

Scotland County 2015-2016:

- Adopted tax rate is \$1.02 within city limits
- Adopted tax rate is \$1.07 for the county;
- Current city tax rate is .40 per \$100 valuation
- Projected Media Household Income - \$30,958
- Average weekly wage for all industries – approx. \$653 (2nd Qtr 2016)

Scotland County Poverty Rate: (2011-2015) **28.9%** NC Poverty Rate: (2011-2015) **17.4%**

- Richmond County 28.7%
- Bladen County 25.4%
- Anson County 25.2%
- Montgomery County 19.2%

The percent of poverty/economic hardship varies by race: (2010-2014)

- African American 45.1%; American Indian 39%; White 16.2%
- Child Poverty rate – 46.5% compared to North Carolina rate of 24.4%
- Elderly Poverty rate – 13.1% compared to North Carolina rate of 15.7%
- Low-income less than twice the federal poverty level – 57.3%

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With the downturn in the economy over the past several years, poverty rates have climbed at an alarming rate and are much higher than the nation's 13.5% poverty rate. Scotland County's poverty rate decreased slightly from 32.3% in 2013 to 28.9% in 2015, when compared to the state's poverty level of 17.4%. (US Census Bureau, 2011-2015). (NC Department of Commerce/ACCESSNC Jan. 2017).

Medicaid Eligibility

According to the NC Office of State Budget and Management (March 2016), 11,257 people in Scotland County were eligible for Medicaid in December 2015, an increase of 12.1% since December 2007 when the recession began. The table below compares peer counties lowest to highest and in North Carolina:

Medicaid Eligible Population			
Residence	2012	2013	2014
North Carolina	1,580,198	1,588,356	1,815,651
Montgomery	6,281	6,208	6,432
Anson	6,242	6,068	6,806
Bladen	8,419	8,283	9,018
Scotland	10,692	10,643	11,560
Richmond	12,734	12,768	14,030

NC Department of Health and Human Services/LINC 2016

Employment/Unemployment

Since 2012, the unemployment rate in Scotland County was at 17.2% and in September 2013 at 14.6%, both ranking Scotland County first in the state. The following chart shows the unemployment rate and ranking trend since 2014 showing our economically distressed county continuing to be the highest in the state:

Year	Unemployment Rate	Rank in North Carolina	Unemployment Rate/NC
2014	17.3%	1	10.0%
2015	15.5%	1	8.9%
2016	10.7%	1	4.7%

As of this report, the **top three employers** in Scotland County are: Scotland County Schools with over 850 employees, Scotland Memorial Hospital with approximately 560 employees and County and Municipal Governments with up to 500 employees along with 16 manufacturing industries with over 100 employees each. (NC Dept. of Commerce/ACCESSNC Jan. 2017)

Approximately 77.2% of the workforce is in private industry and 17.1% in government. There are approximately 17.2% of Scotland County residents employed in manufacturing, 12.2% in retail, 30.5% in educational services, healthcare and social assistance, and 4.3% in public administration. Other employment percentages show 7.5% in arts, entertainment, recreation and food services, 6.0% in construction, 3.1% in transportation, 3.2% in real estate and finance, and 2.7% in agriculture and forestry.

Unemployment Rates Peer Counties			
Residence	2014	2015	2016
North Carolina	10.0%	8.9%	4.7%
Montgomery	12.6%	10.5%	n/a
Anson	19.5%	17.6%	n/a
Bladen	12.9%	12.1%	n/a
Scotland	17.3%	15.5%	10.7%
Richmond	15.5%	13.8%	n/a

Social Services

In F/Y 2015-2016, Social Services investigated 467 reports of Child Abuse/neglect and substantiated 68 of those reports. DSS evaluated 37 reports of abuse, neglect and exploitation of disabled adults and 9 cases were substantiated. DSS maintained 9,546 total Medicaid cases and 11,940 individuals received benefits from Medicaid.

The Social Services staff provided child care subsidies for 599 children at a cost of \$1,685,857, to enable parents to train for work or go to work. DSS issued \$16,678,978 in Food Assistance to 4,889 families, including children, elderly and disabled adults. DSS collected \$4,960,542 in child support payments and established paternity for 299 children, located 333 non-custodial parents, and established and enforced 4,433 support order/obligations. DSS also approved 1,227 applications to receive \$262,300 in Crisis Intervention funding toward heating or cooling costs and assisted 995 households with Low Income Energy Assistance totaling \$253,400. (Scotland County Department of Social Services Annual Report 2016)

Education

The **Scotland County School System** is home to seven elementary schools serving students grades Pre-K through five: Covington Street, I. Ellis Johnson, Laurel Hill, North Laurinburg, South Scotland, Wagram and Sycamore Lane; two middle schools serving students grades six through eight: Carver and Spring Hill; one early college high school that allows students to attain a high school diploma and an associate's degree in five years on the campus of St. Andrews University. Shaw Academy serves students in grades 6 through 12 who have difficulty adjusting to a more structured environment.

In May 2015, Scotland County Schools maintained a four-year graduation rate of 81.8 percent, up from the 2014 rate of 78.3% and slightly below the 2013 four-year graduation rate of 82.5.

Scotland County Schools are committed to addressing the needs of the "whole child" by having healthy, safe and orderly schools. Many programs and services are available for children at risk of academic failure. **Students in our county have access to 8 social workers, 10 nurses, 15 school counselors, 5 school psychologists, 4 School Based Mental Health Workers, 2 Attendance Liaisons and 1 Director of Student Support Services.** These professionals can work with students on an individual and/or group basis to address barriers that prohibit them from being successful in school.

Scotland County School system is one of twenty-one school systems in North Carolina selected for the school based **Child and Family Support Team Initiative**, now in its eleventh (2016-2017) year of implementation. Teams of nurses and social workers have been placed in six schools within the district to assist children and families in securing resources and services to help the child be successful in school. This initiative is voluntary and family centered. Action plans are developed in collaboration with other community programs and services that address the needs of the family. Plans are underway to train personnel in the remaining schools to facilitate child and family meetings as these meetings have proven to be very productive.

Scotland County **school nurses** are very busy with a variety of duties including screening children for health risks (vision, hearing, blood pressure, height, weight, etc.), developing emergency action plans, and individual health plans for students with ongoing health issues. Homebound services are offered to address the academic needs of students who have to be out of school for an extended period due to health concerns. The system also has a protocol in place for mental health emergencies to assist students with remaining safe and obtaining the help that they need.

The **Scotland County Child Nutrition Department** consists of 105 full and part time employees. They serve an average of 5000 meals (breakfast and lunch) a day. **Currently, 100% of the student body is eligible for free or reduced lunches through the Community Eligibility Provision (CEP); part of the Healthy Hunger Free Kids Act of 2010.** The Child Nutrition Department's goal is to serve good, nutritious meals in a clean, safe and friendly environment.

All schools have a "**Multi-Tiered Systems of Support**" Team (MTSS) which assists children who may be having any variety of difficulties. The majority of the SCS are trained to implement Positive Behavioral Interventions and Supports (PBIS) which is an evidence-based program proven to reduce school behavior problems. The On Track Progress Teams work diligently to reach students who have dropped out, or are considering dropping out. The Judicial Attendance Council has been successful in

increasing the attendance of students referred for truancy issues. This council meets monthly and includes a variety of members in the community.

Graduation Rates: The overall four-year cohort graduation rate for Scotland High, the Early College and Shaw Academy was 82.5% - the highest since rates were tracked. Scotland Early College had a graduation rate of 95%. The North Carolina Department of Public Instruction has not yet released the official drop out data for the 2015-2016 year, but the Scotland County School system had 97 students drop out during the 2014-2015 school year. **The graduation rate for black students at Scotland High School was 88.4%, above the state average of 85.8 percent. The rate for white students was 83.8 % and Hispanic students had a graduation rate of 77.8%.** Shaw Academy's graduation rate was 62.5%.

Proficiency Rates: Scotland County's proficiency rate for End of Grade is 55.5% while the state average is 58.2%. Nearly 52.8% of students were proficient in math (60.5% for NC), 51.3% proficient in biology (55.5% for NC), and 42.6% proficient in English (58% for NC).

Private Schools include the **Laurinburg Institute** - a private secondary school that serves African-American high school students; the **Scotland Christian Academy** that serves approximately 250 students in kindergarten to 11th grade, **Westside Baptist Church School and Stewartville Baptist Church** that serves kindergarten through 12th grade.

Higher education - Scotland County is home to **St. Andrews Presbyterian University** – a 4-year liberal arts college serving approximately 900 students from all over the world. **Richmond Community College** operates centers in Scotland County and focuses its vocational program in this area. The **University of North Carolina Pembroke** is located 15 minutes to the east of Laurinburg in neighboring Robeson County and offers a full range of undergraduate and graduate degrees.

Educational Attainment – Scotland County (2011-2015)

- 81.8% graduation rate compared to 85.6% of North Carolina residents aged 25 years or older graduated from high school (2014-2015)
- 15.8% of adults had a bachelor's degree or higher compared to 28.4% for the state.
- 80.5% graduation rate for African Americans; 87.5% for Hispanics; 86.6% for Whites (2014-2015)
- Approx. 24.5% of adults over the age of 25 in Scotland County have less than a high school education and read at the Level 1 literacy rate. (US Census Bureau, Scotland County Quick Facts/NCEDIS).

Environment/Air Quality

The Environmental Health Section of Scotland County Health Department protects and improves the public's health by controlling the environmental factors which can adversely affect human health. Environmental Health Specialists provide preventive health through inspections, education, and enforcement of state and local rules in programs for food and lodging, on-site wastewater disposal, pools, tattoo establishments and institutions, poisoning and animal control. Scotland County Health Department has two Environmental Health Specialists and two Animal Control Officers to provide services for the county.

In F/Y 2015-2016, the Environmental Health Department provided **30** new well permits (down from 37 in F/Y 2014-2015); **132** on-site wastewater improvement permits (down from 135 in F/Y 2014-2015); **201** food and lodging establishment inspections, **33** swimming pool inspections (up from 20 in 2014-2015), **22** day care inspections with **3** child lead exposure; Responded to complaints as follows: **0** sewage; **5** food, **3** water, **3** livestock and **22** mold complaints.

The North Carolina Division of Air Quality monitors the condition of outdoor air tracking. Air Quality measures how clean the air is and the health effects that are concerned across the state.

Animal Control:

The Animal Control Program of the Scotland County Health Department is charged with the responsibility of enforcing state and county laws, ordinances, and resolutions pertaining to the care, custody and control of county animals.

In F/Y 2015-2016, the North Carolina State Laboratory confirmed no positive cases of rabies in Scotland County. Rabies is transmitted from one animal to another and from animals to people. Officials ask citizens to stay aware and have their animals vaccinated by a licensed veterinarian. Scotland County Animal Control during (F/Y 2015-2016) had **2,981** animal control calls; **408** animal control ordinance violations (loose or tethering); **32** animal bite investigations and **1,010** animals impounded.

The City of Laurinburg has one Animal Control Officer who provides services within city limits and enforces city ordinances and state laws.

Transportation

Transportation continues to play a vital role in the health and well being of Scotland County residents since "transportation" enables or diminishes access to services such as health care, as well as access to employment, school, day care, and more. Scotland County Area Transit System (SCATS) has eleven public transportation vehicles. These can be used by eligible Medicaid clients and the general public to go to pharmacies and medical appointments within the City of Laurinburg and in Scotland County. Scotland County Area Transit System (SCATS) continues to respond and serve the transportation needs for programs such as Work First, the Division of the Blind, Council of Government Council on Aging clients over age 60, Medicaid recipients, and the elderly and disabled population. The system also continues to transport clients to Moore Regional Hospital, UNC Medical Center, and Duke Medical Center for medical appointments, and to various clinics, pharmacies, and medical services not available in Scotland County.

The SCATS system maintains two fixed routes serving approximately 1,800 to 2,000 passengers monthly. The Red Line Route serves East Laurinburg and the north side of Laurinburg. The Blue Line Route serves the north and east side of Laurinburg with several stops on the southern end of town. The two routes (the Blue Line and the Red Line) have several common stops that allow riders to transfer from one line to the other to reach different areas of the community. Scotland County Area Transit System (SCATS) runs Monday through Friday from 8:00 am to 5:00 pm and costs \$1.00 per person per day.

Recreation

Recreation and leisure are important aspects of life in Scotland County. Parks and playgrounds, festivals and football games, fishing and canoeing on the Lumber River, small lakes, golfing on two public courses and a private country club course, fitness activities and sports for youth, and numerous entertainment opportunities for the entire family are only the beginning. Scotland County is home to the popular John Blue Cotton Festival, held annually in October on the grounds of the historic John Blue House. The festival celebrates the contributions and innovations of those who lived the rural Southern farm life more than 100 years ago. Other opportunities include outdoor concerts such as Laurinburg after Five, ENCORE! Community Theatre, the Kuumba Festival celebrating the county's African American heritage, the Storytelling and Arts Center featuring renowned events such as the Boldface Liar's Showdown, and the renowned Highland Games with the sounds of wailing bagpipes are familiar to many community gatherings, symbolizing the county's strong Scottish heritage.

Scotland County Parks and Recreation's mission is "to actively encourage, provide and promote quality leisure, recreation and cultural opportunities, facilities and environment which are essential to the health and enhancement of the lives of our citizens." Quality of life is addressed by the park system and summer programs offered. Adult and youth sports are a strong component of the Parks and Recreation offerings with over 1,550 youth ages 5 to 15 participating each year. A new comprehensive guide to summer programs is now available to citizens of Scotland County through Parks and Recreation. Scotland County is home to 16 area parks, some with walking trails and maps available to the public. The **James L. Morgan Recreation Complex** is home to four baseball fields (for games and

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tournaments), five soccer fields, a disc golf course, and a “Splash Pad” which opens late spring through Labor Day Weekend for children of all ages.

The NC Division of Aging projects 53% of Scotland County's population will be 60 years of age or older by 2035. **Scotland Place Senior Civic Center**, strives to enrich the lives of Scotland County adults age 55 and over through programs and services that will improve their health and wellness, decrease their loneliness and isolation, as well as provide social, economic and educational opportunities that enhance their quality of life. The “Senior Center” is home to most of the activities and provides numerous year-round opportunities for aerobic exercises, Bingo, dancing, group meals, bus trips, movies, basket weaving and woodcarving to name a few. The evidence-based American Arthritis Foundation Exercise class “A Matter of Balance” provides structured programs with confirmed benefits, along with a Grandparent Support Group that addresses the needs of grandparents raising children. Senior Games draw in the older generation to try their hand at various sports, which include horseshoe throwing, basketball throwing, shuffleboard, and swimming.

The **Wagram Recreation/Active Living Center** became the multi-purpose senior center for Scotland County in March 2014 expanding services and programs for all generations providing activities to increase physical activity. The Parks and Recreation Advisory Board and Recreation Foundation continue to plan for future recreational activities.



Wagram Recreation/Active Living Center



James L. Morgan Sports Complex

Scotland County Sheriff's Department: See **Crime Table** below for information relating to crime in Scotland County for the years 2006 through 2015.

Scotland County	Offense Category	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
	Murder	2	4	8	10	6	7	7	4	4	5
	Rape	21	13	10	16	11	5	6	17	9	11
	Robbery	46	42	60	48	44	58	33	41	40	39
	Agg. Assault	111	86	116	130	121	98	141	218	173	175
	Burglary	511	686	830	735	790	781	812	791	729	759
	Larceny	711	732	847	859	727	896	901	683	622	669
	MV Theft	103	105	115	112	94	86	50	59	63	70
Total		1,505	1,668	1,986	1,910	1,793	1,931	1,950	1,813	1,640	1,728

(NC Department of Justice 2015 Data)

Emergency Medical Services

For F/Y 2015-2016, Scotland County's Emergency Medical Service (EMS) reported 376 calls for traffic accidents. Following traffic accidents, the four leading calls to EMS were for:

Leading Calls	Number
Sick Person	987
Transfer/Interfacility/Palliative Care	652
Breathing Problems	431
Traumatic falls/back injuries	439

Laurinburg Police Department: In 2015, the Laurinburg Police Department reported 47 arrests for DWI (Driving While Intoxicated) with 6 involving alcohol-related accidents with no fatalities. Through December 21st, 2016, 51 arrests for DWI were reported with 4 involving alcohol-related accidents with no fatalities.

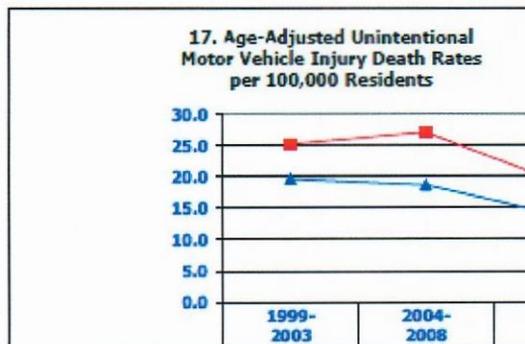
Highway Patrol – Scotland County

According to the North Carolina Department of Transportation, in a recent ranking of North Carolina counties with the most dangerous roads, Scotland County placed just inside the top tenth in the state. The state released county crash rankings with Scotland County ranking 10th (ranking 20th in 2013 and 26th in 2012). The report stated Scotland County averages 604 crashes annually (2011-2014) with an average of several fatal crashes per year. The average three year annual cost of accidents in Scotland County is approximately \$113,154,633 million.

According to the North Carolina Highway Safety Research Center, there were 8 traffic fatalities in Scotland County in 2015 with four involving alcohol, seven in 2014, and nine in 2013.

Motor Vehicle Crash Deaths

From **2009-2013**, the age-adjusted unintentional motor vehicle injury death rate for North Carolina was 13.7 (per 100,000 population). Scotland County's rate for the same period was 18.9 (per 100,000 population). Below is a table depicting the trend in the age-adjusted unintentional motor vehicle injury death rates in Scotland County (per 100,000 population). (NC State Center for Health Statistics, 2015)



Health Care Providers/Ratio

In terms of health care resources, in 2013 there were 19.6 physicians (per 10,000 population) in Scotland County compared to the North Carolina rate of 22.1 physicians and 7.8 Primary Physicians (per 10,000 population); 91.9 Registered Nurses, 2.2 Dentists and 7.7 Pharmacists (per 10,000 population).

(North Carolina Department of Commerce/ACCESSNC Jan.2017)

Breakdown of medical doctors in Scotland County 2016 (by specialty) is:

Anesthesia	6	Occupational Medicine	1
Cardiology	4	Oncology	7 (Medical and Radiation)
Dermatology	1	Ophthalmology	1
Emergency Medicine	4	Orthopedics	4
ENT	1	Pathology	1
Family Practice	15	Pediatrics	5
Gastroenterology	0	Podiatry	2
General Surgery	4	Psychiatry	0
Internal Medicine	2	Pulmonology	0
Hospitalist	7	Radiology	3
Nephrology	2	Urology	4
Neurology	1	Vascular Surgery	2
OB/GYN	4		Total 81

Section II

Scotland County Health Data

This section of the Community Health Assessment Report 2016 discusses health statistics from secondary data with respect to mortality, morbidity, teen pregnancy, births and deaths in Scotland County. Data is taken from the North Carolina State Center for Health Statistics Data Book 2015 and the North Carolina Vital Statistics 2015 Volumes 1 and 2. Information from these sources allows us to compare information from Scotland County with similar information from our peer counties (Montgomery, Anson, Richmond, and Bladen) where indicated, and in North Carolina. The findings will help our community determine health priorities and concerns.

Mortality Statistics

In 2015, Scotland County's total death rate was 1027.9 with 365 deaths (excluding fetal deaths) compared to North Carolinas' rate of 887.5 (per 100,000 population). **Heart Disease** was the leading cause of death in Scotland County with 89 deaths for a death rate of 250.6 compared to North Carolina's death rate of 183.9 (per 100,000 population). The next five leading causes of death in Scotland County were: **cancer** 233.7; **cerebrovascular disease** 70.4; **diabetes** 22.5; **chronic lower respiratory disease** 42.2; **chronic liver disease and cirrhosis** 19.7 and **motor vehicle injuries** 31.0 (per 100,000 population). There were three suicide and five homicide deaths in the county. (North Carolina Vital Statistics, 2015).

The leading causes of death in Scotland County, our peer counties and North Carolina during the period **2011-2015** and their unadjusted death rates (per 100,000 population) were:

Disease	Scotland County Rate	Richmond County Rate	Bladen County Rate	Anson County Rate	Montgomery County Rate	North Carolina Rate
Heart	239.3	279.7	313.4	256.4	202.2	178.9
Cancer	222.1	237.6	214.9	239.5	204.3	190.6
Cerebrovascular (Stroke)	59.1	70.8	54.1	66.6	48.5	46.4
Diabetes Mellitus	44.0	67.3	50.7	39.0	39.9	25.4
Chronic Lower Respiratory	57.3	76.9	58.8	59.7	71.7	50.3
Unintentional Motor Vehicle	20.6	19.1	30.5	26.0	21.7	13.9
Other unintentional injuries	36.2	41.3	40.9	32.1	31.2	31.5
Alzheimer's	29.5	31.7	28.8	19.9	56.5	31.7
Chronic Liver Disease/Cirrhosis	13.4	17.4	16.1	11.5	18.1	11.6
Nephritis, Nephrosis	22.3	28.2	35.1	36.7	18.8	17.8
Pneumonia, Influenza	16.7	14.8	19.6	19.1	29.0	19.2
Homicide	15.0	8.3	7.5	13.0	7.2	5.7
Suicide	7.8	12.6	10.9	9.9	10.9	13.2
HIV	3.9	3.9	4.0	1.5	1.4	2.5
Total Deaths-All Causes	1,055.3	1,170.1	1,140.5	1,137.9	1,018.8	851.4

(NC State Center for Health Statistics Vital Statistics Volume II, 2015)

Mortality Statistics Summary for 2015

Total Deaths - All Causes

Geographical Area	Number of Deaths 2015	Death Rate* 2015	Number of Deaths 2011-2015	Death Rate* 2011-2015
North Carolina	89,130	887.5	419,137	851.4
Scotland	365	1027.9	1,896	1055.3

Heart Disease

Geographical Area	Number of Deaths 2015	Death Rate* 2015	Number of Deaths 2011-2015	Death Rate* 2011-2015
North Carolina	18,467	183.9	88,076	178.9
Scotland	89	250.6	430	239.3

Cancer - All Sites

Geographical Area	Number of Deaths 2015	Death Rate* 2015	Number of Deaths 2011-2015	Death Rate* 2011-2015
North Carolina	19,309	192.3	93,838	190.6
Scotland	83	233.7	399	222.1

Cerebrovascular Disease

Geographical Area	Number of Deaths 2015	Death Rate* 2015	Number of Deaths 2011-2015	Death Rate* 2011-2015
North Carolina	5,028	50.1	22,863	46.4
Scotland	25	70.4	112	62.3

Diabetes Mellitus

Geographical Area	Number of Deaths 2015	Death Rate* 2015	Number of Deaths 2011-2015	Death Rate* 2011-2015
North Carolina	2,743	27.3	12,505	25.4
Scotland	8	22.5	79	44.0

Pneumonia and Influenza

Geographical Area	Number of Deaths 2015	Death Rate* 2015	Number of Deaths 2011-2015	Death Rate* 2011-2015
North Carolina	2,113	21.0	9,427	19.2
Scotland	8	22.5	30	16.7

Alzheimer's Disease

Geographical Area	Number of Deaths 2015	Death Rate* 2015	Number of Deaths 2011-2015	Death Rate* 2011-2015
North Carolina	3,803	37.9	15,585	31.7
Scotland	10	28.2	53	29.5

Chronic Liver Disease and Cirrhosis

Geographical Area	Number of Deaths 2015	Death Rate* 2015	Number of Deaths 2011-2015	Death Rate* 2011-2015
North Carolina	1,254	12.5	5,702	11.6
Scotland	7	19.7	24	13.4

All Other Unintentional Injuries

Geographical Area	Number of Deaths 2015	Death Rate* 2015	Number of Deaths 2011-2015	Death Rate* 2011-2015
North Carolina	3,470	34.6	15,499	31.5
Scotland	16	45.1	65	36.2

Motor Vehicle Injuries

Geographical Area	Number of Deaths 2015	Death Rate* 2015	Number of Deaths 2011-2015	Death Rate* 2011-2015
North Carolina	1,516	15.1	6,827	13.9
Scotland	11	31.0	37	20.6

Suicide

Geographical Area	Number of Deaths 2015	Death Rate* 2015	Number of Deaths 2011-2015	Death Rate* 2011-2015
North Carolina	1,406	14.0	6,502	13.2
Scotland	3	8.4	14	7.8

Homicide

Geographical Area	Number of Deaths 2015	Death Rate* 2015	Number of Deaths 2011-2015	Death Rate* 2011-2015
North Carolina	593	5.9	2,785	5.7
Scotland	5	14.1	27	15.0

Cancer Mortality Rates by Site: (2011-2015)

County	<u>Colon/Rectum</u>		<u>Lung/Bronchus</u>		<u>Female Breast</u>		<u>Prostate</u>		<u>All Cancers</u>	
	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate	Deaths	Rate
Scotland	26	11.8	142	64.8	28	24.3	14	17.7	399	180.9
<i>Montgomery</i>	26	13.7	91	48.3	19	21.4	10	14.4	282	154.1
<i>Richmond</i>	41	14.0	166	56.1	31	20.2	26	23.4	547	193.7
North Carolina	7,701	14.0	27,536	49.0	6,553	21.3	4,328		93,838	169.2

(NC State Center for Health Statistics – NC Central Cancer Registry, Dec. 2016)

According to the *Health Profile of North Carolinians 2015*, the 10 leading causes of death were the same for North Carolina as in Scotland County. Cancer, Heart Disease, Stroke and Chronic Lung Disease are the leading causes of death in North Carolina. Chronic diseases account for 60 percent of all deaths in the state. There have been dramatic increases in diabetes and obesity in the past decade; these conditions exacerbate many other health problems. Many deaths in North Carolina are preventable and involve risky behaviors or lifestyles. Among the leading causes of preventable death are tobacco use, unhealthy diet and/or physical inactivity, alcohol misuse, firearms, sexual behavior, motor vehicles and illicit drug use.

Pregnancies and Infant Mortality

Teen Pregnancy

In **Scotland County**, there were **63** teen pregnancies in 2014 for 15 to 19 year olds and increased to **73** pregnancies in 2015 for this age group. In 2015, the county rate was 63.4 compared to the NC state rate of 30.2 (per 1000 population). Scotland County continues to have one of the highest teen pregnancy rates in NC and ranked 9th highest in the State in 2014. The breakdown of teen pregnancies from 2012 to 2015 follows:

Scotland Co.	10-14 yrs	w/m	15-19 yrs	w/m	n/w
2012	0	0/0	97	26/56	15
2013	1	0/1	68	18/38	23
2014	0	0/0	53	18/34	11
2015	0	0	73	21/47	1
2015 NC	57	15/42	9,802	3,982/3,724	174

2014 NC Teen Pregnancy (Ages 15-19) Peer County Rankings: Rate per 1,000

Montgomery Co.	49	Rate: 58.8	Ranking: 3 rd
Vance Co.	79	Rate: 56.2	Ranking: 4 th
Bladen Co.	51	Rate: 52.1	Ranking: 8 th
Scotland Co.	63	Rate: 51.8	Ranking: 9 th
Richmond Co.	67	Rate: 46.8	Ranking: 19 th
Anson Co.	29	Rate: 40.8	Ranking: 30 th

(NC DHHS NC State Center of Health Statistics 2015)

Infant Mortality

North Carolina health officials say infant mortality in the state increased for the third year in a row in 2015. The Department of Health and Human Services released figures showing about 7.3 babies out of every 1,000 live births died before their first birthday. However, deaths attributed to Sudden Infant Death Syndrome (SIDS) in North Carolina continued a downward trend from 28 (2012), 23 (2013), 28 (2014), to 12 in 2015 according to data by the State Center for Health Statistics.

In **Scotland County** the infant death rate for the period **2011-2015** was 11.2 (per 1,000 population) compared to the state rate of 7.2 (per 1,000 population). In **2013**, two infant deaths were reported in Scotland County, a rate of 4.5 (per 1,000 population), compared to North Carolina's infant death rate of 7.0 (per 1,000 population), Scotland County's infant death rate in **2014** of 11.4 with 5 deaths, and in **2015**, four infant deaths were reported with a rate of 9.0 compared to the state rate of 7.3.

Infant Mortality	Year	White Rate	Minority Rate	Total Rate
Scotland County	2013	16.6	13.8	11.9
	2014	21.1	14.3	11.4
	2015	6.9	14.7	9.0
North Carolina	2013	5.3	12.7	7.0
	2014	5.1	12.8	7.1
	2015	5.7	12.5	7.3

(North Carolina State Center Health Statistics, 2015)

Communicable Diseases

A communicable disease is an infectious or contagious disease that can be transmitted from one person to another either directly by contact or indirectly by germs or parasites. Health professionals are required to report cases of certain communicable diseases to the NC Division of Public Health through

their local health department. Scotland County Health Department works in collaboration with the NC Communicable Disease Branch on the following four objectives:

- To promptly investigate disease outbreaks and unusual situations and to implement control measures to minimize further transmission of disease
- To monitor disease-reporting by physicians and laboratories in order to detect trends and to assess the public health impact of diseases
- To provide a channel of communication between public health agencies, private physicians, and hospital and occupational infection control personnel, as an essential part of disease control efforts
- To explain public health interventions and disseminate health education messages to the community and the media in order to enhance disease control efforts

Sexually Transmitted Infection – (STI)

Also known as sexually transmitted diseases, most STI cases in Scotland County are prevalent in the age groups from 15 to 19 yrs (32.4%) and 20 to 24 yrs (41.6%). Our demographics show African Americans with the highest STD rate at 61.66%, White at 14.21% and American Indian at 11.80%. In 2015 there were 373 (303 female/70 male) reportable STIs in Scotland County.

Scotland County	2014	2015	2016
AIDS	2	3	0
HIV	1	6	4
Syphilis (P.&S./E.L.)	4	6	8
Chlamydia	367	284	277
Gonorrhea	128	73	81

Like our peer counties, chlamydia continues to be the most prevalent STI in Scotland County, in North Carolina and in the United States. In 2015, 39,794 chlamydia infections were reported among women in North Carolina with a rate of 772.6 (per 100,000 population), higher than the national rate of 645.5 (per 100,000) and similar to Southeast states (CDC 2015). Untreated chlamydia can lead to serious health outcomes, including increased risk for HIV, PID, and infertility. However, Scotland County's Gonorrhea cases have continued to decrease over the past three years. The following is a table showing the number of specific STI cases in our peer Counties from 2014 to 2016:

COUNTY	Chlamydia			Gonorrhea			P. & S. Syphilis			E.L. Syphilis		
	2014	2015	2016	2014	2015	2016	2014	2015	2016	2014	2015	2016
Anson	203	171	149	82	96	97	0	3	4	0	0	0
Bladen	232	150	159	76	44	66	8	2	0	4	2	0
Montgomery	118	112	109	37	25	40	0	2	2	0	1	1
Pasquotank	277	275	251	72	62	46	0	2	1	7	1	2
Richmond	426	367	286	74	99	85	1	0	1	0	2	5
Vance	560	451	444	233	142	193	7	8	2	2	2	4

HIV/AIDS

In 2015, there were 29,935 persons diagnosed and living with HIV in **North Carolina** and 12,417 persons diagnosed and living with AIDS. In **Scotland County**, there are 140 persons living with HIV, ranking our county 8th in the state and 58 persons living with AIDS. In 2015, 1,345 new diagnoses of HIV were reported in North Carolina, at a rate of 13.4 (per 100,000 pop.). Of the new infections, 1,336 infections occurred in the adult/adolescent population, with a rate of 15.9 (per 100,000 pop.), similar to previous years. Persons 20 to 29 years old have the highest rates of newly diagnosed HIV. Among race, ethnicity and gender groups, Black/African Americans represented 63.8% of all adult/adolescent infections with a rate of 47.0 (per 100,000 pop.) (NC Electronic Disease Surveillance System, Feb. 2017)

Tuberculosis

Tuberculosis (TB) is a disease caused by bacteria that can damage the lungs or other parts of the body like the spine, lymph nodes or kidneys. If not treated properly, TB disease can be fatal.

TB is spread through the air from one person to another when a person with active TB disease of the lungs or throat coughs, sneezes, speaks or sings. People nearby may breathe in these bacteria and become infected.

While tuberculosis in the United States decreased from 3.8 to 3.0 per 100,000 between 2009 and 2014, the North Carolina rate went from 2.7 to 2, a 26% decline. North Carolina reported 195 tuberculosis cases in 2014. Since 1980, TB cases in North Carolina have decreased by approximately four percent per year. As a result, the total number of cases in 2014 is only 18 percent of the total number of cases reported in 1980 (195 cases compared to 1066 cases).

The following table shows TB cases in North Carolina and our peer counties for 2010-2015:

COUNTY	2010		2011		2012		2013		2014		2015	
	Cases	Rate										
Anson	1	3.9	0	0.0	1	3.8	3	11.5	2	7.6	0	0.0
Bladen	2	6.0	3	9.0	2	5.7	0	0.0	0	0.0	0	0.0
Montgomery	3	10.5	5	17.5	1	3.6	0	0.0	0	0.0	2	7.3
Richmond	3	6.3	1	2.1	0	0.0	3	6.5	2	4.3	0	0.0
Scotland	0	0.0	5	13.4	0	0.0	0	0.0	3	8.3	5	14.1
Vance	0	0.0	0	0.0	0	0.0	0	0.0	1	2.2	0	0.0
N. Carolina	296	3.1	244	2.5	211	2.2	216	2.2	195	2.0	199	2.0

(NC DHHS Epidemiology – 2016)

Asthma

Asthma is a disease of the lungs that often leads to repeated episodes of wheezing, chest tightness, breathlessness, and early morning or nighttime coughing. Asthma currently affects approximately 8 percent of adults and approximately 10 percent of children in North Carolina. In 2009, 94 North Carolinians died due to asthma. Asthma impacts all North Carolinians; however, African Americans, Native Americans, women, persons 65 years and older, children under the age of 5 years, and persons living in households with an income less than \$15,000 are among the groups most affected by asthma. In 2013, **Scotland County** had a total of **81** hospital discharges with a primary diagnosis of Asthma. Of those, **21** hospital discharges were for those between the ages of 0 to 14 years of age. (NCSCHS 2015)

Minority Health and Health Disparities

Data shows African Americans have higher death rates from HIV, homicide, cancer, diabetes, kidney disease, stroke and heart disease compared to whites and a higher incidence rate for Sexually Transmitted Infection. Almost two-thirds of all new HIV diagnosis are among Black/African Americans. The increasing rates of HIV among Hispanic/Latinos and Black/African Americans can be attributed to socioeconomic issues, such as poverty, lack of information, misinformation and stigma about HIV, inadequate healthcare access and institutional racism. HIV rates are also highest in low income areas. (CDC 2015).

In North Carolina the African American infant mortality rate is more than twice the rate than for whites. North Carolina's American Indian population has elevated death rates of heart disease, diabetes, kidney disease, homicide and unintentional motor vehicle crashes, as well as a substantially higher infant death rate, compared to non-Hispanic whites. These higher death rates for American Indians and African Americans reflect their high percentage living in poverty, lack of insurance and access to health care. (Health Profile of North Carolinians 2011 Update)

Asthma impacts all North Carolinians; however, African Americans, Native Americans, women, persons 65 years and older, children under the age of five years, and persons living in households with an income less than \$15,000 are among the groups most affected by asthma. (NC DHHS Chronic Disease and Injury Section 2015)

Section III

Primary Data Methodology

In the fall of 2015, a Community Health Assessment Team and Core Work Group were established to begin work on the Community Health Needs Assessment (CHNA) process. The core team included members from several community agencies, organizations, churches and community. This group met intermittently to discuss a timeline for survey distribution, data collection and analysis of survey results, data collection and analysis of secondary data, prioritization of health concerns, report development, dissemination of the final data and report, then developing action plans to cover the period 2017 through 2019. The process included creating a comprehensive survey to collect local data from the community about their health concerns and other issues relative. Once the survey results were analyzed, the team met to identify the top five health concerns, narrowed to the top three priority health concerns, then, began identifying our community's strengths, resources and needs. The table below provides a list of individuals, agencies and roles during this process.

Name	Title	Agency	Role
Wayne Raynor	Interim Health Director,	Scotland County Health Department	Meetings; data input, Accreditation
Kristen Patterson	Health Director		Committee, meetings, input, Accreditation
Kathie Cox	Health Educator II/PIO	SCHD and AHLF	Coordinator, data input, research, survey distribution, analysis, report development
Felicia Faison	WIC Director	SCHD	Core Work Group; meetings; developed survey; data input; data analysis; survey distribution;
Alisa Freeman	Nursing Supervisor	SCHD	Core Work Group; meetings, data input, survey distribution
Tina Clark	Director of Nursing	SCHD	Core Work Group; meetings, data input, survey distribution
Maria Roberts	BSN, Child Health Nurse, QA,	SCHD	Core Work Group; meetings, data input, survey distribution; Accreditation Coordinator
Julia Harmon	Student Intern	UNC Pembroke	Core Work Group; meetings, data research, data analysis, survey distribution
Tim Martin	Fiscal Management Supervisor	SCHD	Core Work Group; meetings, data input, survey distribution
Deborah Rogers	Director	SCHD	Committee, meetings, survey distribution, technical assist
April Snead	Director	DSS	Committee, meetings, data input, survey distribution
Tammy Holloway	Asst. Director	SHCS/Assoc. Health	Core Work Group, meetings, data input, analysis
Dave Salzlein	VP Strategic Services	SHCS	Core Work Group, analysis, survey distribution, developed
Patrick Bines	Health Educator	SHCS/Assoc. Health	CHNA Core Work Group, meetings, data input, survey
Andrea Fields	Director	SHCS/Assoc. Health	distribution
Ivy McLaurin	Grant Writer	SMH Foundation	Core Work Group, meetings, data input, survey distribution
Kirsten Dean	Executive Director	SMH Foundation	Committee, meetings, data input, survey distribution
Ethel Powers		SHCS	AHLP, meetings, data input, survey distribution
Haley Powell	Director Adult Services	Senior Center	Meetings, data input, analysis, survey distribution
Bryan Graham	Director	Parks & Recreation	Committee, meetings, input, survey distribution
Andy Kurtzman	Executive Director	Scotland Community Health Clinic	Core Work Group, meetings, input, analysis, survey distribution
Noran Sanford	Director	Growing Change	AHLP, Committee, meetings, input, survey distribution
Jamie Synan	Coordinator/Student Support Services	School System	Committee, meetings, input, analysis, survey distribution
Gina Stocks	BSN, School Nurse	School Health	Committee, meetings, data input, survey distribution
Summer Gainey	PhD, LCSW	Advisory Council	Committee, meetings, data input, survey distribution
Karen Laviner	Deputy Director	UNCP	Core Work Group, meetings, data input/analysis
Roylin Hammond	Emergency Mgmt	Housing Authority	Committee, meetings, input, survey distributions
Mary Evans	WEWO Radio	EMS	AHLP, meetings, data input, survey distribution
		WEWO Radio	Committee, meetings, survey distribution, media
Community:			Participants attended meetings, Survey distribution; Provided input for survey and analysis
Wm. Matthews	Faith Community	Board of Health	Agencies Contributing: Active, Healthy Living Partnership, Cooperative Extension, Scotland County School System, Scotland Health Care System, Board Of Health, Ministerial Alliance Association, DSS, Growing Change, Scotland County Partnership for Children & Families, Laurinburg Housing Authority, Domestic Violence and Rape Crisis Center, Scotland County Parks & Recreation, Scotland Community Health Clinic, UNCP, WLNC, WEWO,
Dorothy Tyson	Faith Community	WLNC	
Essie Davis	Community	Autism Society	
Walter Brown	Community		
Brenda Gilbert	Community	Coop. Extension	
Gary Gallman	Community	WLNC Radio	

After several meetings and revisions of the initial survey, a final draft was approved by the Core Work Group for distribution. The CHA Survey was divided into four sections: health information applying to individuals, health information applying to family/household, health information that applies to the community in which participant lives, and a demographic section designed to distinguish opinions on issues that impact the *community* from issues that impact *families*. Staff and community volunteers from the Active, Healthy Living Partnership and the CHNA Team personally distributed and collected the surveys in all areas of Scotland County. Paper copies of the survey were made available at places of business, various agencies, the health department and hospital for participants. The survey was also made available on Survey Monkey for participants who preferred using internet. Every attempt was made to collect data randomly from all communities in the county and all ethnic groups. Because only 478 surveys were completed initially, the Core Work Group decided to provide a second opportunity for participants to fill out a less comprehensive survey with an additional 125 completed. Over 600 surveys were completed both electronically and via hard copies. The CHNA Survey questionnaire, comprehensive graphical data and community resources are located in the appendices A, B, and C.

In brief, results of the survey showed that:

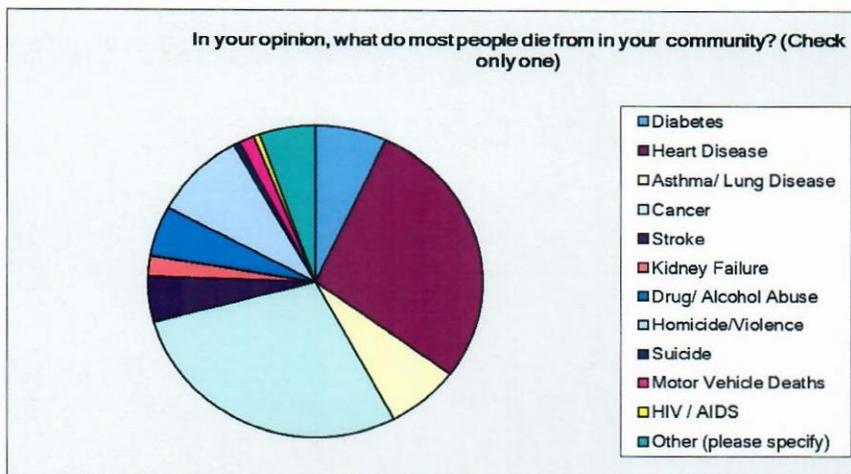
- **Heart Disease, Cancer, homicide/violence, diabetes and drug use** were felt to be the leading causes of death.
- The priority health issues were **high blood pressure, diabetes, heart disease, drug and alcohol abuse, and obesity**.
- The priority risk factors were **lack of physical activity, use of tobacco products, poor nutrition, substance abuse and unprotected sex**.
- **Lack of insurance, inability to pay, fear, lack of knowledge/understanding and transportation** were the leading factors affecting families seeking medical treatment.
- **Economic, health insurance, literacy, crime, lack of transportation** were general concerns among respondents.
- Respondents wanted to see more education on **chronic disease prevention, sexually transmitted diseases, teen pregnancy prevention, wellness services/programs, substance abuse, smoking cessation and physical activity**.
- **Safe places to walk and play, healthier food choices** were environmental concerns.
- Respondents most wanted to see more **job opportunities, after school programs, recreation facilities, dental services, substance abuse rehabilitation and mental health services** to help improve the health of their communities.
- Respondents indicated they **support tobacco-free public places/buildings in Scotland County**.

Community Health Assessment Opinion Survey Information Results

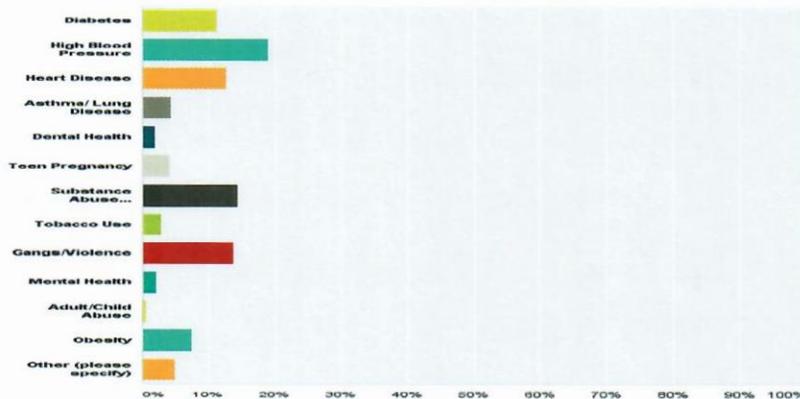
In **Section I** of the survey, participants were asked questions related to their concerns about their individual health issues **Section II** questions were related to family and **Section III** were related to community. Below are highlights: The CHA Survey and graph data can be found in appendices A, B, and C.

- In general, health issues the respondents felt had the biggest impact on for them were very similar to the health issues that impacted the respondent's *family* and *community*. The same held true for behavior risk concerns.
- Respondents listed heart disease, cancer, diabetes, homicide/violence, and drug/alcohol use as their top 5 answers when asked what, in their opinion, was the leading cause of death in the community.
- When the respondents' opinions were compared with the statistical data listed in the North Carolina Center for Health Statistics for Scotland County (2011-2015), there were similarities. Heart disease is the leading cause of death followed by cancer, cerebrovascular disease (stroke), diabetes, respiratory, motor vehicle, and other unintentional injuries.

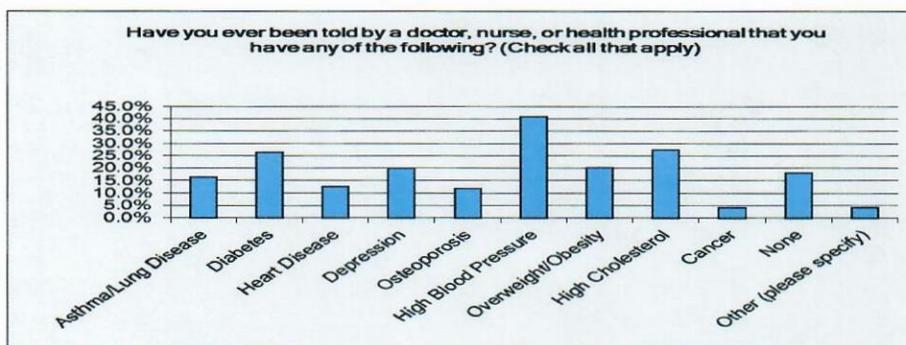
- Survey respondents indicated homicide as the third leading cause of death in Scotland County however, according to the North Carolina Center for Health Statistics homicide is the 11th leading cause of death in Scotland County. (SCHS, 2015)



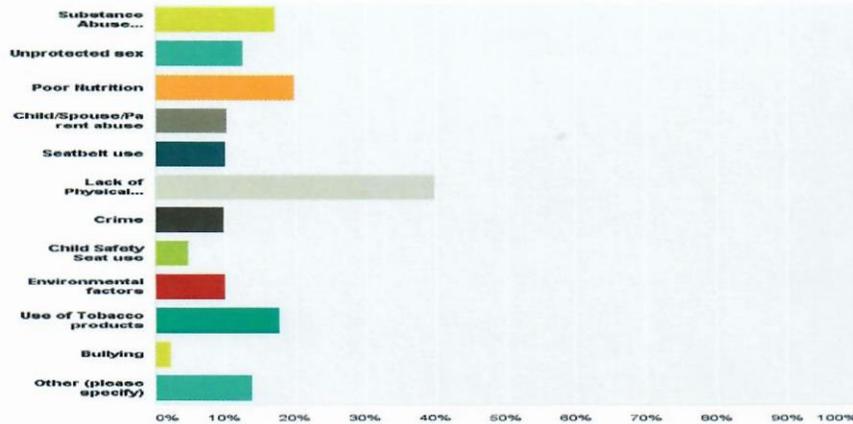
- From the survey, 19.4% (30.6% in 2013 for chronic diseases) of the respondents felt high blood pressure was the biggest health issue affecting the *community*. This was followed closely by substance abuse (drug/alcohol), gangs and violence, then heart disease.



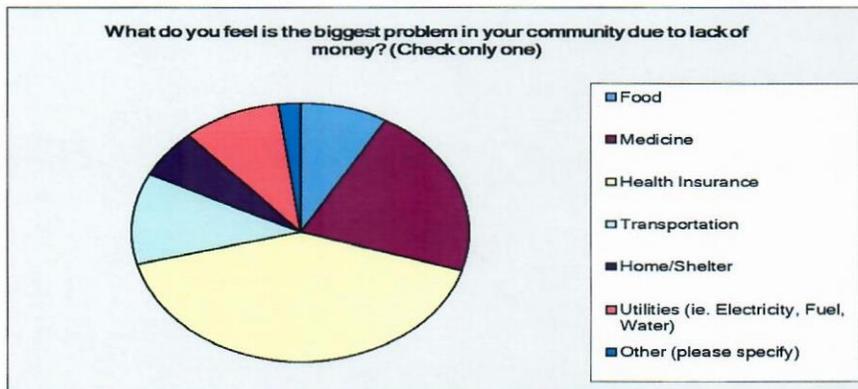
- Given the same choices of health issues affecting them *individually*, 41% respondents listed high blood pressure as the leading health issue followed by high cholesterol, diabetes, overweight/obesity, not the same choices as those impacting the community. 5.4% of the respondents (0.6% in 2013) listed teen pregnancy as an issue affecting their family.



- When asked the behavior risk factors that impact their *families*, the leading response – 39.9% (37.5% in 2013) was lack of physical activity. This was followed by 19.8% (9.7% in 2013) poor nutrition, 17.7% (17.0% in 2013) for use of tobacco products, 17.1% (6.4% in 2013) for alcohol and drug abuse, 12.5% (1.1% in 2013) for unprotected sex, 10.4% (11.8% in 2013) environmental factors, 10.2% for child/spouse/parent abuse (n/a in 2013), and 9.8% for crime (n/a in 2013). 2.3% of the respondents listed bullying as the leading behavior risk impacting their *family*.



- When asked what the main reason that keeps *you or your family* from seeking medical treatment, 36.2% indicated none (n/a in 2013), 24.6% (59.4% in 2013) indicated lack of insurance/inability to pay or doctor visit and 15.9% indicated unable to pay for visit to doctor. The next leading indicators for not seeking medical treatment were: fear of finding out about a health problem 4.8%, 4% lack of knowledge/understanding the need, and no transportation 3.3%.
- When asked what factor most affects the quality of health care for people in your *community*, 49% (72.2% in 2013) felt the economy (low income, no insurance, etc.) was the leading response followed by 14.6% language barrier, and 12.6% (8.5% in 2013) ability to read and write/education and age at 11.7% (5.0% in 2013).
- When asked what people in their *community* lacked funds for, the leading response was Health Insurance at 41.0% (73.6% in 2013), followed by medicine – 21.5% (55.0% in 2013), utilities (electricity, water, gas) – 9.4% (52.6% in 2013), transportation/fuel – 11.5% (49.1% in 2013) and food at 8.4% (42.3% in 2013).

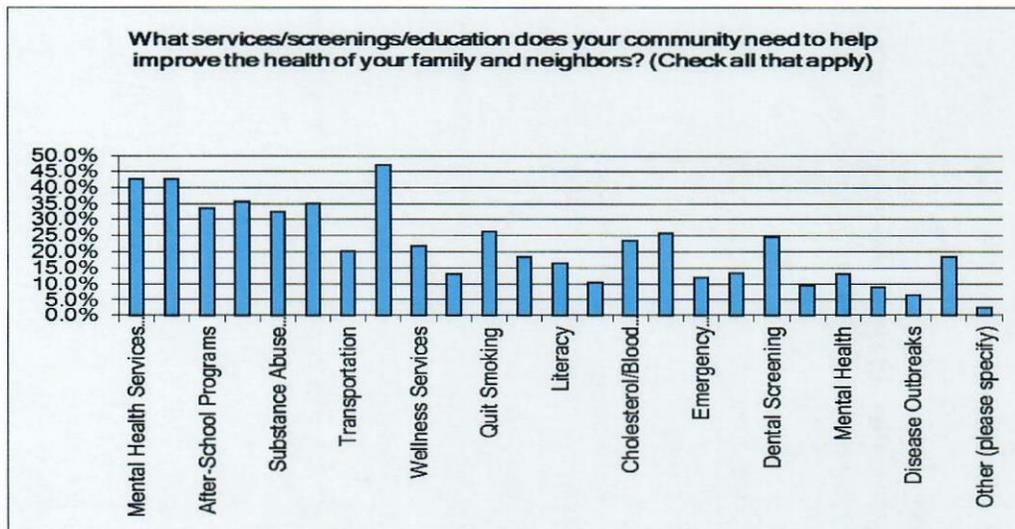


Scotland County Community Health Assessment | 2016

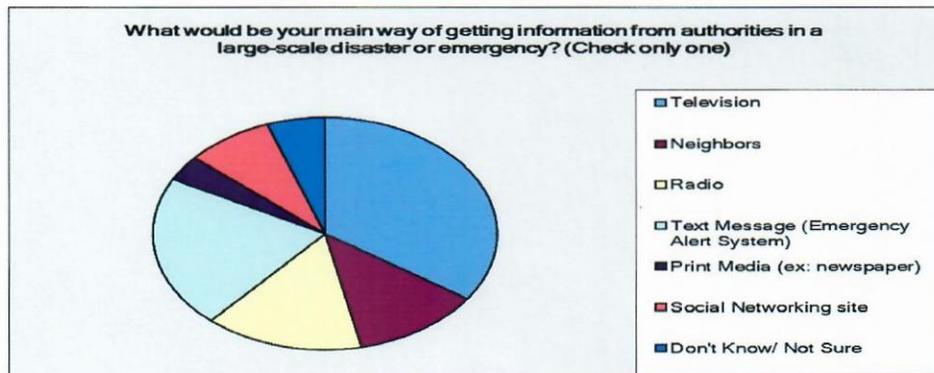
- Respondents indicated the education or information they would like to see more of in Scotland County were for: (CHA survey results)

Education or Services for:	2016	2013	2009	2005
Alcohol/Drug Abuse	32.4%	38.9%	28.8%	14.9%
Teen Pregnancy Prevention	18.6%	44.5%	17.9%	11.6%
Blood Pressure	23.6%	53.3%	14.1%	1.9%
Heart Health	n/a%	n/a%	13.4%	5.7%
Physical Activity	35.6%	38.9%	13.2%	10.9%

- When asked what respondents would like to see more of to improve the health of family, friends and neighbors in Scotland County, over half listed job opportunities 47% (70.1% in 2013), followed by safe places to walk/play 42.8% (39.3% in 2013) and recreation facilities 35.6% (35.7% in 2013). Other responses were in the areas of substance abuse/drug rehabilitation 32.4% (25.3% in 2013), wellness screenings 21.8% (28.56% in 2013), healthy food choices 35.1% (34.5% in 2013), and mental health services 42.5% (25.9% in 2013).



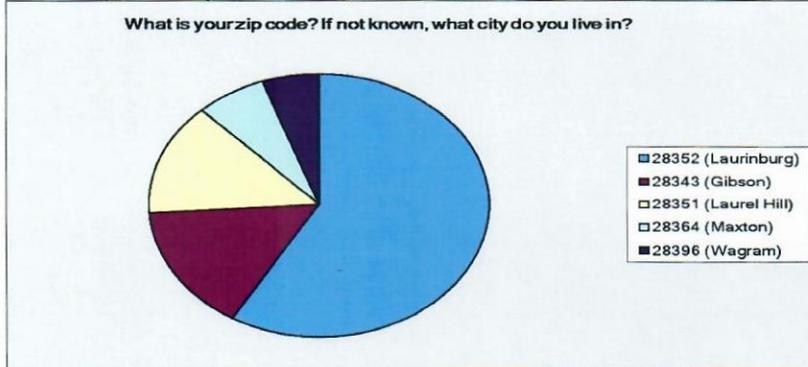
- When asked what would be the main way of getting information from authorities in a large-scale disaster or emergency, respondents indicated television – 34.5% (34.7% in 2013) followed by text messages (Emergency Alert System) –21.3% (13.6% in 2013), radio – 14.9% (15.6% in 2013), 12.1% neighbor, internet – 8.1% (9.6% in 2013). In addition, nearly half of the respondents 45% (53.5% in 2013) indicated the family did NOT have a basic emergency supply kit.



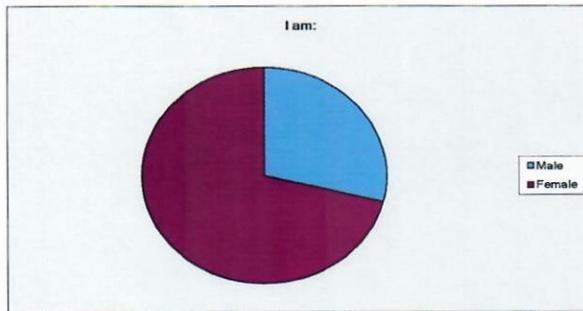
Demographic Information

Geographical distribution of the surveys were predominantly from the county seat of Laurinburg 58.58%. The towns of East Laurinburg, Gibson 15.27%, Laurel Hill 14.02%, Maxton 6.69% and Wagram 5.44%) were also represented.

(Community Health Assessment 2016)



- Of the 603 participants who responded, 439 (73%) were female and 164 (27%) were male.



(Community Health Assessment 2016)

- Race breakdown: White 46%, Black 38%, American Indian 10%, Asian 0.1%, Pacific Islander 0.1%, and Other .04% Ethnicity: Hispanic 6.02% Not Hispanic 84.9% Unknown 9.08% (Community Health Assessment 2016)

Answer Choices	Responses	Count
White/Caucasian	52.00%	66
Black/African American	33.60%	42
Native American	12.00%	16
Alaskan Native	0.00%	0
Asian	0.00%	0
Pacific Islander	0.00%	0
Other	0.00%	1
Total		125

(CHA secondary survey 2016)

Answer Choices	Responses	Count
White/Caucasian	44.98%	215
Black/African American	40.17%	192
Native American	10.25%	49
Alaskan Native	0.00%	0
Asian	0.21%	1
Pacific Islander	0.21%	1
Other (please specify)	4.18%	20
Total		478

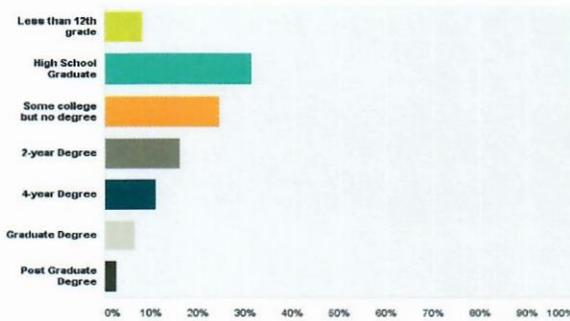
(CHA primary survey 2016)

- Employment: The number of respondents employed 55.44%; Unemployed 19.04%; Retired 10.25%, Disabled 6.69%, Other 8.58%, (this question was not asked in the second "Community Input Survey")

Answer Choices	Responses	
Employed	55.44%	265
Unemployed	19.04%	91
Retired	10.25%	49
Disabled	6.69%	32
Other (please specify)	8.58%	41
Total		478

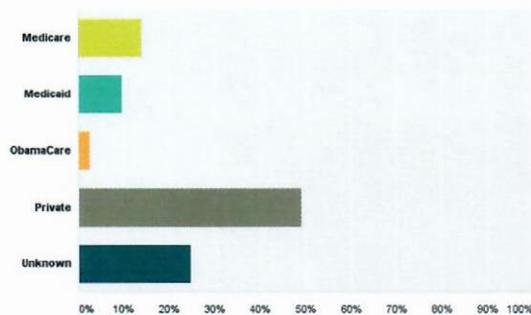
(Community Health Assessment Primary Survey 2016)

- Survey respondents were asked to indicate their level of education in the primary survey. The following graph shows responses with the majority having at least a high school degree:

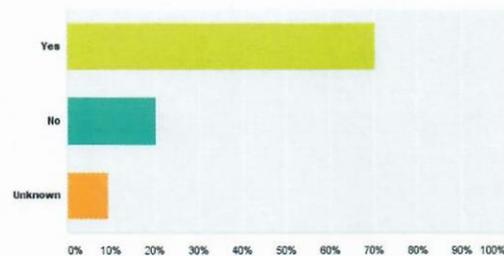


Answer Choices	Responses
Less than 12th grade	8.16% 39
High School Graduate	31.38% 150
Some college but no degree	24.48% 117
2-year Degree	16.11% 77
4-year Degree	10.88% 52
Graduate Degree	6.48% 31
Post Graduate Degree	2.51% 12
Total	478

- Survey respondents were asked if they had health insurance and if so, what kind of insurance. Yes 70.29%; No 20.29%, Unknown 9.41%. The majority of respondents indicated they had private insurance 49.16% followed by Unknown 24.69%. Medicare 14.02%, Medicaid 9.62%, and Obamacare 2.51%. The following graphs show responses:



(CHA Primary Survey 2016)



(CHA Secondary Survey 2016)

Section IV

Health Issues and Resources

Chronic Disease

- High Blood Pressure
- Diabetes
- Cancer
- Overweight/Obesity
- Heart Disease/Stroke
- Asthma
- Obesity

Other Health Issues – Resources and Programs

- Child Health
- Communicable Disease
- Dental Health
- Environmental Health
- Hearing/Vision Health
- HIV/AIDS/STD
- Influenza/H1N1 Influenza
- Mental Health/Depression/Suicide
- School Health
- Women's Health

"The Healthy North Carolina 2020 objectives recognize the important role that social determinants play. According to the 2015 edition of *America's Health Rankings*, North Carolina ranked 31st in the nation". The burden of premature morbidity and mortality reflected in our ranking highlights the need for improvements in population health. More than two-thirds of all deaths annually in North Carolina are attributed to chronic diseases and injuries. The North Carolina State Center for Health Statistics listed the top five causes of death in 2014 as cancer, heart disease, chronic lung disease, stroke and Alzheimer's disease.* Income level, education attainment status and quality of housing all contribute to health status and ultimately to life expectancy. Individuals dealing with the challenges of poverty are more likely to engage in risky behaviors that negatively impact health outcomes. Physical and economic environments impact health behaviors and health outcomes. Scotland County is designated as a Tier One County – one of the most economically distressed in North Carolina.

*(NCDHHS) – North Carolina Department of Health and Human Services; Healthy North Carolina 2020 Update (May 2015); *America's Health Rankings*, 2015. North Carolina Institute of Medicine.; and North Carolina Department of Commerce.

Scotland Health Care System



High Blood Pressure (Hypertension)

High blood pressure affects about 65 million or one in three American adults. Hypertension can lead to stroke, heart failure, or kidney damage. According to the North Carolina State Center for Health Statistics 2015, the number of deaths in Scotland County (2015) for heart disease was 89 and 25 deaths for cerebrovascular disease. Hypertension should be monitored through a physician with regular blood pressure screenings. Increased physical activity and healthy eating are also important steps to preventing high blood pressure as well as maintaining a healthy weight. (NCSCHS, 2015)

Blood pressure screenings and/or education are often provided through community health fairs, business and industry health screenings, the health department, Emergency Medical Service (EMS), local pharmacies, at the hospital, and on the hospital's mobile health unit.

41% of respondents reported High Blood Pressure as the biggest health issue in their family. Source: 2016 Scotland County Community Health Assessment Survey.

Diabetes Mellitus

Diabetes is a major cause of death and disability in North Carolina and the Nation. With a greater prevalence of obesity and an increasing elderly population, diabetes is approaching epidemic proportions in North Carolina. Approximately 13.1% of North Carolina's adult population has diagnosed diabetes. (The Burden of Diabetes in NC American Diabetes Association 2014).

In Scotland County, diabetes was listed as the fourth leading cause of death in 2015. Diabetes, diagnosed as the primary cause of mortality, from 2011-2015, ranked Scotland County thirteenth highest in North Carolina with a rate of 44.0 (per 100,000 population) compared to the rate of 25.4 (per 100,000 population) for North Carolina. Diabetes is also a significant contributing factor to other causes of death, such as heart disease, stroke, and kidney failure with risk factors of obesity, physical inactivity, unhealthy diets and smoking.

Diabetes is costly. It is estimated that the cost of diabetes for people in North Carolina in 2014 was \$10.9 billion. This estimate includes excess medical costs of \$8.4 billion attributed to diabetes, and lost productivity valued at \$2.5 billion. (NCSCHS, DHHS 2015). On average persons with diabetes have approximately 2.3 times higher medical costs than those without diabetes.

Scotland County Health Department, through physician referral, provides a "Prevent Type 2" twelve month diabetes education program to eligible participants, in collaboration with FirstHealth, that includes assessment, education and follow up; collaborates with Scotland Health Care System in providing a monthly Community Diabetes Support Group Program, which includes education, presentations and often screenings. Annually, a community-wide Diabetes Health & Education Fair is held in November with approx. 120 participants, exhibitors and a panel of experts on diabetes sharing their expertise on a variety of relative topics.

The Medicine Shoppe offers individual consultations and/or screenings for diabetics through their Diabetes Care Center.

Scotland Community Health Clinic provides free quality primary medical care to residents of Scotland County between ages of 18 to 64 who are without any health insurance and below 200% federal poverty level. Screenings for chronic disease, including diabetes are provided

26.36% of respondents reported Diabetes as the biggest health issue in their family. Source: 2016 Scotland County Community Health Assessment Survey.

Cancer:

In 2015, Cancer was the second leading cause of death in North Carolina and in Scotland County with 19,309 and 83 deaths respectively. The majority of cancer deaths occur at four sites: lung, colon, female breast, and prostate. For 2011- 2015, Scotland County's cancer deaths by site were: lung - 142, female breast - 28, colon - 26 and prostate – 14 (NCSCHS 2015). Smoking by far is the leading risk factor for developing lung cancer. Other risk factors include poor nutrition and lack of physical activity. Eating a healthy diet and being active can reduce the risk of developing cancer.

Scotland County is home to a state of the art Scotland Cancer Treatment Center located at Scotland Memorial Hospital, where clinical trials, genetic counseling, chemotherapy and radiation are provided. Scotland Cancer Treatment Center also has a new linear accelerator, used to provide radiation therapy. The accelerator allows more accurate views of a patient's treatment area in real time, IMRT – an advanced mode of high-precision radiotherapy, and IGRT – which helps manage motion caused by breathing, heart and gastric motility, and tumor and patient changes. In **2015**, the Cancer Treatment Center provided 183/233 Radiation Treatment/Total New Patient Consultations and 410 Medical Oncology & Hematology (new patient consultations); in **2016**, provided 176/238 (Radiation Treatment/Total New Patient Consultations) and 423 Medical Oncology & Hematology (225 Medical Oncology ONLY consultations).

Scotland Memorial Foundation provides funding for mammograms for low income women without resources for care, along with other screenings during community events.

Scotland County Health Department provides cervical cancer screenings through Adult Health, Family Planning programs, providing services to over 88 clients FY 2014-2015 and 52 clients FY 2015-2016.

3.97% of respondents reported Cancer as the biggest health issue in their family. Source: 2016 Scotland County Community Health Assessment Survey.

Heart Disease:

Heart disease and stroke – the principal components of cardiovascular disease – are the first and third leading causes of death for both men and women. Heart disease attributed to 18,467 deaths in North Carolina in 2015, and 89 deaths in Scotland County. (NCSCHS, 2015). While high blood cholesterol, high blood pressure, smoking and physical inactivity are considered four major risk factors, several other factors such as obesity and diabetes are also considered risk factors.

Scotland Health Care System opened their Scotland Cardiovascular Center, a joint venture with FirstHealth of the Carolinas in 2011. The center offers cardiac catheterizations and vascular procedures in a state-of-the-art facility and also offers inpatient and outpatient cardiology services, a cardiac/pulmonary rehabilitation center where supervised exercise, nutrition, stress management, vocational assessment and cardiovascular education are provided, and screenings for high blood pressure and cholesterol.

Scotland Memorial Foundation supports community cholesterol and blood pressure and other screenings through the Health Care System's Mobile Health Care Units "Scotty" and "Missy" and during community events or programs.

Scotland County Health Department and EMS provides blood pressure screenings on site for the community. Scotland County Healthy Carolinians continues to provide education and supports efforts on heart disease initiatives.

12.55% of respondents reported Heart Disease as the biggest health issue in their family. Source: 2016 Scotland Community Health Assessment Survey.

Asthma

Asthma is a chronic, respiratory condition that affects the airways (bronchial tubes) in the lungs that make breathing difficult, or cause other symptoms such as coughing, wheezing, chest tightness, and shortness of breath. Asthma is a growing health problem in the United States, particularly in African-American, Native American and Latino populations. Asthma currently affects approximately 8 percent of adults and approximately 10 percent of children in North Carolina. Uncontrolled asthma can impose serious limitations on daily life.

While asthma does not cause many deaths among children in North Carolina, it is one of the most prevalent chronic diseases in our state among children. Asthma, a major chronic illness among school children, is the leading cause of school absenteeism nationwide, according to experts on lung disease. According to the 2014-2015 School Health Services Report, school nurses assessed the needs and completed health care plans for approximately 93,106 students

with asthma in North Carolina public schools. The 2013-2014 Child Health Assessment and Monitoring Program (CHAMP) survey shows that 17.9% of parents reported that a doctor had diagnosed their child with asthma and 10.9% of parents reported their child currently had asthma.

In 2013, the total number of hospitalizations due to asthma in Scotland County, were 81 for all ages with 24 of those for children ages 0-14 years. Scotland County ranks 29th in North Carolina for asthma related hospitalizations for all ages and 31st for children ages 0-14 (NCSCHS, 2015).

16.32% of respondents reported Asthma is the biggest health issue in their family.

Source: 2016 Scotland County Community Health Assessment Survey.

Obesity/Overweight

North Carolina percentages in childhood obesity are the 5th highest in the Nation. At its current rate, it will soon become the costliest disease, surpassing cardiovascular diseases. Obesity is a condition affecting many residents in Scotland County and is the number one health problem in children. The 2016 North Carolina Child Health Report Card (NCDHHS) states in 2014, **36.3%** children 10 to 17 years, are overweight or obese. For our children ages 2 to 4 years 10.4% are overweight ranking us 1st in the state, and 12.8% are obese, ranking Scotland County 19th in the state. (NC Nutrition and Physical Activity Surveillance System 2015)

Lack of physical activity and poor nutritional habits are major factors in overweight and obesity. The North Carolina Child Health Report Card 2016 reported 26.7% of students, age 10-17 yrs. were physically active the recommended total of 60 minutes or more per day on five days or more.

North Carolina's response to obesity, are programs such as Eat Smart, Move More, NC; Faithful Families Eating Smart and Moving More and other health promotion initiatives. Scotland County is fortunate to have existing resources or programs such as the Health Department's WIC Nutrition Program, the Healthy Communities Grant programs that include physical activity and healthy eating, access to healthy foods, the Active, Healthy Living Partnership focusing on Obesity and Heart Disease, the school system's healthy eating program following guidelines from North Carolina Department of Public Instruction (NCDPI), "Active Recess for Scots" in elementary schools providing additional physical activity daily, Cooperative Extension's Expanded Food and Nutrition Education Program (EFNEP) for youth and adults, physical activity and nutrition programs through Active, Healthy Living Partnership/Scotland County Health Department and others such as Weight Watchers and TOPS (Take Off Pounds Sensibly) available. Scotland County Parks and Recreation also has sixteen area parks conducive to physical activity such as walking trails, athletic and summer programs for youth age 5 to 15, senior games and exercise classes.

20.29% of respondents reported Obesity as the biggest health issue in their family.

Source: 2016 Scotland County Community Health Assessment Survey.

Child Health

- **Child Care Directions** – Resource and referral agency for parents and child care providers.
- **Child Fatality and Prevention Team** – Scotland County Health Department is the lead agency. Meets a minimum of four times during the year to review incidence and causes of all child deaths in the county.
- **Community Child Protection Team** –Scotland County Department of Social Services is the Lead Agency. Meets quarterly to review protective custody cases.
- **Early Hearing Detection and Intervention Program** – all infants receive an initial hearing screening at birth. Infants who fail are rescreened in 2-4 weeks and referred as needed. Postpartum/Newborn home visit assessment – a Public Health Nurse provides a hearing screening as part of the assessment.
- **Eckerd** – Behavioral Health for at risk children and teens

- **Immunizations** – Scotland County children receive immunizations at the health department, Purcell Clinic and other medical provider's offices.
- **Lead Screening** – available for children less than six years of age at Health Department Purcell Clinic and other medical provider's offices.
- **Scotland County Department of Social Services** – Federally mandated, state supervised, county administered, Social Service System.
- **Scotland County Health Department** - Child Health Program – immunizations, pediatric orthopedic clinic, postpartum/newborn visits, screenings for blood lead poisoning and sickle cell. Monthly sickle cell counseling services are offered on site by Regional Sickle Cell Counselor.
- **Scotland County Partnership for Children and Families – (Smart Start)** – established in 1998 to implement North Carolina's school readiness initiative and has successfully improved the quality of childcare, parenting resources, access to health care and other support systems.
- **Scotland County System of Care** - community services and resources to assist families and children who are in need of multiple services from human services agencies to address serious and complex behavioral, social, academic and safety needs.
- **Care Coordination for Children (CC4C)** – links families with children from birth to five who may have special health needs to community resources and services.
- **Special Needs Program** - The Arc of Scotland County (Association of Retarded Citizens) – volunteer organization devoted to improving the welfare of persons with mental retardation or developmental delays by acting as a support group for families and advocating for their rights as citizens.
- **The Autism Society of North Carolina** – Scotland County chapter – community-based services.
- **Together We Grow – North Carolina Early Intervention Services** – comprehensive, interagency system of services provided by many different agencies and programs for children birth to five years and their families.
- **Women, Infants and Children – (WIC)** – also known as the Special Supplemental Nutrition Program. WIC is a Federal program funded by the United States Department of Agriculture (USDA). It is designed to provide food to low income pregnant, postpartum, and breastfeeding women, infants and children until the age of five. Available at Scotland County Health Department.
- **Evergreen Behavioral Management** (formerly Family Alternatives) – provides a Day Treatment Program offered to children up to age 20 years of age; Intensive in-home services; Community Support Teams
- **Community Innovations** – provides child case management Intensive in-home services for children and families; Community Support Teams;
- **Scotland Family Counseling Center, Inc.** – provides outpatient counseling to children and families; Faith Integrated counseling and professional services

Communicable Disease

The goal of the Communicable Disease Program at Scotland County Health Department is to stop the spread of disease by investigating sources of infection and reduce transmission through public education. This is done through the cooperation of physicians, hospitals and medical laboratories. Case management is available to clients diagnosed with tuberculosis.

There are sixty-six non-sexually transmitted reportable diseases. There are blood-borne diseases such as Hepatitis B and C and enteric diseases such as salmonella and shigellosis. Hepatitis A is a food-borne disease. Vector-borne diseases include West Nile Virus, Eastern Equine Encephalitis, Rocky Mountain Spotted Fever and Lyme disease. Some communicable diseases are air-borne like SARS (Severe Acute Respiratory Syndrome) and Tuberculosis. There are also agents of terrorism such as anthrax, smallpox and plague.

Medical providers, laboratories and the state communicable disease branch reports diseases to the health department. The communicable disease staff determines if the reported

disease meets the case definition set by the Centers for Disease Control and Prevention. This is done by contacting hospitals and physician's offices for symptoms of the patient.

Persons with certain diseases are restricted in activities to decrease transmission. Persons with active TB are limited in activities until they are no longer infectious. In order to decrease drug-resistant cases of Tuberculosis, "Directly Observed Therapy" (DOT) is the standard of care. This means each dose of anti-tuberculin medication is administered by a health care worker.

Communicable Diseases reported in Scotland County for F/Y 2015-2016 were Hepatitis A (1); Hepatitis B (3); Hepatitis B Carrier (0); Hepatitis C (1); HIV (4); AIDS (0); STD's (229); Salmonella (18); Shigellosis (0); NGU (5); Campylobacter (1) and Tuberculosis (6). In 2016, Scotland County had 277 confirmed cases of Chlamydia; 81 confirmed cases of Gonorrhea; Seventy-five percent of STD cases were reported by people ages 15 to 24 yrs with 121 of those ages 15 to 19 yrs and 4 cases were reported for children aged 10 to 14 yrs.

Dental Health

Scotland County has eight local dentists (or 2.5 per 10,000 population), 11 dental hygienists, one orthodontist and a Public Health Dental Hygienist (Sheps Center for Health Services 2012). Most of the local dentists accept Medicaid for their established patients and only one accepts new Medicaid patients. Other resources in Scotland County include:

- The Purcell Clinic's "**Into the Mouths of Babes**" Program under the North Carolina oral Health Section of DPH (Division of Public Health) – high risk children that qualify will have fluoride varnish painted on their teeth during their well baby checkup.
- **Scotland County Health Department** – refers children to Richmond County Health Department Dental Clinic and has a contract with ECU Dental Clinic in Lumberton to refer children with no insurance or Medicaid for dental services.
- **North Carolina Health Choice Program** – pays for dental services for children that qualify.
- **North Carolina Oral Health Section of DPH** (Department of Public Health) – local Public Health Dental Hygienist is active in major preventive procedures such as water fluoridation, dental sealant promotional projects, and risk assessment-referral and follow-up services. Education is integrated within each of these activities. www.communityhealth.dhhs.state.nc.us/dental/
- **Stewartsville Baptist Church** – hosts an annual free one day dental health clinic with volunteer providers (dentists, dental hygienists) for uninsured or low income residents of all ages.
- There are also out of county dental resources that many of our residents take advantage of such as **First Health Dental Care** and the **UNC School of Dentistry**.

17.99% of survey respondents indicated dental health was the biggest health issue in their family. Source: 2016 Scotland County Community Health Assessment.

Environmental Health

The Environmental Health Section of the Scotland County Health Department protects and improves the public's health by controlling environmental factors which can adversely affect human health. This section provides preventative health through inspections, education, and enforcement of state and local rules in programs for food and lodging; on-site wastewater disposal; pools, tattoo establishments and institutions; child daycares; mosquito and vector control; private well water construction; child lead poisoning; and animal control. Referrals are made for solid waste enforcement, air quality concerns, public water supplies, hazardous materials, groundwater protection and other related environmental issues. The Scotland County Health Department's Environmental Health Section responds to other environmental issues as needed.

Scotland County Health Department has two Environmental Health Specialists and two Animal Control Officers to provide services for the county.

- Animal Control Program – enforce state and county law ordinances and rules pertaining to the care, custody and control of animals in Scotland County
- Well and Septic System Permits
- Restaurants/Lodging/ Pools – inspections
- Tattoo Parlors - inspections
- Mosquito Control – ensures that mosquito control rules are enforced to protect public safety.

The City of Laurinburg has one Animal Control Officer who provides services within city limits and enforces city ordinances and state laws.

Hearing/Vision Health

- **North Carolina Council for the Hearing Impaired** – all infants receive an initial hearing screening at birth. Infants who fail are rescreened in 2-4 weeks by the Newborn Hearing and Follow-up Program. A staff member from the Early Hearing Detection and Intervention Program screens infants at Scotland County Health Department monthly.
- **North Carolina Division of Services for the Deaf and Hard of Hearing**
- **North Carolina Division of Services for the Blind in Scotland County** – serves blind or visually impaired adults and children.
- **Speech Solutions, Inc** – assess, diagnose and treat patients to help prevent speech, language, cognitive, communication, voice, swallowing, fluency and other speech disorders
- **Scotland County School System** – provides hearing and vision screening for first and third graders as well as students in the Exceptional Children's Program and other students referred by teachers.
- **Lions Club** – provides programs, funds and transportation to visually impaired persons

HIV/AIDS/STD

Scotland County Health Department and most health care providers provide confidential HIV/AIDS as well as sexually transmitted disease tests through examinations and/or blood screenings that test for the presence of antibodies to HIV. Public Health is mandated to offer free sexually transmitted disease screenings and treatment to anyone that requests the service. Clients who test positive for HIV/AIDS, or are referred to the health department, are offered case management services through the Border Belt AIDS Resource Team or Robeson Health Care Corporation in Lumberton, NC. In July of 2012, Scotland County Health Department added a new Early Intervention (EIC) Clinic working with Robeson Health Care Corporation's (RHCC) Ryan White Part C Program to care for patients diagnosed with HIV/AIDS.

- **H.E.A.R.T.** – Scotland County Health Education and Resource Team – meets monthly for HIV/AIDS education promotion and the planning of fundraising activities to help meet the emergency needs of clients living with HIV/AIDS in Scotland County. This group also sponsors two annual events to raise awareness of HIV/AIDS which are coincided with national recognition days. The H.E.A.R.T. HIV/AIDS Walk-a-thon which is usually held in June with National HIV Testing Day, and the H.E.A.R.T. World AIDS Day Candlelight Vigil held on or around World AIDS Day in December each year. Citizens of Scotland County are encouraged to join this group on the third Thursday of each month.
- **B.A.R.T.** – Border Belt AIDS Resources Team – Lumberton, NC

Influenza/H1N1 Influenza

Influenza (the flu) is a contagious respiratory illness cause by influenza viruses. It can cause mild to severe illness, and at times can lead to death. The safest, most effective way to prevent the flu is to get vaccinated. The Centers for Disease Control recommends that everyone six months and older get their yearly flu vaccine.

Sometimes people are infected with influenza viruses that are not the normal seasonal strains. These infections are often related to contact with influenza viruses from animals, such as birds or pigs. While most of these infections are isolated cases or small clusters, these unusual or "novel" influenza viruses have the potential to spread widely and cause pandemics if they are able to spread from person-to-person, as was the case during the 2009 H1N1 pandemic.

According to public health officials, cases of flu in our state were relatively low in 2015, but trended upward in 2016 season. Flu season typically peaks during January and February. Complications from flu can be particularly dangerous for high risk groups including infants under 2, pregnant women, and people with chronic medical conditions such as asthma, diabetes, heart disease, or immune system problems.

The N.C. Department of Health and Human Services announced through February 2017, the state had 30 adult and 2 infant deaths linked to infection with seasonal influenza. In Scotland County, Seasonal Influenza vaccines are available at the Scotland County Health Department, Scotland Health Care System and medical provider offices.

Mental Health/Depression/Suicide

- **Eastpointe Mental Health Services...**
 - Access line: 1-800-913-6109
 - 24-Hour Crisis Services: 1-800-913-6109
 - TTY: 1-888-819-5112
- **Scotland County Department of Social Services**
 - Substance Abuse Counselor – specifically for Work First and Food Stamp Clients
 - Crisis Hotline referral
- **Scotland County Health Department** – Crisis Hotline available
- **Scotland Memorial Hospital** – provides referrals to outside mental health agencies
- **Scotland Family Counseling Center**
 - Outpatient counseling – individuals, families, marital, children
 - Substance Abuse Treatment - referral
 - Client Aid Program (sliding scale based on income)
- **New Beginningz, Inc. –**
 - Substance abuse rehabilitation services;
 - Diagnostic assessment,
 - Case formulation/management,
 - Treatment/recovery;
- **Generations Health Services, LLC -**
 - Family Therapy
 - Group Psychotherapy
 - Anger Management
 - Psychiatric Services
- **Community Innovations –**
 - Outpatient Therapy – Family and Individual
 - Adult and Child case management
 - Community Support Team (CST)
 - Intensive in-home services for children and families
 - Psychiatric Services – med management
 - Day Treatment Program – in progress
- **Evergreen Behavioral Management (formerly Family Alternatives)**
 - Outpatient Therapy
 - Physician on-site
 - Community Support Team
 - Intensive in-home services
 - Day Treatment Program – children only up to age 20 years
 - Accepts referrals

- **Southeastern SELF Recovery**
 - Professional assessment (DWI, Substance Abuse)
 - Recovery Home Services
 - Consultations
 - Treatment
 - Intensive Outpatient Programs
 - Individual and Group Counseling
- **Health care providers**
 - Referrals

School Health

- **School Health Advisory Council** – membership from school personnel representing administration, child nutrition, counselors, nurses and physical education and community representatives from the Health Department, hospital, parents and the Purcell Clinic.
- **Child and Family Support Team** - Teams of nurses and social workers have been placed in seven schools within the district to assist children and families in securing resources and services to help the child be successful in school.
- **Dropout Prevention Coordinator** – The coordinator works with students on an individual and/or group basis to address barriers that prohibit them from being successful in school.
- **Safe Schools Drug and Prevention Program** – Five Resource Officers, one at each of the three middle schools, the high school and at the Alternative Learning Academy, provide random inspections daily to ensure the safety of students and faculty.
- **Expanded Food and Nutrition Education Program (EFNEP)** – 4-H Scotland County Cooperative Extension – collaborates with Scotland County Public School system to provide nutrition and physical activity education classes during the regular and after school day programs.
- **Exceptional Children’s Program** – through Scotland County School System which provides the additional educational and support services that these students require. The program’s objective is to identify the unique needs of each exceptional student and develop an Individualized Education Program (IEP).
- **Connect Ed** – Scotland County School System’s telephone notification system allows school administrators to place calls system-wide in the event of emergencies or inclement weather.
- **Head Start** – a Federal program for preschool children from low-income families. Four-County Community Services, Inc. administers the Head Start Program in Scotland County. Head Start provides the social, nutritional, and educational advantages needed for a successful start in school. It assures that “no child is left behind.”
- **School Health Initiatives** – In 2015 and 2016, Scotland County Health Department staff provided STD and Family Planning education to Scotland High School students and the program “Making Proud Choices” (teen pregnancy prevention education) to students at the RCC Honeycutt Center reaching over 750 students.

Women’s Health

- **Scotland County Health Department** –
 - Family Planning Program – services to improve pregnancy outcomes and the health status of men and women before pregnancy. Program provides pregnancy planning counseling and birth control.
 - Pregnancy Care Management (PCM) – provides care management services for pregnant and post-partum women.
 - Newborn, Postpartum Home Visits
 - Women, Infants and Children (WIC) program
 - Breastfeeding Peer Counselor – breastfeeding classes for expectant parents
 - Parenting Classes – includes child passenger safety/car seat instruction

Scotland County Community Health Assessment | 2016

- **Scotland Health Care System**
 - Labor and Delivery – deliveries and emergency care
 - The Women's Center – at Scotland Memorial Hospital offers prenatal classes that promote the health and well being in preparation of pregnancy, childbirth, breastfeeding and parenting.
 - a bereavement program to support families experiencing a loss
 - Screenings – free mammograms to women at the Community Health Clinic
- **Private Sector** - Scotland County has two OB/GYN Practices, one certified midwife, and two certified nurse practitioners that provide obstetrical care. Deliveries and emergency care are performed at Scotland Memorial Hospital.
- **Scotland Memorial Foundation** – sponsors a Women's Health Event annually that includes educational breakout sessions and health screenings (cholesterol, blood pressure, bone density, height/weight and body fat).
- **Scotland Community Health Clinic** – provides health care for the uninsured ages 18 years to 64 years.
- **Scotland County Adolescent Wellness Council** – promotes the health of teens, with a top priority of pregnancy prevention.
- **Leadership and Education for Adolescent Parents (LEAP)** – program through Scotland County Partnership for Children and Families and Scots for Youth and served teen age parents both male and female. Active since June 2009.
- **Scotland County School System** - provides a "Healthy Living" curriculum for grades four through nine. Age appropriate preventive health is taught to these students.
- **Churches and Youth Organizations** - sponsors health programs that promote teen pregnancy prevention, physical activity and nutrition.

(Scotland County Health Department Outreach Efforts – 2016)

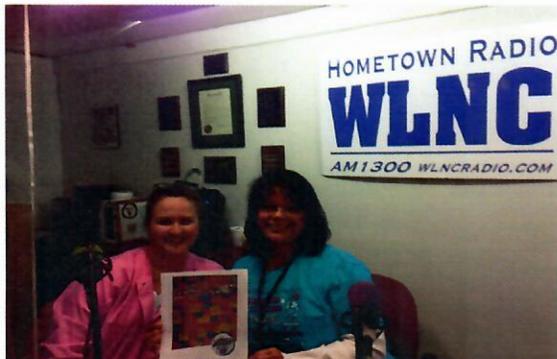


Section V

Other Priorities: Resources and Programs

- Alcohol/Substance Abuse
- Domestic Violence
- Health Literacy
- Health Promotion
- Physical Activity/Nutrition
- Poverty/Low Income/Uninsured
- Preparedness and Response (Bioterrorism)
- Residential Living or Long Term Care for Seniors
- Safety/Injury Prevention
- Smoking and Tobacco
- Transportation

Healthy Communities Program/Smoke Free/QuitlineNC Billboard 2016



GASO 2016 collaboration with Scotland Health Care Sys



Preparedness and Response 2016 – WLNC Radio

Alcohol/Substance Abuse

- **Alcoholics Anonymous Support Group**
- **Eastpointe Substance Abuse Prevention**
- **Southeastern SELF Recovery** (an affiliate of Southeastern Regional Medical Center)
 - DWI assessment,
 - Substance Abuse Assessment
 - Recovery Home Services
 - Consultations
 - Substance Abuse Comprehensive Outpatient Treatment
 - Intensive Outpatient programs
 - Individual and Group Counseling
- **New Beginningz, Inc. –**
 - Substance abuse rehabilitation services;
 - Diagnostic assessment,
 - Case formulation/management,
 - Treatment/recovery;
- **Generations Health Services, LLC –**
 - Individual, Group and Family Therapy for chemical dependency
 - Substance Abuse Intensive Outpatient Program
 - Psychotherapy services
 - DWI (Driving While Impaired) services
- **Scotland Family Counseling Center**
 - Outpatient counseling – individuals, families, marital, children
 - Substance Abuse Treatment - referral
 - Client Aid Program (sliding scale based on income)

17% of survey respondents reported alcohol/substance abuse was the biggest behavior risk factor that impacts their family. Resource: 2016 Scotland County Community Health Assessment.

Domestic Violence

- **Domestic Violence and Rape Crisis Center of Scotland County**
 - 24 hour crisis line
 - Shelter for victims
 - Support Groups
 - Education and support services for victims to deal with their trauma
 - Law Enforcement and legal procedures information
 - Community education programs

Health Literacy

- **Scotland County Literacy Council –**
 - Adult basic education – life skills, reading, job skills
 - GED preparation
 - English as a second language
 - One on one and small group tutoring (school age children and adults)
- **Scotland County Memorial Library –** provides community with opportunities for reading, research, computer skills, youth and adult programs, online services, e-books, audio books, DVD's and a Book Mobile that travels throughout the county weekly. Public has access to ten computers in addition to numerous databases. Patrons have access to over six million items today.

Health Promotion

- **Scotland County Health Department** – promotes healthy lifestyles through educational sessions; screenings, health care, immunizations, support for breastfeeding, collaboration with other agencies providing programs and/or events pertaining to health issues, physical activity and nutrition.
- **North Carolina Cooperative Extension, Scotland County** – provides educational programs such as nutrition and physical activities through the Expanded Food and Nutrition Program (EFNEP) for adults and children and 4-H Club activities
- **Scotland County Health Care System** – provides free community health screenings, educational sessions, collaborates with other agencies to provide information/education, sports physicals for middle and high school students involved in team sports and hosts an annual Women’s Health Event which includes free health screenings and a full day of educational sessions on a variety of topics.
- **Scotland County Parks and Recreation** – promotes healthy lifestyles through fitness activities and sports for youth, activities for the older population such as Senior Games, a variety of exercise classes, Tai Chi, Arthritis Foundation Exercise class, Yoga, Silver Sneakers, a variety of health education programs, clubs, and other leisure opportunities.
- **Active, Healthy Living Partnership** – initiates health education and promotion programs to educate the public about risk factors that promote chronic disease especially focusing on heart disease and obesity; promotes healthy lifestyles by implementing physical activities and nutrition programs in collaboration with agencies throughout the community.

Physical Activity/Nutrition

- Active, Healthy Living Partnership/Scotland County Health Department
- Child Care Directions - Child and Adult Care Food Program (CACFP)
- Scotland County School System
- Scotland County Parks and Recreation
- Scotland County Health Department
- Scotland Health Care System
- Scotland County Co-Operative Extension – Expanded Food and Nutrition Education Program (EFNEP)
- Wagram Recreation/Active Living Center

39.9% of survey respondents reported lack of physical activity as the biggest behavior risk factor that impacts their family. Source: 2016 Scotland County Community Health Assessment.

Poverty/Low Income/Uninsured

- **Scotland County Department of Social Services**
 - Medicaid Program
 - Food Stamp Program
 - Temporary Assistance for Needy Families (TANF) program called “Work First”
 - Emergency Assistance Program – financial help to pay for housing and utilities
 - Child Support Services in collaboration with the Court System
 - Low-income Energy Assistance Program (LEAP)
- **Senior’s Health Insurance Information Program** – (SHIIP) Prescription Drug Assistance for Senior citizens
- **Habitat for Humanity** – ecumenical, Christian housing ministry dedicated to building and selling decent, affordable homes in partnership with families in need. Opened a new “Restore” in 2008.
- **Scotland County Concerned Citizens for the Homeless** – provides transitional housing for the homeless who do not qualify for state or federal aid and operates a Helping Hand Thrift Store.

- **Four-County Community Services, Inc.** – provides services in a seven-county area which help people help themselves
- **Laurinburg Housing Authority** – provides decent and safe rental housing for eligible low-income families, the elderly, and persons with disabilities;
 - Section 8 Program – Family self-sufficiency program – allows a family to build an escrow account if they increase their income and graduate from the program
 - Homebuyer Assistance Program – assists with mortgage payment through Section 8 Program
- **Star of Bethlehem Missionary Baptist Church** - operates a community food bank
- **Northview Harvest Outreach Ministries** – assists those in need for food, clothing and household items
- **Church Community Services** – funded through United Way, Federal Emergency Management Agency (FEMA) and local churches and individuals – provides emergency assistance for rent, utilities and medical care and also food and clothing.
- **Scotland Health Care System** – provides significant care to needy and underinsured Partners with Scotland County Health Department and Scotland Community Health Clinic to provide free mammograms to female clients;
- **Scotland County Health Department** – offers communicable disease including sexually transmitted disease diagnosis and treatment without charge and a children’s vaccine program. Sliding fee scales are available in the Family Planning program.
- **Health Check/North Carolina Health Choice for Children Program** – follows Medicaid eligible children and assist families to maximize the health and development of their infants, children and teens until age 21. Children, up to age 19, who do not qualify for Health Check (discontinued in January 2010), may qualify for Health Choice for Children. Family income must be below 200% of poverty to be eligible for Health Choice.
- **Scotland Community Health Clinic** - provides quality health care for the needy and uninsured residents (age 18 yrs. to 64 yrs) of Scotland County. The Clinic works with 1 Family Nurse Practitioner, Volunteer Provider 3 hours/month, 1 part time triage CNA.
 - **2016** - approximately 327 active patients (325 active in 2015)
 - Collaborates with LabCorp who provides donated lab services
 - Collaborates with Charlotte Radiology and Scotland Memorial Hospital to provide routine imaging
 - Prescription Assistance Program utilizing the Pharmacy Connection – have assisted 327 patients with 4,986 ninety-day prescriptions in excess of \$2,195,576.00.
 - Provides diabetic testing devices and diabetic testing strips
- **Scotland County Parks and Recreation** – facilitates activities at Scotland Place Senior Center providing Senior Health Insurance Information Program (SHIIP). This program collaborates with the North Carolina Department of Insurance to inform seniors about medial benefits and the Medicare Prescription Drug Program
- **Medication Assistance Program** – Lumber Area Council of Government Area Agency on Aging
- **Scotland County Aging Advisory Council** – identifies services for our aging population.

Preparedness and Response (Bioterrorism)

Scotland County Health Department’s Preparedness and Response Program prepares health department staff, community leaders and members for incidents and disasters which are natural, chemical, biological, and radiological or of a communicable disease nature. The process of preparation includes developing an “all hazards” plan, protocols and procedures. Then through training and exercises such as drills, tabletop exercises and full scale exercises, the staff and

community are prepared to respond to a possible incident or disaster with knowledge and confidence.

Scotland County Health Department shares a Preparedness and Response Regional Coordinator with Harnett and Bladen Counties. The Preparedness and Response Coordinator works in conjunction with the NC Office of Public Health Preparedness and Response. Other key components include, North Carolina Health Alert Network (NCHAN) which is a secure, internet based alerting system provides 24/7 flow of critical health information among North Carolina's state and local health departments, hospital emergency departments, and law enforcement officials through simultaneous use of phone, fax, email, and pagers to communicate urgent health information.

The N.C. Disease Event Tracking and Epidemiologic Collection Tool ([NC DETECT](#)) provides statewide early event detection and timely public health surveillance to public health officials and hospital users. The data is continually collected from hospital emergency departments, the Carolinas Poison Center, and other medical facilities. The system was created by and is managed by the N.C. Division of Public Health and the Department of Emergency Medicine at the University of North Carolina at Chapel Hill, with support from the CDC. Tying all of these components together is the [NCHAN web site](#), used both as a conduit for exchanging health information and as a resource for accessing an almost limitless collection of information on disease control and bioterrorism issue.

Residential Living or Long Term Care for Seniors

Scotland County provides several alternatives for senior living or long term care through the following:

Adult Care Homes – Assisted Living – 2

- **The Meadows** – Assisted Living Units - 80 beds (private, semi-private).
- **Prestwick Village** – Assisted Living Units - 100 beds (private, semi-private).

Family Care Homes – Licensed – 3

- Blair Assisted Living #1 – Family Care Units - 6 beds each. Licensed health professional support, home health support, supervision for personal care, Blair Assisted Living #2 activities
- Blair Assisted Living #3

Skilled Nursing Homes – 2

- **Scotia Village** – Nursing Care Units – 50; Special Care Units - 12
- **Scottish Pines** – Nursing Care Units - 99

Continuing Care Retirement Community

- **Scotia Village** – Independent Living Units – 100; Assisted Living Units – 20; Nursing Care Units – 50; Special Care Units - 12

(Independent) Senior Living

- **Cedar Trace Landing** – Independent Living Units – 48; Secured facility. Income guidelines for eligibility.
- Programs and services offered include health screenings, presentations, short outings and trips, activities such as bingo, exercise. Technology Center and Community Room.
- Transportation includes SCATS (Scotland County Adult Transportation System).

Scotland County Adult Day Care and Scotland County Adult Day Health Care

- Open 5-days a week from 8am to 3pm. Average daily participation – 15 to 18.
- Provides adult day care services that include transportation, activities including physical activity, crafts, short outings, meals, guest speakers, family counseling and support, and Adult Basic Education. Skilled nursing and licensed practical nursing staff available.

- Provides an organized program of services during the day in a community group setting for the purpose of supporting older adults' personal independence, and promoting social, physical, and emotional well being. Services include health care services.

Hospice of Scotland County

- **"Morrison Manor"** – residential facility offering state of the art comfort measures and symptom management for progressive terminally ill patients or those without a caregiver. Six individual suites accommodate patients and their families for privacy. Admissions approved by appropriate criteria and need for placement.
- **"Morrison Manor"** – used for patients with a higher level of medical acuity.

Laurinburg Housing Authority

- Income based residential living for seniors/elderly disabled/handicapped. Approximately 80 units available for seniors and elderly disabled or handicapped.
- Services offered include adult life enrichment programs/activities, transportation.
- Public Housing and Section 8 is available to seniors.

Home Health Agencies – 10

- **HealthKeeperz** – provides nursing care, physical therapy, occupational therapy, speech pathology, medical social, and home health aides.
- **Better Home Health Care** – provides in-home services such as skilled nursing, personal care service, home health aides, private-duty nursing, and CAP (Aids, children, adults) services, HIV case management.
- **Assistedcare Health and Home Care Specialists**
- **Healthcare Connections**
- **Native Angels HomeCare Agency, Inc.**
- **Liberty Home Care and Hospice**
- **Home and Family Health Care**
- **Carolina Therapy**
- **Horizon Homecare**
- **Piedmont Home Care**

Prestwick Village Assisted Living



Safety/Injury Prevention

The Fire Department, Police Department, Highway Patrol, Scotland County Health Department, Department of Social Services, Child Care Directions, American Red Cross, Scotland County School System, and others are among the resources in Scotland County that offer programs addressing safety and injury prevention.

- **Scotland County Safe Kids** – a chapter of the North Carolina Safe Kids Coalition whose mission is to prevent unintentional injuries among children ages 0-14yrs. Scotland County Health Department, the Highway Patrol, North Laurinburg Fire Department and Emergency Medical Services, and law enforcement have several Certified Child Safety Seat Technicians trained to instruct individuals on proper safety seat installation and provide car seat checks to insure proper installation for age and weight appropriate child restraint systems being used.

- **SAFETY TOWN** – provided by Child Care Directions, introduces safety awareness and preventive procedures to pre-kindergarten children
- **Safe Kids Mid-Carolinas Region Coalition** – promoting child passenger, fire, bicycle, pedestrian, furniture, toy, battery and other safety through regional events and education.

Smoking and Tobacco

Cigarette smoking remains the single leading preventable cause of death in the United States, accounting for approximately 1 of every 5 deaths or 443,000 people each year (CDC/NCDHHS, 2012). This estimate includes 46,000 deaths from secondhand smoke exposure including those affected indirectly, such as babies born prematurely due to prenatal maternal smoking. More deaths are caused each year by tobacco use than by all deaths from HIV, illegal drug use, alcohol use, motor vehicle injuries, suicides, and murders combined.

Health Effects and Mortality - Lung cancer, heart disease, and the chronic lung diseases of emphysema, bronchitis, and chronic airways obstruction, are responsible for the largest number of smoking-related deaths (CDC, 2015). The risk of dying from lung cancer is more than 23 times higher among men who smoke cigarettes and about 13 times higher among women who smoke cigarettes compared to those who have never smoked. Women who smoke increase their risk for developing coronary heart disease and increase by more than 12-13 times their likelihood of dying from chronic obstructive pulmonary disease, and increase their risk for other cancers (DHHS/CDC, 2015). In addition, cigarette smoking increases the risk for infertility, preterm delivery, stillbirth, low birth weight, and sudden infant death syndrome (SIDS).

Since 2006, Scotland County Health Department along with all Government Buildings in Scotland County adhere to a smoking ordinance preventing smoking or using tobacco products within 50 feet of the buildings. In May of 2009, Governor Beverly Perdue signed an indoor smoking ban (House Bill 2) into law. Scotland County's Senator William Purcell one of the Bill sponsors, was instrumental in getting the new law passed which became effective January 2, 2010. The law prohibits smoking in nearly all restaurants, bars and lodging establishments that prepare and serve food and drink. Proponents say the law will protect people from the adverse health effects of second-hand smoke.

Since July 2013, Scotland County Parks & Recreation implements a "No-Smoking/Tobacco Use" Policy providing signage to all parks and recreation areas where children play through the Region 6 Community Transformation Grant Project.

Free, confidential quit coaching for any tobacco use who wishes to quit is available through QuitlineNC at 1-800-QUIT-NOW (784-8669). QuitlineNC is available daily. Translation service is also available.

17.9% of respondents reported the use of tobacco products is the biggest behavior risk that impacts their family. Source: 2016 Scotland County Community Health Assessment Survey.



Car Seat Checking Station



Wednesday, Sept. 17
2:00 – 4:00 p.m.
The Purcell Clinic
King Street, Laurinburg

Sponsored by: Laurinburg Police Department,
Laurinburg Fire Department and Safe Kids
Mid-Carolinas Region

Take this time to:

- See if you are properly using your car seat
- Learn why second-hand seats are not always a good buy
- Prevent receiving a ticket and two points on your license
- Ask questions of your certified car seat technicians

A proud member of



The RED Tablecloth
Ready • Energized • Determined

Eating healthy is easy!

Place nutritious and delicious foods on RED TABLECLOTHS to recognize and enjoy at your events, meetings and functions.



There is room at THIS table for everyone!

For more information on eating healthy
Contact Katha Cox 919.277.2475 ext. 4476
kox@scotlandcountync.gov and go to
www.choosemyplate.gov www.eatwsmidcarolinas.org

Transportation

Transportation plays a vital role in the health and well being of Scotland County residents since “transportation” enables or diminishes access to services such as health care, as well as access to employment, school, day care, and more.

Though Scotland County is considered a rural county and ranked 64th in the State in population, approximately 54% of Scotland County residents live in rural areas (or outside the city of Laurinburg), compared to 33% of North Carolina’s population and 20% nationwide. Populations living in our rural areas are more likely to be living in poverty, and thereby less likely to have access to transportation. This is particularly true for rural racial minority and Hispanic populations.

- Scotland County Area Transit System (SCATS) – Two used by the general public to go, via circuitous route, to various neighborhoods, shopping, physician offices, pharmacies, etc. within the city of Laurinburg. Cost is \$1.00 per day. Seven vehicles are used for medical purposes.
- Scotland County Social Services – provides medical vans county-wide through its Medicaid office for persons needing transportation to doctors’ offices or to the hospital, based on a doctor’s referral by reservation.
- Scotia Village and Scottish Pines – offer transportation to their senior citizen residents.
- Laurinburg Housing Authority – offers transportation to their resident seniors in their programs and to their disabled residents
- Braveheart Medical Transport – medical assistance transportation
- Other – Mary’s Taxi Service – There is no public bus system or passenger rail system in the county. However, charter and rental buses are available.

3.35% of respondents reported lack of transportation kept them or their family from seeking medical treatment. Source: 2016 Scotland County Community Health Assessment Survey.

Scotland County Area Transit System



Scotland County Area Transportation



Section VI

Health Priorities...Past and Present

In the 2016 Community Health Assessment Survey, respondents once again identified concerns for health issues and behavior risks. The top concerns of chronic disease remained consistent in the 2009 and 2013 reports. Top health concerns common with the 2013 report were: High Blood Pressure, Diabetes, Heart Disease, and Cancer. The top five community behavior risks identified in 2013 were somewhat common with the 2016 survey with lack of physical activity ranking first today followed by use of tobacco, poor nutrition and substance abuse. In summary, “all” community health concerns and behavior risks taken from the 2013 community health assessment survey remain nearly consistent with the 2016 survey response. Since 2000, the top three health concerns common today are: High Blood Pressure, Diabetes and Heart Disease.

The table below depicts the top ten priority health concerns in 2013 and similar health and behavior concerns in 2016. Issues are common across the board, with the exception of certain issues switching up or down slightly in the ranking.

2013 Health Priorities	2013 Behavior Risk	2016 Health Priorities	2016 Behavior Risk
High Blood Pressure	Lack of Physical Activity	High Blood Pressure	Lack of Physical Activity
Diabetes	Use of Tobacco	Heart Disease	Poor Nutrition
Obesity	Environmental Factors	Diabetes	Use of Tobacco
Heart Disease	Poor Nutrition	Cancer	Substance Abuse (Drug and Alcohol)
Cancer	Alcohol/Drug Abuse	Obesity	Other
Asthma	Crime	Stroke	Unprotected Sex
Dental Health	Seatbelt Use	Dental Health	Child/Spouse/Parent Abuse
Mental Health	Unprotected Sex	Mental Health	Seatbelt Use
Stroke	Child/Spouse/Parent Abuse	Asthma/Lung Disease	Environmental Factors
Teen Pregnancy	Child Safety Seat Use	Smoking/Tobacco	Crime

Subsequent to review of the 2016 Health Assessment Survey data and secondary data the Core Work Group and CHA Team and committee made a decision by process of elimination to address the main concerns, develop action plans, and focus on:

- Obesity (physical activity and nutrition)
- Mental Health (Substance Abuse/Tobacco Use)
- Dental Health

The Scotland Community Health Assessment Core Work Group are reviewing this report and the results of the 2016 Community Health Assessment Survey to develop action plans for the focus areas we will address through 2019. Physical Activity and Nutrition will remain a priority area, and the new and emerging issues of Mental Health and Dental Health will round out our top 3 priorities. These may be expanded on or additional areas will be determined. In 2017, the Core Work Group will develop action plans for the current areas of focus and any new priority areas we are able to address.

Compare with NC 2020 Healthy Objectives

Every ten years since 1990, North Carolina has set decennial health objectives with the goal of making North Carolina a healthier state. One of the primary aims of this objective-setting process is to mobilize the state to achieve a common set of health objectives. One of the goals of the Healthy NC 2020

project was to develop a limited number of health objectives, rather than the large number of objectives set for 2010 which made it difficult to focus attention on key objectives that could lead to overall health improvements. The Healthy North Carolina 2020 Objectives includes a specific 'target' that provides a quantifiable way to measure our success in achieving the objectives we set out to accomplish or at least improve upon.

2020 Health Objectives Focus Areas

Tobacco Use – addresses concerns about tobacco use which is the leading cause of preventable death in North Carolina.

Physical Activity and Nutrition – addresses concerns about overweight and obesity for both children and adults.

Injury and Violence – addresses reduction of injuries, child abuse, motor vehicle injuries, sexual assault, homicide, suicide, and injuries caused by weapons.

Maternal and Infant Health – addresses concerns about newborn health and well being and addressing women's health essential to improving birth outcomes.

Sexually Transmitted Disease and Unintended Pregnancy – address concerns about sexually transmitted diseases including HIV infection and unintended pregnancy that affects tens of thousands of North Carolinians every year.

Substance Abuse – addresses concerns of substance use and abuse which are major contributors to death and disability in North Carolina.

Mental Health – addresses mental health which is an integral part of individual health.

Oral Health – addresses oral health of children due to inadequate dental health services, reducing tooth decay and tooth loss for all ages, and increasing access to dental health services.

Environmental Health – addresses the impact of the environment on the health of the community, i.e. areas of food safety, air, soil, and water quality, and work related injuries.

Infectious Disease and Foodborne Illness – addresses childhood vaccinations, influenza and pneumococcal vaccinations, and reduction of critical violations in restaurants and/or food stands.

Social Determinants of Health – addresses the impact poverty, education level, and housing which are factors that are strongly correlated with individual health.

Chronic Disease – addresses leading causes of premature death due to cancer, diabetes, heart disease and stroke.

Cross-Cutting – addresses strategies to increase average life expectancy of individuals

While North Carolina is moving in the right direction on many of the 2020 Health Objectives, there are worrisome trends that continue. The most significant concerns are the decrease of adults with health insurance, increase of diabetes death rates, and the increase in overweight and obesity among adults and children. These concerns were also on the mind of Scotland County respondents in the 2016 Community Health Assessment Survey. The results of the survey follow in Section VII (Appendices) in graph form.

Section VII

**Appendix A – Community Health Assessment
Survey Questionnaire**

- English Version - Spanish Version (not available)

**Appendix B – Community Health Assessment
Survey Results and Graphical Data**

Appendix C - Community 'Input' Survey Graph Data (secondary)

Appendix D – RWJ County Health Rankings/Graphs/2016

Appendix E – Community Resources

Appendix F – References and Resources



Community Diabetes Health Fair 2016



Community Diabetes Health Fair 2016



Public Health Nurses working Shelter 2016 during Hurricane Matthew



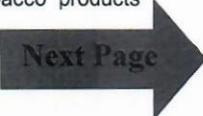
SCHD Open House EIC Clinic Exhibit 2016

2016 Scotland County Community Health Needs Survey Appendix A
By Scotland Health Care System & Scotland County Health Department

SURVEY ALSO AVAILABLE ONLINE AT: <https://www.surveymonkey.com/r/POCOFH3>

SECTION I: THESE QUESTIONS APPLY TO YOU AS AN INDIVIDUAL

1. How do you rate/ feel about your health? (Check one)
 Excellent Very Good Good Fair Poor Don't Know /Not Sure
2. In the past 3 months, how often have you participated in any physical activities/exercises such as running, sports, gardening, or walking for exercise? (Check one)
 None 1-2 days/week 3-5 days/week 6-7 days/week Other (Please specify) _____
3. In the past year, have you seen a medical provider for any of the following? (Check all that apply)
 Routine Check-up Health Screening Sick Visit Emergency Not seen
4. When seeking medical care, where do you go first? (Check one)
 Urgent Care at Scotland Memorial ER at Scotland Memorial Primary Provider/Family Physician
 Scotland County Health Department Scotland Community Health (Free Clinic) Moore Regional Hospital
 First Health Richmond Southeastern Regional Medical Center Cape Fear Valley Medical Center
 Sandhills Medical Center (Hamlet) Other Urgent Care Centers (please specify) _____
5. Have you been told by a doctor, nurse, or health professional that you have any of the following? (Check all that apply)
 Asthma/Lung Disease Diabetes Heart Disease Depression Osteoporosis High Blood Pressure
 Overweight/Obesity High Cholesterol Cancer None Other (please specify) _____
6. Have you ever attended any free community health screenings in Scotland County? (i.e. Blood pressure, Cholesterol, Diabetes)
 Yes No
7. Do you use any kind of tobacco or smokeless products? (Check all that apply)
 Smoke Chew/Dip Electronic Cigarettes None
8. Do you support tobacco free public Places/Buildings/Grounds in Scotland County?
 Yes No
9. What would be your main way of getting information from authorities in a large-scale disaster or emergency? (Check one)
 Television Neighbors Radio Text Message (Emergency Alert System) Print Media (ex. Newspaper)
 Social Networking Site Don't Know / Not Sure Other: _____
10. If public authorities announced a mandatory evacuation from your neighborhood or community due to a large-scale disaster or emergency, would you evacuate?
 Yes No
11. What would be the main reason you might not evacuate if asked to do so? (Check one)
 Not applicable, I would evacuate Concern about personal family/ family safety Inability to get out of home or area Lack of trust
 Health problems (could not be moved) Not wanting to leave home or property Lack of transportation Concern about leaving pets
 Don't Know / Not Sure Other: _____
12. How often do you visit or use services provided at Scotland County Health Department, this includes services/clinics such as Family Planning, Environmental Health, Health Education, Flu Clinic, WIC, Immunizations, Child Health, Maternal Health? (Check one)
 Once a month Once a year Every other year Have not used in more than 3 years Never used
13. When answering the questions above, if you have not used public health department services, please indicate why. (Check all that apply)
 Receive services elsewhere Not aware of services I prefer not to use services offered
 Transportation Other _____
14. What are your biggest health issues/ worries? (Check all that apply)
 Asthma/ Lung Disease Heart Disease Obesity/Overweight Cancer Stroke High blood pressure Diabetes Mental Health
 Teen Pregnancy Dental Health Substance Abuse (Drugs/Alcohol) STDs Smoking/Use of tobacco products
 Other: _____

Next Page 

SECTION II: THESE QUESTIONS APPLY TO YOUR FAMILY/HOUSEHOLD

15. What are the biggest behaviors/ risk factors that impact your family? (Check all that apply)

- Substance Abuse (Drugs/ Alcohol) Unprotected sex Poor Nutrition Child/Spouse/Parent Abuse Seatbelt use
- Lack of Physical Activity Crime Child Safety Seat Use Environmental factors Use of Tobacco Products
- Bullying Other: _____

16. What is the main reason that keeps you or your family from seeking medical care? (Check one)

- Cultural or Religious Beliefs No Insurance Unable to pay for visit to doctor Fear Services too far away
- Lack of knowledge/understanding the need Transportation Have to wait too long at doctor office
- No appointments available at doctor when needed Medical care not important None-I go to doctor when needing medical care
- Other: _____

17. Where do you and your family get most of your health information? (Check all that apply)

- Doctor/Health Professional Hospital Health Department Community Education Events Friends or Family
- Newspaper/ Magazines Internet Library Television Radio

18. Does your family have a basic emergency supply kit? (Kits include water, non-perishable food, any necessary medicines, first aid supplies, flashlights and batteries, non-electric can opener, blanket, etc.)

- Yes No Don't Know / Not Sure

SECTION III: THESE QUESTIONS APPLY TO THE COMMUNITY IN WHICH YOU LIVE

19. In your opinion, what is the biggest health issue/ worry in your community? (Check one)

- Diabetes High Blood Pressure Heart Disease Asthma/Lung Disease Tobacco Use
- Teen Pregnancy Substance Abuse (Drugs/ Alcohol) Gangs/ Violence Mental Health Adult/ Child Abuse
- Obesity/Overweight Other: _____

20. In your own opinion, what do most people die from in your community? (Check one)

- Diabetes High Blood Pressure Heart Disease Asthma/Lung Disease Cancer Stroke Kidney Failure
- Substance Abuse (Drugs/ Alcohol) Homicide/ Violence Suicide Motor Vehicle Deaths HIV/AIDS
- Other: _____

21. Which do you feel affects the quality of healthcare you or people in your community seek/ receive? (Check one)

- Ability to read & write/Education Language Barrier Age Race Economic (Low Income, No Insurance, etc.)
- Sex/Gender Not Affected

22. What do you feel is the biggest problem in your community due to lack of money? (Check one)

- Food Medicine Health Insurance Transportation Home/Shelter Utilities (ie Electricity, Fuel, Water)

23. What services/screenings/education does your community need to help improve the health of your family and neighbors? (Check all that apply)

- Mental Health Services(including depression/anxiety) Safe place to walk/play/exercise After-School Programs Recreation Center
- Substance Abuse Rehab Services (Drugs/Alcohol) Healthier Food Choices/Nutrition Transportation Job opportunities
- Wellness Services Specialty Physicians Quit Smoking Cancer Literacy Reckless Driving/Seatbelts/Child Care Seats
- Cholesterol/ Blood Pressure Diabetes Emergency Preparedness HIV/Sexually Transmitted Diseases
- Dental Screening Eating disorders Vaccinations/ Immunizations Disease Outbreaks Pregnancy Prevention
- Other: _____

For Statistical Purposes Only, Please complete the following:

I am: Male Female My Age is: Under 25 25-34 35-44 45-54 55-64 65-74 75+ Do you have health insurance? Yes No
If yes, what type? Medicare Medicaid Obama Care Private What is your zip code: _____ and/or city where you live? _____
My race is: White/Caucasian Black/African American Native American Alaskan Native Asian Pacific Islander Other _____
What is your ethnicity? Hispanic Non-Hispanic Unknown I am: Employed Unemployed Retired Disable Other: _____
What is your marital status? Never married Married Separated Divorced Widowed Other _____
My Highest level of education completed: Less than 12th grade High School Graduate Some College 2yr degree Graduate Degree Post Graduate Degree
My household income last year was: less than \$10,000 \$10,000-\$19,999 \$20,000-\$29,999 \$30,000-\$49,999 50,000-\$74,000 \$75,000-\$99,999 \$100,000+ Do not know Prefer not to answer
My job field is best described as: Agriculture Business/Industry Retail Homemaker Government Healthcare Student
 Education Food Service Migrant Worker Other: _____

****Thank you for your participation****

Dear Scotland County Resident,

A **Community Health Needs Assessment** is performed every three years to gain an understanding of the health, concerns, and health care systems of the community. This assessment will provide direction and focus for Scotland Health Care System, Scotland County Health Department, and other community agencies and organizations in Scotland County. This assessment will serve as a basis for improving and promoting the health of Scotland County residents.

You, as a Scotland County resident, can help Scotland County Health Department and Scotland Health Care System with this very important **2016 Community Health Needs Assessment** by completing the confidential and short **5-7 minute** survey. We thank you in advance for your valuable time and appreciate your participation as your answers are important!

You may also return the completed survey to **Scotland Health Care System** (Front Desk) at **500 Lauchwood Drive Laurinburg, NC 28352** or **Scotland County Health Department** (Registration Desk), **1405 West Blvd. Laurinburg, NC 28353**, Should you prefer to submit the survey online you may do so by going to the link below.

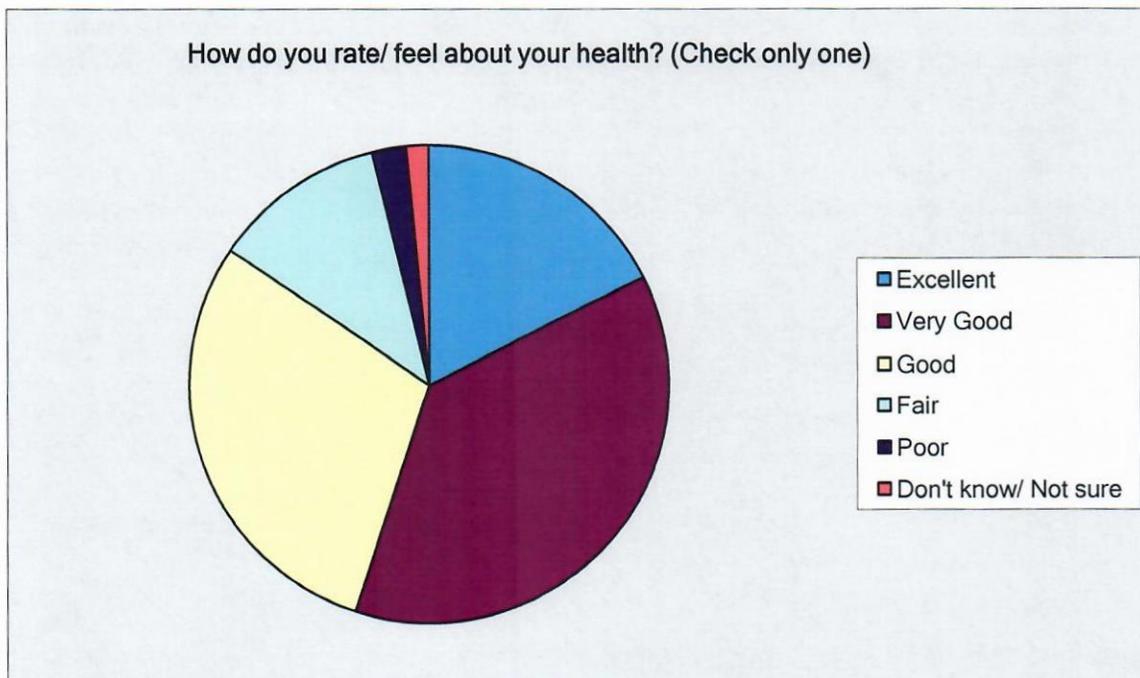
<https://www.surveymonkey.com/r/PQCQFH3>

Community Feedback

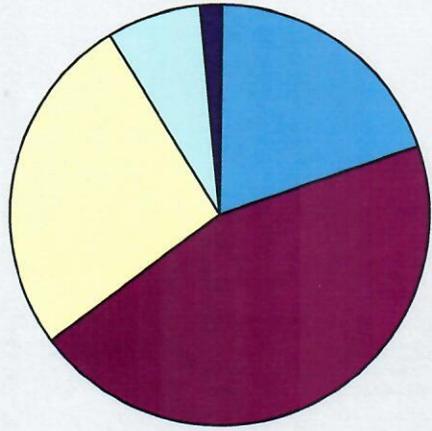
Community Survey

Qualitative data was gathered by conducting a community health assessment survey (primary survey) with a total of 478 responses from community members. The prioritization process included review and analysis of this primary, qualitative community feedback to determine priorities for healthcare interventions within Scotland County. A secondary “Community Input” survey was provided to allow for additional responses to total more than 600 surveys completed. The results from the Community Input Survey in graph format are included in Appendix B.

Community Health Survey Results 2016

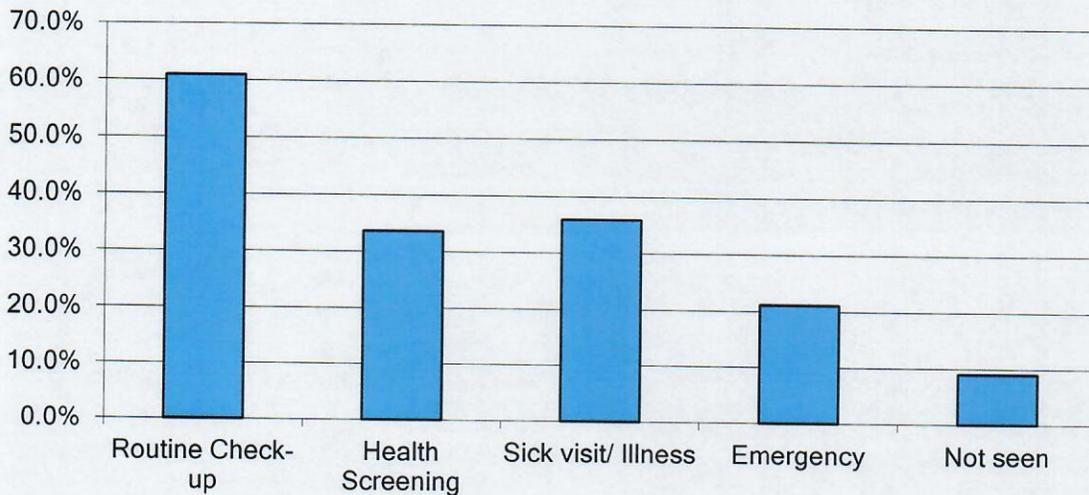


In the past 3 months, how often have you participated in any physical activities/ exercises such as running, sports, gardening, or walking for exercise? (Check only one)

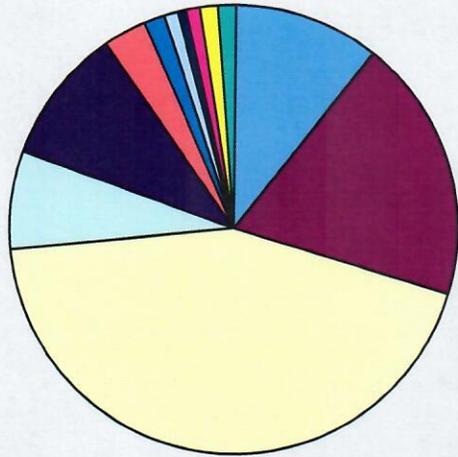


- None
- 1-2 days/ week
- 3-5 days/ week
- 6-7 days/ week
- Other (please specify)

In the past year, have you seen a medical provider for any of the following? (Check all that apply)

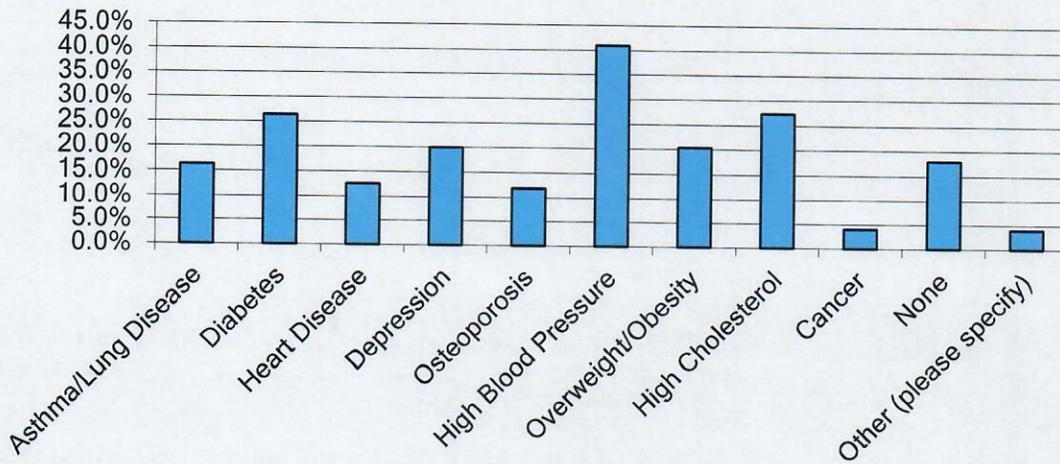


When seeking medical care, where do you go first? (Check all that apply)

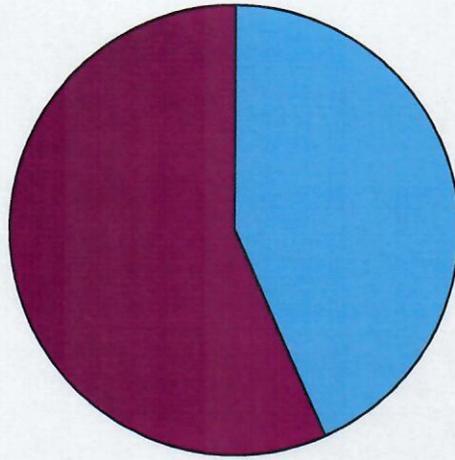


- Urgent Care at Scotland Memorial Hospital
- ER at Scotland Memorial Hospital
- Primary Provider/ Family Physician
- Scotland County Health Department
- Scotland Community Health (Free Clinic)
- Moore Regional Hospital

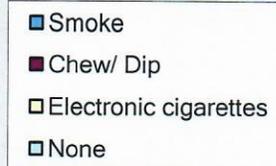
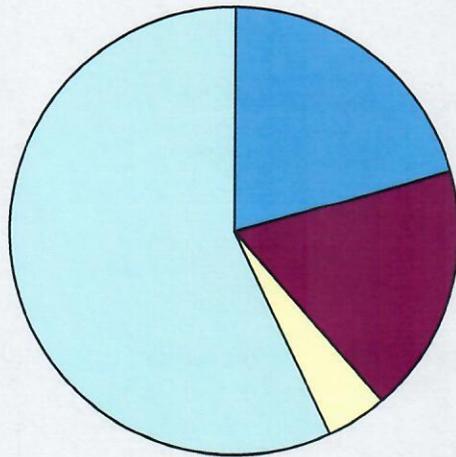
Have you ever been told by a doctor, nurse, or health professional that you have any of the following? (Check all that apply)



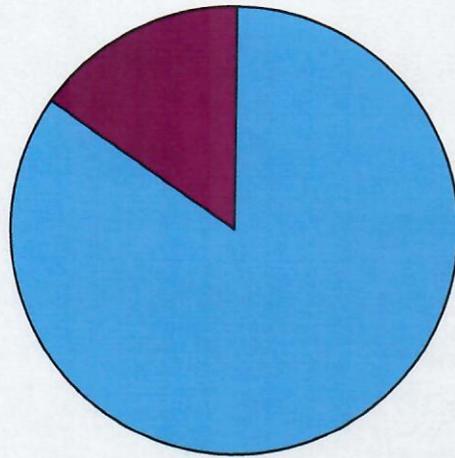
Have you ever attended any free community health screenings in Scotland County?(i.e. Blood pressure, Cholesterol, Diabetes)



Do you use any kind of tobacco or smokeless products? (Check all that apply)

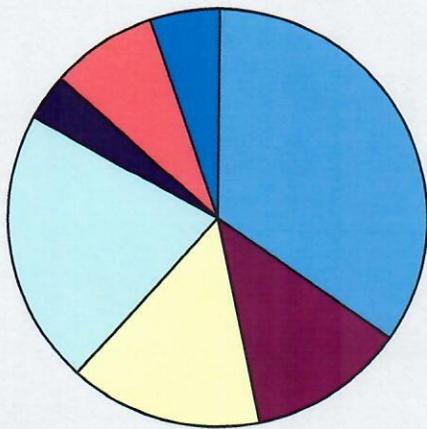


Do you support tobacco-free public places/buildings/grounds in Scotland County?



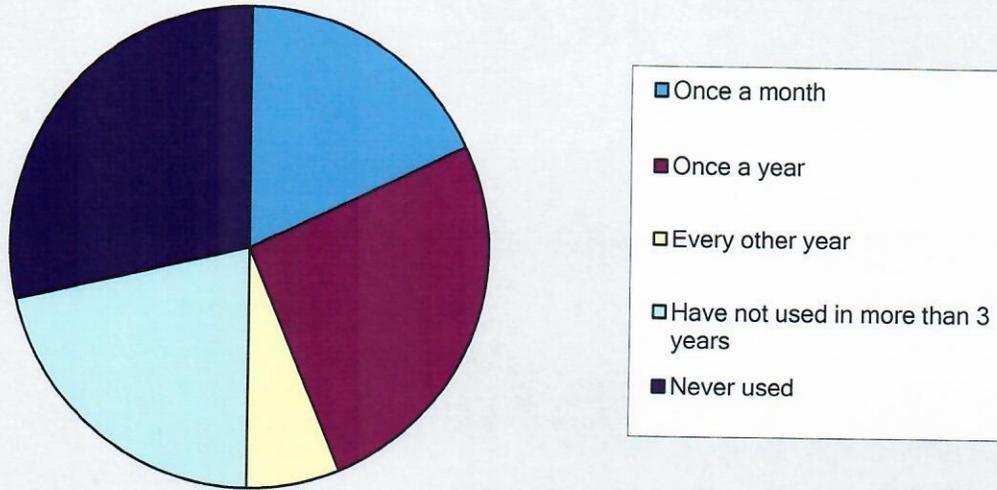
■ Yes
■ No

What would be your main way of getting information from authorities in a large-scale disaster or emergency? (Check only one)

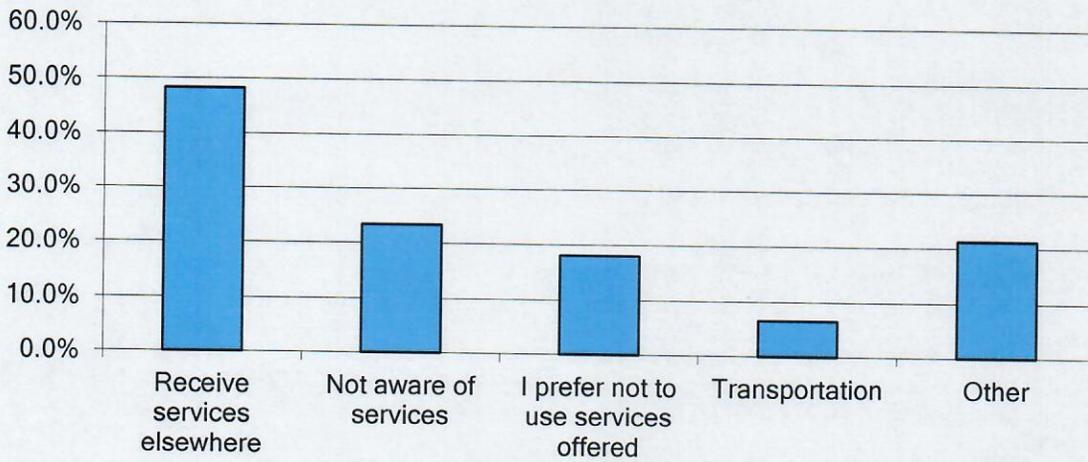


■ Television
■ Neighbors
□ Radio
□ Text Message (Emergency Alert System)
■ Print Media (ex: newspaper)
■ Social Networking site
■ Don't Know/ Not Sure

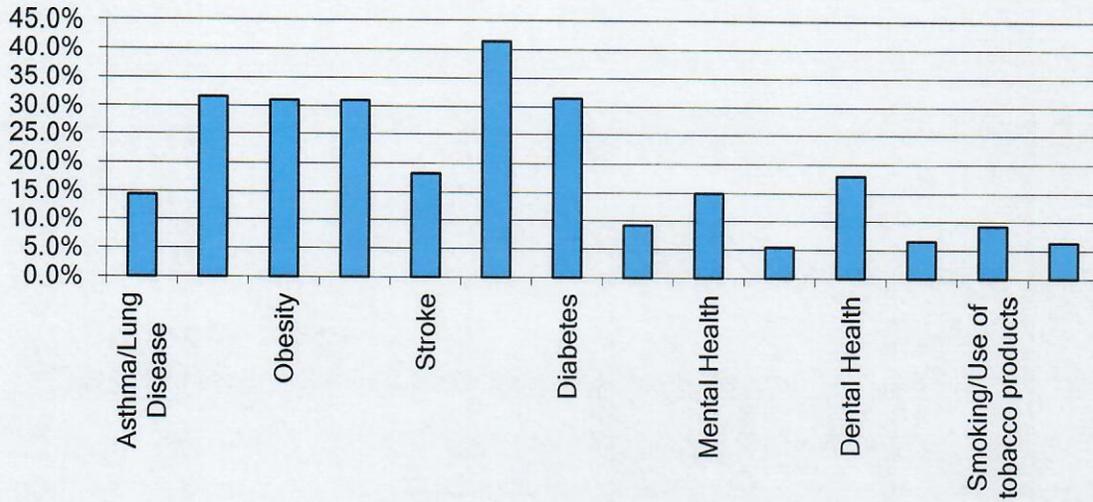
How often do you visit or use services at Scotland County Health Department (This includes services/clinics such as Family Planning)



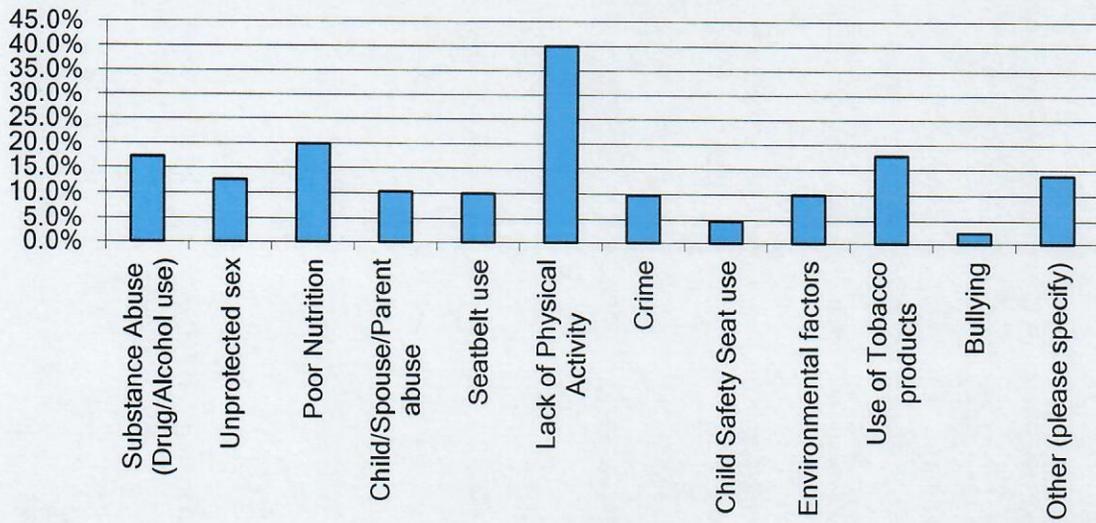
When answering the questions above, if you have not used public health department services, please indicate why. (Check all that apply):



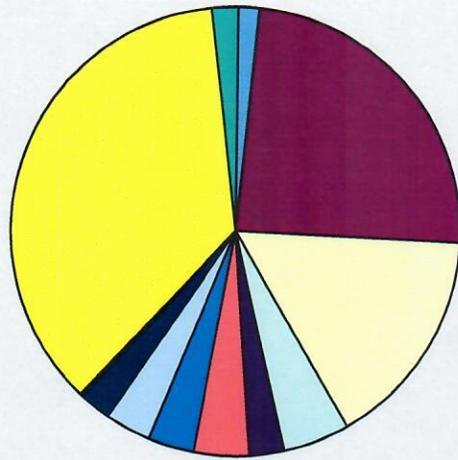
What are the biggest health issues/worries? (Check all that apply)



What are the biggest behaviors/ risk factors that impact your family? (Check all that apply)

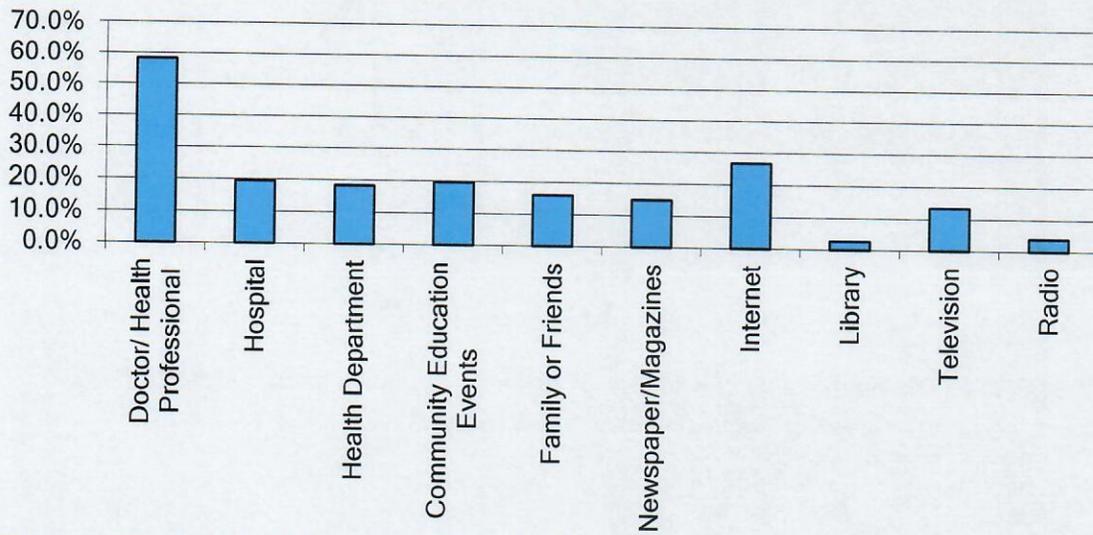


What is the main reason that keeps you or your family from seeking medical care? (Check only one)

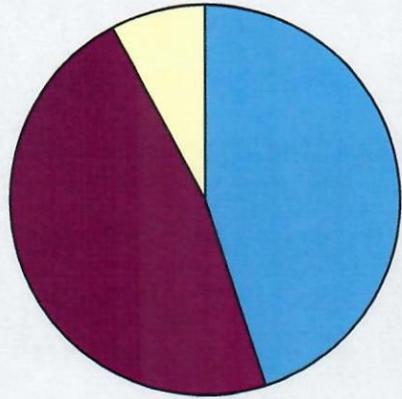


- Cultural or Religious Beliefs
- No insurance
- Unable to pay for visit to doctor
- Fear

Where do you and your family get most of your health information? (Check all that apply)

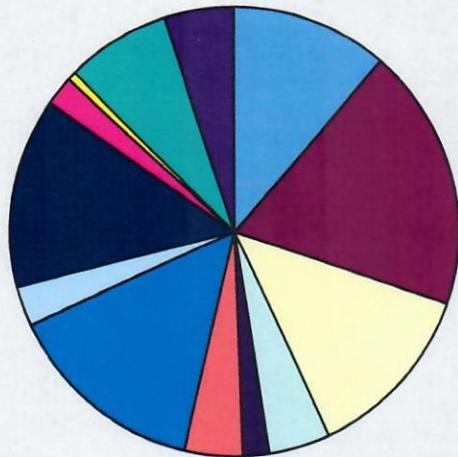


Does your family have a basic emergency supply kit? (These kits include water, non-perishable food, any necessary medicines, first aid supplies, flashlights and batteries, non-electric can opener, blanket, etc.)



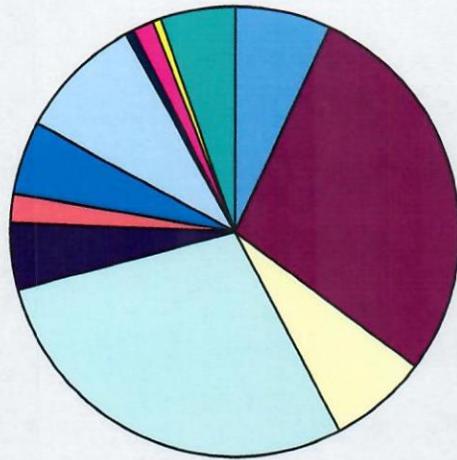
- Yes
- No
- Don't Know/ Not Sure

In your opinion, what is the biggest health issue/ worry in your community?
(Check only one)



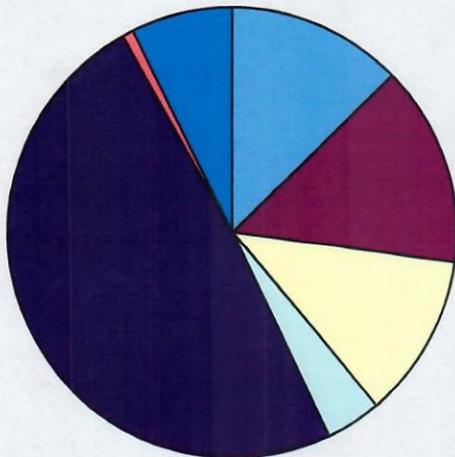
- Diabetes
- High Blood Pressure
- Heart Disease
- Asthma/ Lung Disease
- Dental Health
- Teen Pregnancy
- Substance Abuse (Drug/Alcohol)
- Tobacco Use

In your opinion, what do most people die from in your community? (Check only one)



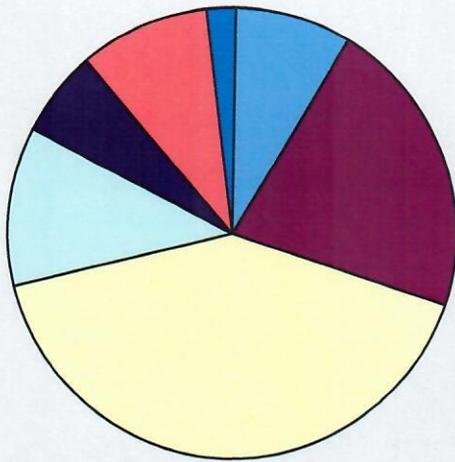
- Diabetes
- Heart Disease
- Asthma/ Lung Disease
- Cancer
- Stroke
- Kidney Failure
- Drug/ Alcohol Abuse
- Homicide/Violence
- Suicide
- Motor Vehicle Deaths
- HIV / AIDS
- Other (please specify)

Which do you feel affects the quality of the health care you or people in your community receive/seek ? (Check only one)



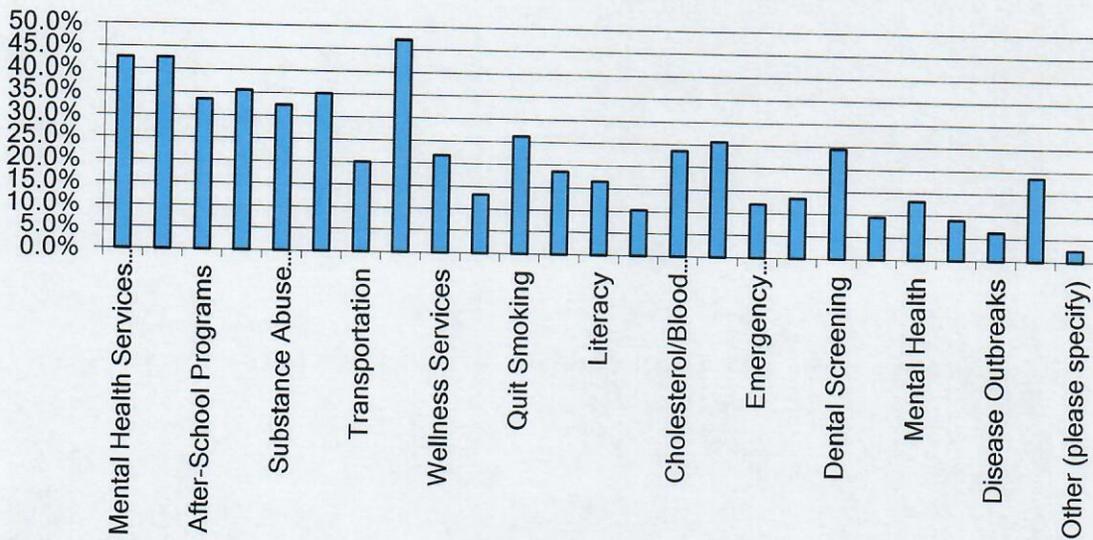
- Ability to read & write/ Education
- Language Barrier
- Age
- Race
- Economic (Low Income, No Insurance, etc.)
- Sex/Gender
- Not Affected

What do you feel is the biggest problem in your community due to lack of money? (Check only one)

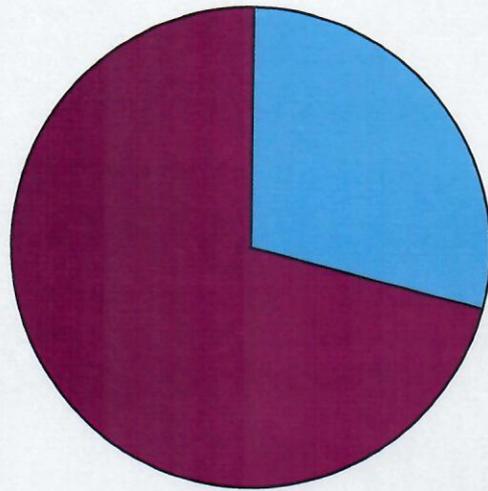


- Food
- Medicine
- Health Insurance
- Transportation
- Home/Shelter
- Utilities (ie. Electricity, Fuel, Water)
- Other (please specify)

What services/screenings/education does your community need to help improve the health of your family and neighbors? (Check all that apply)

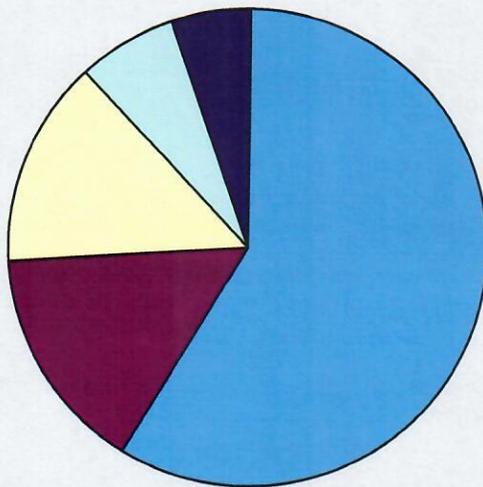


I am:



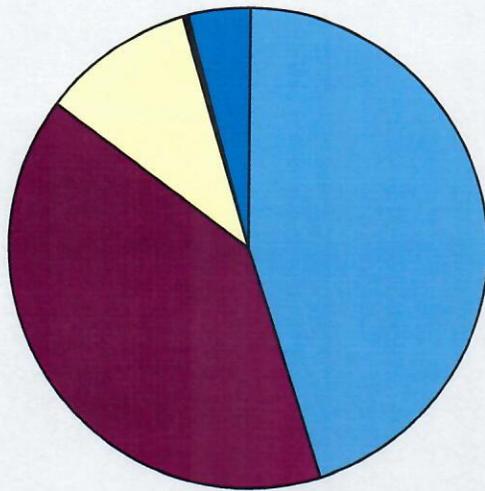
- Male
- Female

What is your zip code? If not known, what city do you live in?



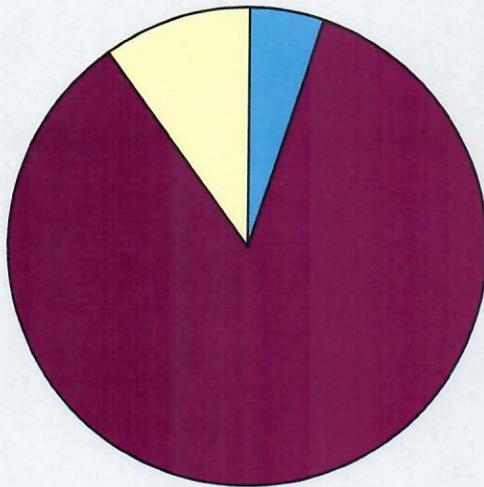
- 28352 (Laurinburg)
- 28343 (Gibson)
- 28351 (Laurel Hill)
- 28364 (Maxton)
- 28396 (Wagram)

My race is:



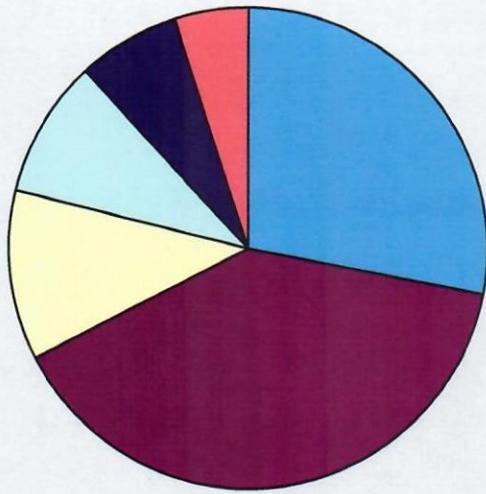
- White/Caucasian
- Black/African American
- Native American
- Alaskan Native
- Asian
- Pacific Islander
- Other (please specify)

Ethnicity



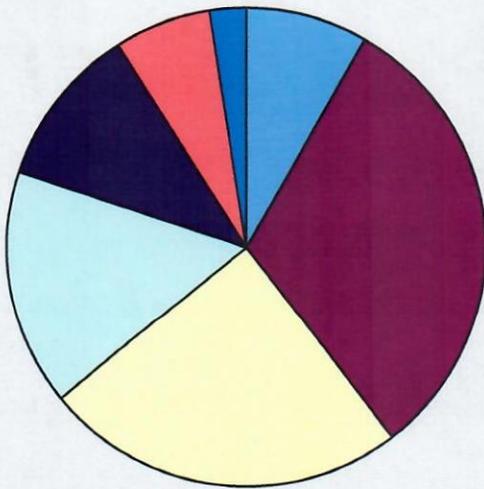
- Hispanic
- Not Hispanic
- Unknown/Not Sure

What is your marital status?



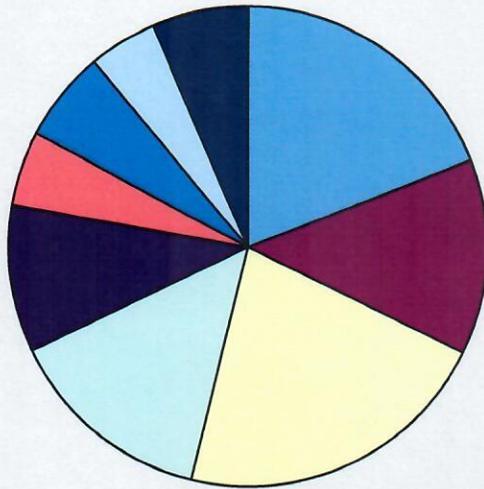
- Never Married/Single
- Married
- Separated
- Divorced
- Widowed
- Other (please specify)

My highest level of education is:



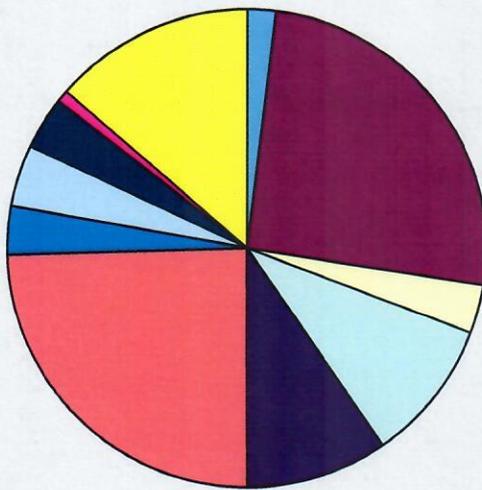
- Less than 12th grade
- High School Graduate
- Some college but no degree
- 2-year Degree
- 4-year Degree
- Graduate Degree
- Post Graduate Degree

My household income last year was



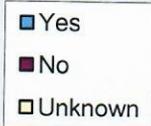
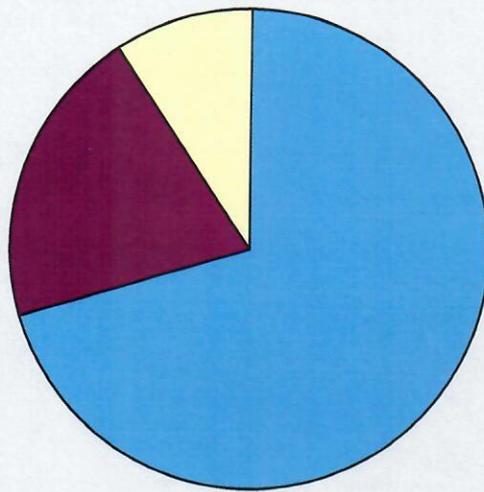
- less than \$10,000
- \$10,000-\$19,999
- \$20,000-\$29,999
- \$30,000-\$49,999
- \$50,000-\$74,999
- \$75,000-\$99,999
- \$100,000+
- Do not know
- Prefer not to answer

My job field is best described as:

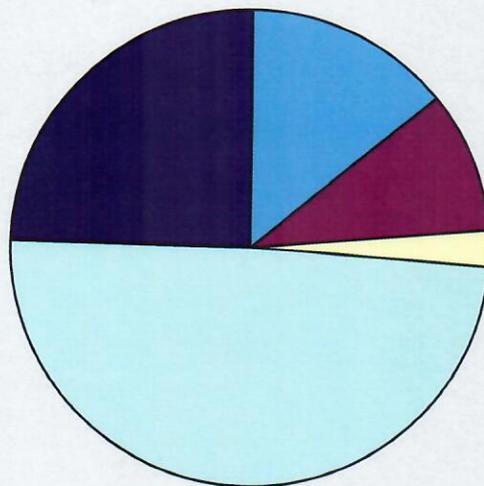


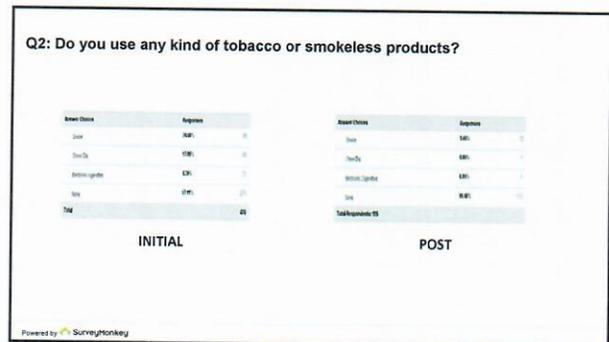
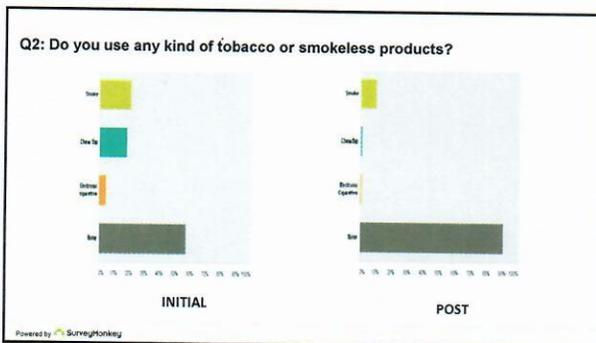
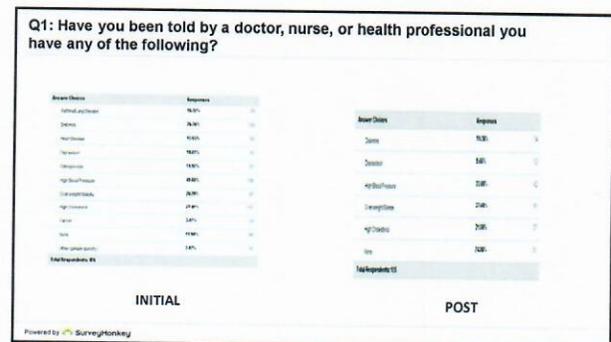
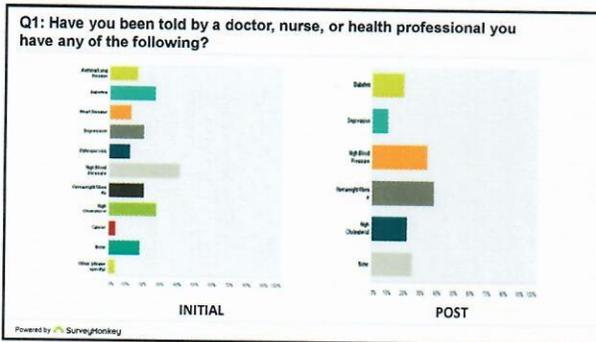
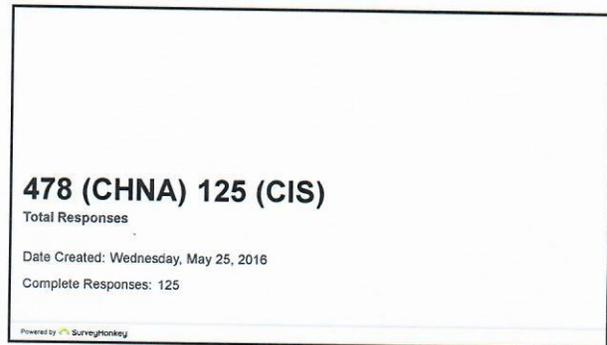
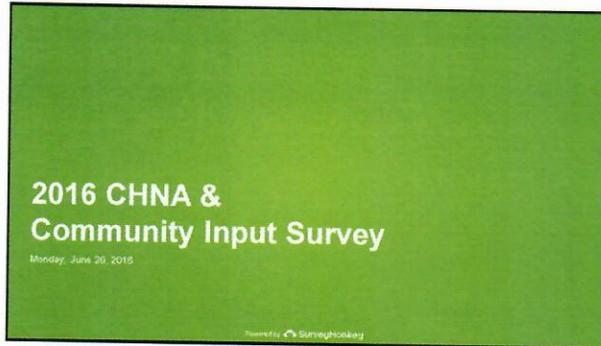
- Agriculture
- Business/Industry
- Retail
- Homemaker
- Government
- Healthcare
- Student
- Education
- Food Service
- Migrant Worker
- Other (please specify)

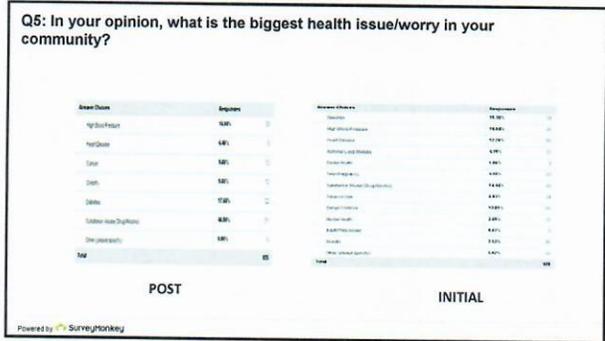
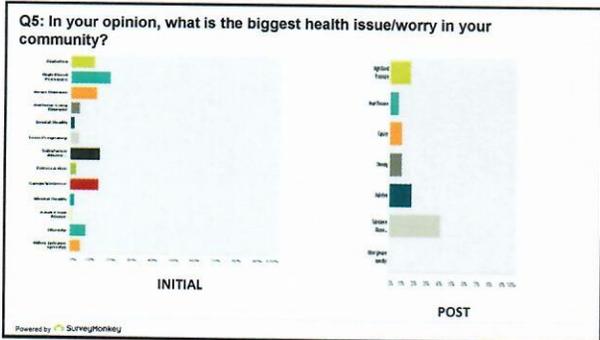
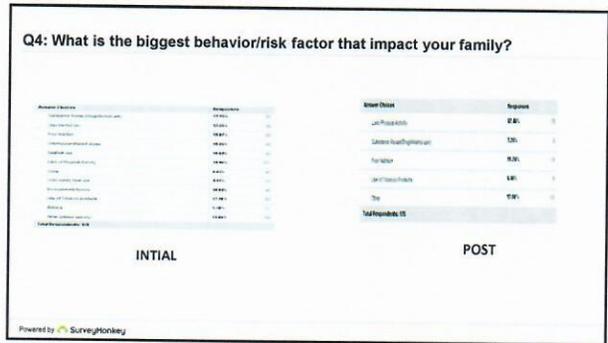
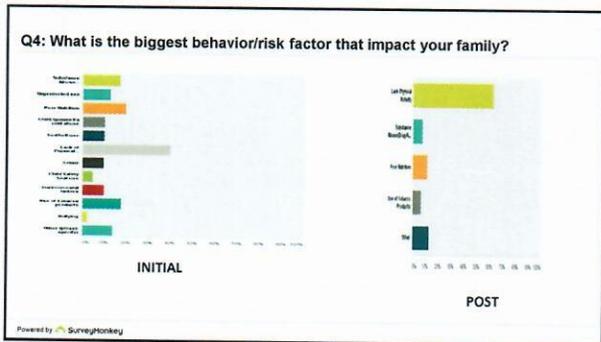
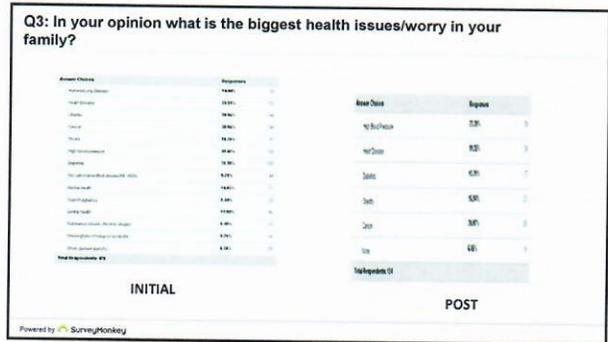
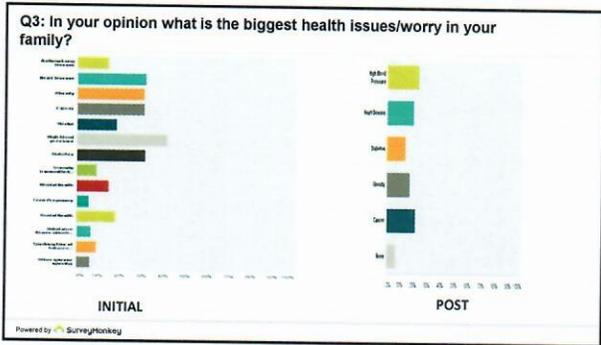
Do you currently have health insurance?

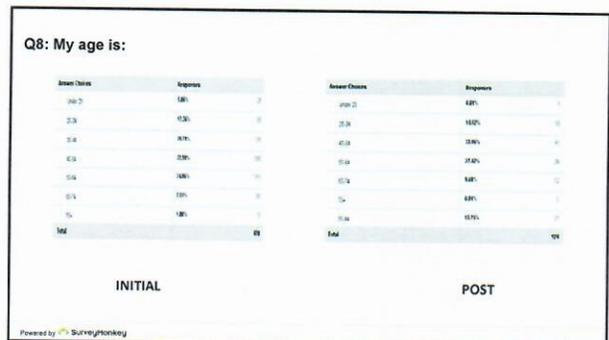
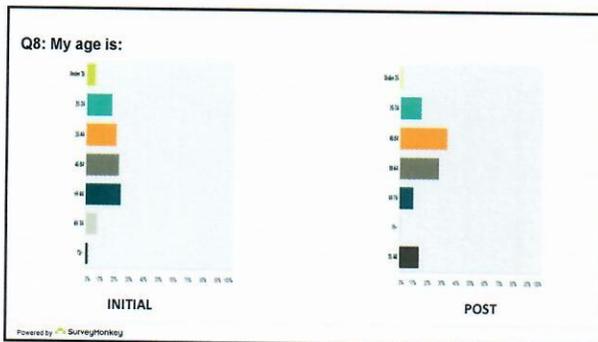
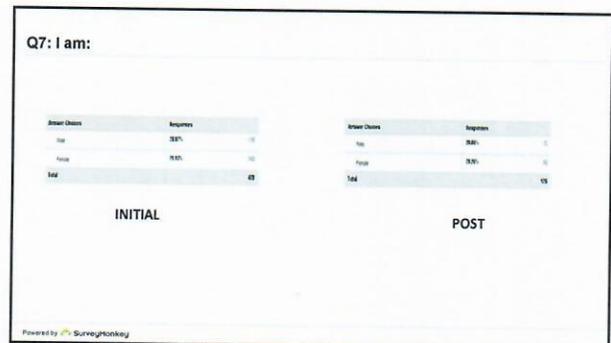
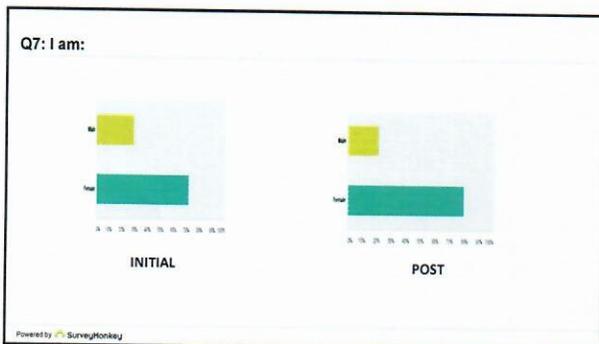
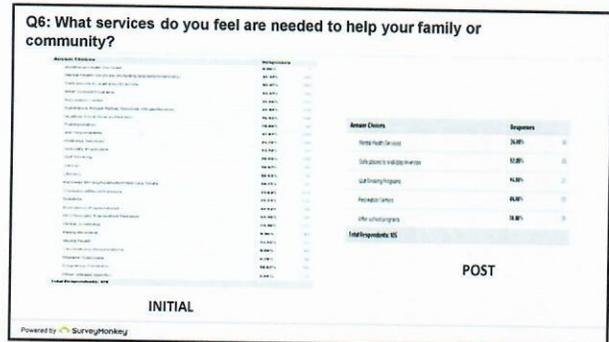
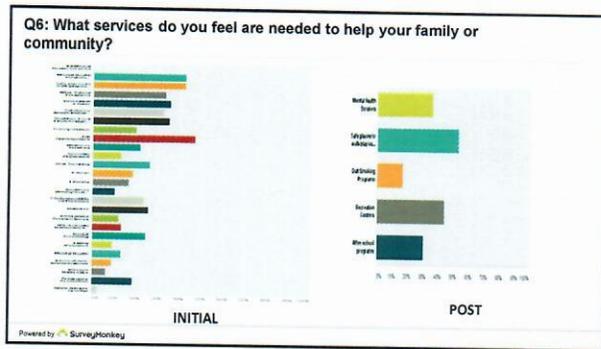


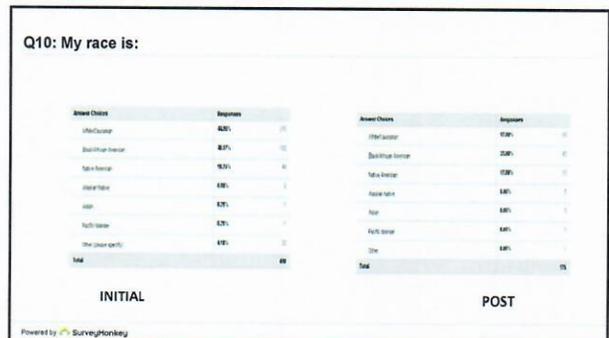
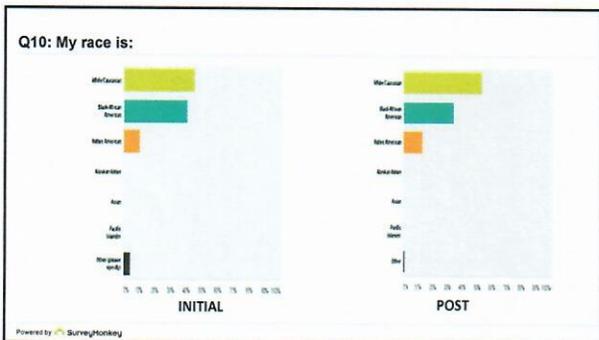
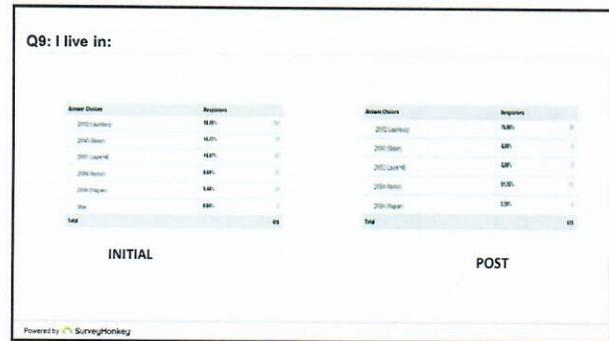
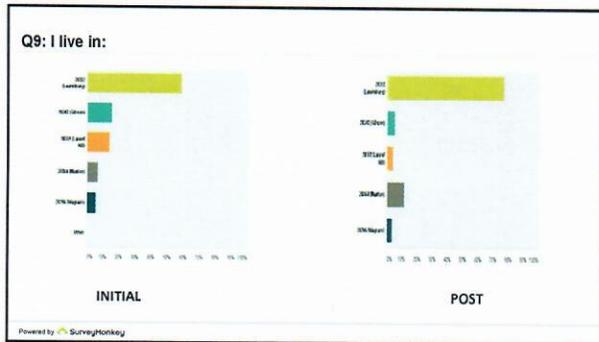
If yes, what type of health insurance?









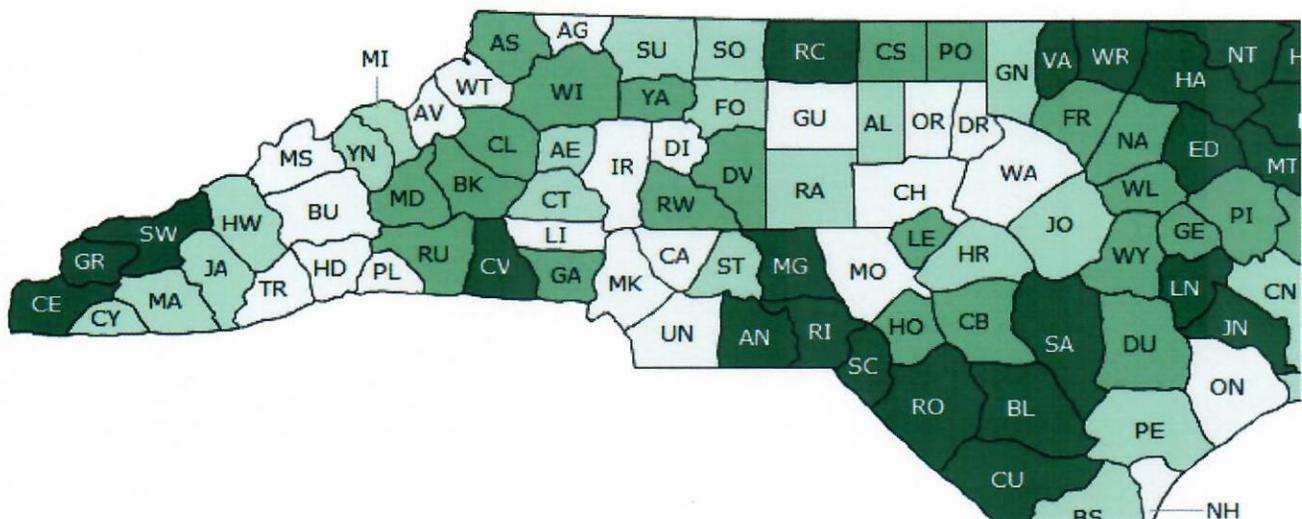


County Health Rankings

Appendix D

The *County Health Rankings* rank the health of nearly every county in the nation and show that much of what affects health occurs outside of the doctor's office. Published by the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation, the *Rankings* help counties understand what influences how healthy residents are and how long they will live. The *Rankings* confirm the critical role that factors such as education, jobs, income, and environment play in influencing health. The *Rankings* look at a variety of measures that affect health such as the rate of people dying before age 75, high school graduation rates, access to healthier foods, air pollution levels, income, and rates of smoking, obesity and teen births. The *Rankings*, based on the latest data publically available for each county, are unique in their ability to measure the overall health of each county in all 50 states on the multiple factors that influence health.

- County Health Rankings and Roadmaps, www.countyhealthranking.org
 2016 Health Outcomes – North Carolina

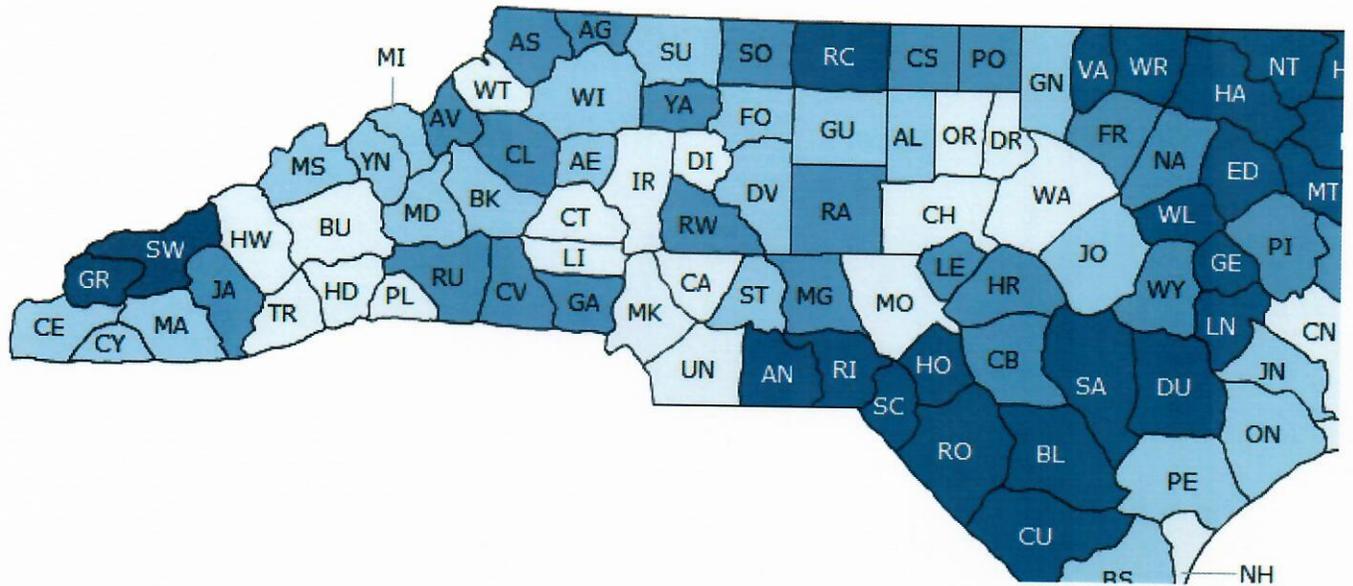


Scotland County (SC) ranked 99th with rankings 1-25 having the highest, favorable outcomes and rankings of 76-100 having the least favorable outcomes. (County Health Rankings and Roadmaps, www.countyhealthranking.org)

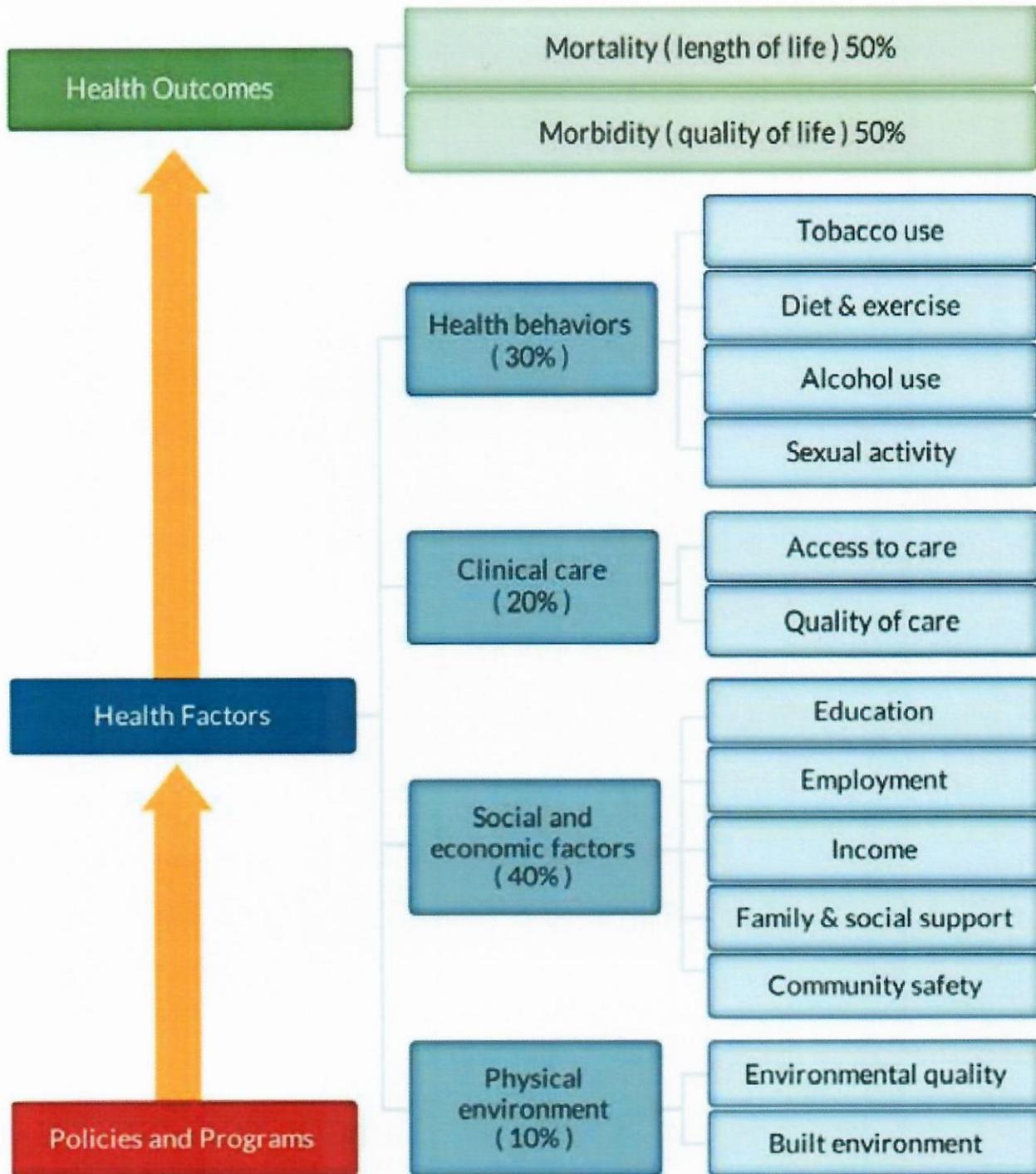
Based on the County Health Rankings, Scotland County ranks high among unhealthy outcomes for the county when compared to most counties in other parts of the state of North Carolina. It ranks 99th out of 100 counties among the health outcomes ratings and 99th among the health factors ratings. Scotland County has worsened over the past 5 years in its "health outcomes ranking" and "health factors" with previous ratings of 91% and 96%.

Scotland County Community Health Assessment | 2016

2016 Health Factors – North Carolina



Scotland County ranked 99th with rankings of 1-25 having the most favorable health factors and rankings of 76-100 having the least favorable health factors. (County Health Rankings and Roadmaps, www.countyhealthranking.org)



County Health Rankings model ©2012 UWPHI

The summary health factor rankings are based on weighted scores of four types of factors: behavioral, clinical, social and economic, and environmental. The weights for the factors (shown in parentheses in the figure) are based upon a review of the literature and expert input, but represent just one way of combining these factors. (County Health Rankings, 2013).

Community Resources

Appendix E

Scotland County is rich in community resources. Diverse groups, various agencies, civic groups, faith organizations, the health care system, providers, schools and community volunteers collaborate to work together for the well-being of all citizens. Listed below are many resources available to the community:

- Adolescent Wellness Council
- Adult Care Homes
- Adult Day Care Services
- Adult Education
- After School Care
- Aging Advisory Council
- Alcoholics Anonymous
- Alzheimer's Support Group
- American Red Cross
- Amputee Support Group
- Arc of Scotland County
- Assisted Living for Adults
- Autism Society of NC-Parent Advocacy Group
- Better Breathers Support Group
- Border Belt AIDS Resources Team
- Boy Scouts of America
- Cancer Support Group
- Caregivers Support Group
- Child Care Directions
- Child Care Immunization Program
- Church Community Services
- Civic Organizations
- Community Diabetes Support Group
- Community Innovations
- Community Transformation Grant Project
- Concerned Citizens for the Homeless, Scotland County
- Department of Social Services
- Diabetes Support Group
- Domestic Violence & Rape Crisis Center
- Early Intervention Clinic – Scotland County Health Department
- EastPointe Managing Behavioral Healthcare
- Eckerd Behavioral Health
- East Carolina University Dental Clinic, Lumberton, NC
- Emergency Medical Services
- Environmental Health and Animal Control
- Family Alternatives, Inc.
- Family Care Homes
- Family Self-Sufficiency Program
- Family Fitness Center
- Food Bank-Star of Bethlehem Missionary Baptist Church
- Four County Community Services
- Guardian ad Litem Program
- Girl Scouts of America
- Grief Support Group
- Habitat for Humanity
- Head Start
- Health and Wellness Resource Guide
- Healthy Start Corps., UNC Pembroke
- H.E.A.R.T. (Health Education and Resource Team, Scotland County)
- Home Delivered Meals Program
- Home Health Agencies
- Hospice of Scotland County
- Indian Museum of the Carolinas
- Juvenile Crime Prevention Council
- Laurinburg, Scotland County Area Chamber of Commerce
- Laurinburg Downtown Revitalization Corporation
- Laurinburg Fire Department
- Laurinburg Housing Authority
- Laurinburg Police Department
- Literacy Council
- Local Media
 - Adelphia Cable Local Information and Announcements
 - The Laurinburg Exchange
 - WEWO Radio
 - WLNC Radio
- Lumber River Council of Government (Senior Nutrition)
- March of Dimes
- Mid-Carolinas Safe Kids Coalition
- Ministerial Alliance
- Ministerial Association
- Multiple Sclerosis Support Group
- Narcotics Anonymous
- New Beginningz, Inc.
- North Carolina Cooperative Extension Service, Scotland County
- Northview Harvest Outreach Ministries

Community Resources Con't

- Number, Please! Resource Guide
- Nursing Homes, Skilled
- Parkinson's Support Group
- Preparedness and Response
- Prescription Assistance Program
- Richmond Community College, Diane F. Honeycutt Center
- Richmond County Health Department, Dental Clinic
- SAFE Kids Program
- Safety Town
- Scotia Village Retirement Community
- Scotland Cancer Treatment Center
- Scotland Family Counseling Center
- Scotland County Active Healthy Living Partnership
- Scotland County Aging Advisory Council
- Scotland County Area Transit System (SCATS)
- Scotland County Cooperative Extension
- Scotland County 4-H Club
- Scotland County Health Department
- Scotland County Emergency Management
- Scotland County Humane Society
- Scotland County Memorial Library
- Scotland County NAACP Youth Council (NAACPACT-SO)
- Scotland County Parks and Recreation
- Scotland County Partnership for Children and Families
- Scotland County School System
- Scotland County Senior Games
- Scotland County Sheriff's Department
- Scotland County Special Olympics
- Scotland Summer Feeding Program
- Scotland Health Care System
- Scotland Place Civic Center (Senior Center)
- Scots for Youth Program
- Senior Living, Independent
- Smart Start
- Soil Conservation Service
- Southeastern SELF Recovery
- Speech Solutions, Inc.
- St. Andrew's Presbyterian College
- Stroke Support Group
- United Way of Scotland County
- Veteran's Service
- Wagram Recreation/Active Living Center

Note: Many of the community resources can be accessed through the following websites:

- City of Laurinburg:
 - www.laurinburg.org
- Laurinburg, Scotland County Area Chamber of Commerce:
 - www.laurinburgchamber.org
- Scotland County:
 - www.scotlandcounty.org
- Scotland County Department of Public Health:
 - www.scotlandcountyhealth.org
- Scotland Health Care System
 - www.scotlandhealth.org
- Scotland County Parks and Recreation
 - www.scotlandcountyparksandrecreation.org

References and Resources

Appendix F

- American Cancer Society
- American Heart Association - "Heart Disease and Stroke Statistics 2015 Update"
- American Lung Association/American Lung Association of North Carolina
- Centers for Disease Control and Prevention
- Centers for Disease Control and Prevention/National Institutes of Alcohol Abuse and Alcoholism
- Centers for Disease Control and Prevention/Youth Risk Behavior Surveillance System
- Child Health Report Card 2014 and 2016
- City of Laurinburg, North Carolina
- Community Innovations, Inc.
- County Health Rankings and Roadmaps 2016
- Department of Health and Human Services/Substance Abuse and Mental Health Services Administration
- Department of Health and Human Services/Health Resources and Services Administration's (HRSA) Office of Women's Health
- EastPointe – Managing Behavioral Healthcare Services
- Evergreen Behavioral Management, Inc.
- Four County Community Services, Inc.
- Generations Health Services, LLC
- Health Profile of North Carolinians 2015
- Health Resources and Services Administration/Office of Women's Health
- Healthy People 2020 – Leading Health Indicators
- Immunize NC
- Lumber River Area Agency on Aging
- Lumber River Council of Government
- National Cancer Institute
- National Highway Traffic Safety Administration
- National Institutes of Health/National Institute of Allergy and Infectious Diseases
- National Institutes of Health/National Institute on Drug Abuse
- National Institute of Health – Medline Plus
- National Institutes of Health/National Institute of Mental Health
- NC Behavior Risk Factor Surveillance System
- NC Central Cancer Registry, "Scotland County Cancer Profiles", October 2015
- NC Child Advocacy Institute
- NC Cooperative Extension Service – Scotland County
- NC Council for the Hearing Impaired
- NC Department of Commerce – County Profiles 2015 – Scotland County
- NC Department of Crime Control and Public Safety
- NC Department of Environment and Natural Resources
- NC Department of Health and Human Services/Centers for Disease Control and Prevention
- NC Department of Health and Human Services/Division of Services for the Blind
- NC Department of Health and Human Services/Division of Services for the Deaf / Hard of Hearing
- NC Department of Health and Human Services/Injury and Violence Prevention Branch
- NC Department of Health and Human Services/Oral Health Section/Department of Public Health
- NC Department of Insurance/Office of State Fire Marshall
- NC Department of Justice Statistics
- NC Early Hearing Detection and Intervention Program
- NC Early Intervention Services – "Together We Grow"
- NC Electronic Disease Surveillance System, February 2017
- NC Department of Social Services
- NC Highway Safety Resource Center

References and Resources - Continued:

- NC Lead Contacts
- NC Quick Facts from US Census Bureau
- NC School Asthma Survey
- NC State Bureau of Investigation Crime Index 2015, 2016
- NC CATCH
- NC State Center for Health Statistics, 2012, 2013, 2014, 2015
- NC State Center for Health Statistics/Behavior Risk Factor Surveillance System
- NC State Center for Health Statistics/Department of Public Health
- NC State Center for Health Statistics Pocket Guide 2015
- NC State Center for Health Statistics/Pregnancy Risk Assessment Monitoring System
- NC State Demographics – Population estimates
- NC Tobacco Prevention and Control Branch/NCDHHS
- New Beginningz, Inc
- Scotland Cancer Treatment Center
- Scotland Community Health Clinic
- Scotland County Active, Healthy Living Partnership
- Scotland County Chamber of Commerce – Laurinburg, NC
- Scotland County - Child Care Directions
- Scotland County Church Community Services
- Scotland County – City of Laurinburg
- Scotland County Community Health Assessment Survey 2016
- Scotland County – Concerned Citizens for the Homeless Agency
- Scotland County Department of Social Services
- Scotland County – Domestic Violence and Rape Crisis Center
- Scotland County Emergency Medical Service
- Scotland County (Food Bank) – Star of Bethlehem Baptist Church
- Scotland County - Four County Community Services, Inc.
- Scotland County – Habitat for Humanity
- Scotland County Health Department
- Scotland County – Juvenile Crime Prevention Council
- Scotland County – Laurinburg Exchange
- Scotland County – Laurinburg Housing Authority
- Scotland County – Laurinburg Police Department
- Scotland County – Literacy Council
- Scotland County – March of Dimes
- Scotland County – Northview Harvest Outreach Ministries
- Scotland County Parks and Recreation
- Scotland County School System
- Scotland County Sheriff's Department
- Scotland Family Counseling Center
- Scotland Health Care System
- Scotland County Partnership for Children and Families
- Scotland County - The Purcell Clinic Scotland County United Way – 2016 Campaign



Public Health
Prevent. Promote. Protect.



Scotland County Mission Statement: “To protect the Health, Safety, and Welfare of our Citizens and ensure Peace and Dignity within the County.”

Scotland County Health Department Mission Statement: “To promote quality health through education, disease prevention and control, preparedness and environmental protection.”



Scotland Health Care System Mission Statement: “To provide high quality, compassionate healthcare, and to be the community’s health care provider of choice.”