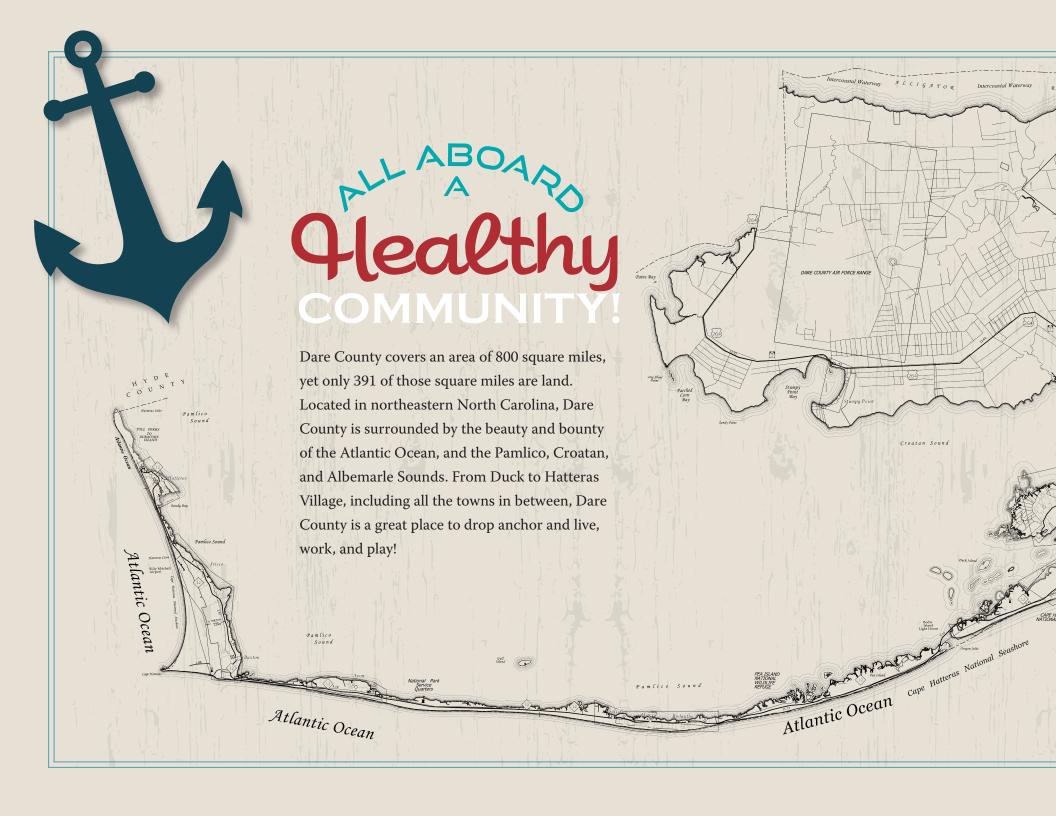
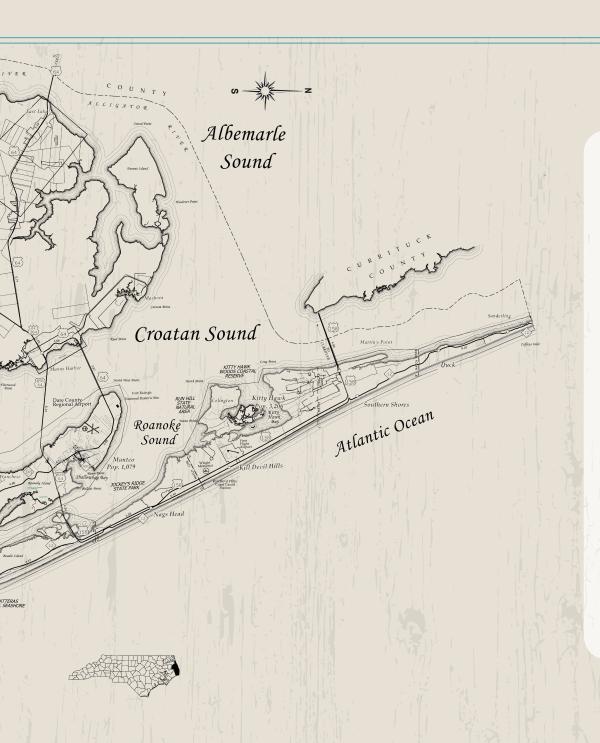




A Summary of the Dare County 2016 Community Health Assessment







Under the umbrella of Healthy Carolinians of the Outer Banks, The Outer Banks
Hospital, Dare County Department of
Health & Human Services, and Vidant
Health System worked collaboratively to conduct the 2016 Dare County Community
Health Assessment.

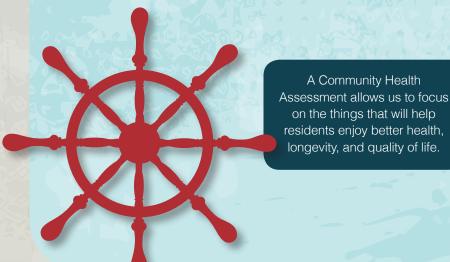
Healthy Carolinians of the Outer Banks (HCOB) is a partnership of health and human service agencies that assist in completing the community health assessment every three years. A full list of HCOB members is listed on the back cover.

Since 2001, HCOB efforts have resulted in:

- Dare CASA, New Horizons, and Port to curb the harmful effects of substance abuse
- The Community Care Clinic of Dare to increase access to healthcare
- Larger milepost markers to decrease motor vehicle injuries
- Miles of Smiles Mobile Dental Services for Children and Missions of Mercy for Adults to provide dental care for all in the community
- Dare Respite Care to provide volunteer respite services for friends and family members caring for aging and/or ill loved ones
- Increased resources for flu vaccination to protect community residents from the flu

Planning Our Voyage Using the Community Health Assessment

A healthy community doesn't just happen. Assessment and education are necessary to identify and remedy areas of concern. Every now and then we lift the anchor and set sail, testing the waters to make sure we are on a true course. Just as the tides and the weather affect the sea, factors continuously change on land, affecting the health of our community and the people who live here. We test the waters and assess these changes every three years by conducting a Community Health Assessment. A Community Health Assessment allows us to focus on the things that will help residents enjoy better health, longevity, and quality of life.





Smooth Seas or Rough Waters

It is true that a smooth sea never made a skillful mariner. As a community, we have sailed through smooth seas as well as rough waters. What's more, we keep getting better at navigating through almost any challenge that comes our way.

Daze County: A healthy place to dzop youz anchoz!

The bounty of our community is everywhere, as far as the eye can see. On many counts, Dare County is a healthy place to live, and our residents are sailing in the right direction when it comes to their personal health. The University of Wisconsin and the Robert Wood Johnson Foundation conduct an annual County Health Rankings Report comparing the 100 counties in North Carolina. According to the 2015 Rankings, out of 100 counties Dare County was ranked:

• 15th for health outcomes (length & quality of life)

• 24th for health factors (health behaviors)



Causes of Death in Daze County

It is important to note that many of the leading causes of death in Dare County have decreased over time, such as cancer, cerebrovascular disease, diabetes, pneumonia, and influenza.

A comparison of the mortality rates for Dare County with NC's leading causes of death from 2002-2006 to 2010-2014 shows that heart disease, pneumonia & influenza, all other unintentional injuries, suicide, and liver disease remain higher than the state rates.

Cause of Death Rank by Descending Overall Age-Adjusted Rate (2010-2014)	Rate in 2002-2006	Rate in 2010-2014	2002-2006 to 2010-2014
Diseases of Heart	156.0	174.0	+11.5%
Cancer	195.7	156.7	-20.0%
Pneumonia & Influenza	60.6	59.8	-1.3%
Chronic Lower Respiratory Diseases	28.8	42.0	+45.8%
All Other Unintentional Injuries	40.1	39.0	-2.7%
Cerebrovascular Disease	44.9	28.2	-37.2%
Alzheimer's Disease	18.4	22.1	+20.1%
Suicide	10.1	16.8	+66.3%
Unintentional Motor Vehicle Injuries	24.0	13.4	-44.2%
Chronic Liver Disease & Cirrhosis	9.6	13.1	+36.5%
Nephritis, Nephrotic Syndrome, & Nephrosis	10.5	11.4	+8.6%
Septicemia	13.6	10.8	-20.6%
Diabetes Mellitus	16.2	7.5	-53.7%
Homicide	3.1	1.8	-41.9%
Acquired Immune Deficiency Syndrome	1.7	1.7	No Change

Table 7. Dare County, Cause of Death Rank by Descending Overall, Age-Adjusted Rate (2002-2006; 2010-2014) Source: North Carolina State Center for Health Statistics (NC SCHS), 2016 County Health Data Book website: http://www.schs.state.nc.us/data/databook/

Further examination of the leading causes of death by age reveal the top 3 causes of death in Dare County.

Rank	Cause of Death in Dare County (2010-2014)		
1	Congenital anomalies (birth defects)		
2	Conditions originating in the perinatal period		
3	Motor vehicle injuries		
1	Other unintentional injuries		
2	Suicide		
3	Motor vehicle injuries		
1	Cancer — all sites		
2	Diseases of the heart		
3	Other unintentional injuries		
1	Cancer — all sites		
2	Diseases of the heart		
3	Chronic lower respiratory diseases		
1	Diseases of the heart		
2	Pneumonia & influenza		
3	Cancer – all sites		
	1 2 3 1 2 3 1 2 3 1 2 3 1 2		

Table 6. Dare County, Ten Leading Causes of Death by County of Residence and Age Group: Ranking, Number of Deaths, and Unadjusted Death Rates per 100,000 Population (2010-2014). Source: North Carolina Center for Health Statistics (NCSCHS), 2016 County Health Data Book website: http://www.schs.state.nc.us/data/databook/

Populations At-Risk in Daze County

Healthy Carolinians of the Outer Banks carefully reviewed the populations at-risk for poor health outcomes and the watch list of concerns identified by the 2016 Dare County Community Health Assessment. The list is made up of items in which Dare County statistics deviate from North Carolina statistics; when trend data shows significant changes over time; and when there are significant age, gender or racial disparities.

2016 Populations At-Risk for Poor Health Outcomes:

- The uninsured and under-insured
- Persons living in poverty
- Minorities
- Males (who generally have poorer health outcomes than females)
- Persons with poor access to transportation
- The elderly

The partnership conducted a prioritization process of the health concerns identified. The HCOB partnership ranked the concerns based on magnitude of the problem, seriousness of the consequences, feasibility of correcting the problem, and overall average of all criteria.

The 2016 Watch List:

Older Adult Population Issues
Substance Abuse
Mental Health
Chronic Diseases
Unintentional Injuries



Charting Our Course

2016-2019 Community Health Improvement Plan

Based on the populations at risk for poor health outcomes, watch list health concerns, and the prioritization process, members of Healthy Carolinians of the Outer Banks set community health improvement priorities resulting in the following:

Continue addressing chronic diseases and healthy weight through the implementation of the **Healthy Living Taskforce**. This group was merged in 2014 and was formerly the Chronic Disease Taskforce & Healthy Weight Taskforce established from the 2013 CHA.

Continue addressing the needs of older adults by maintaining the **Dementia & Alzheimer's Taskforce**. Refocus the **Access to Healthcare Taskforce** to address needs and bring new resources specific to the aging community.

Continue to address substance abuse and mental health by inviting the leadership of the existing community based **Substance Abuse/ Mental Health Taskforces** to join the partnership and share information on a regular reporting cycle with HCOB members.

Continue to address mental health by forming a **Behavioral Health Communication Taskforce** to reduce the stigma attached to seeking help for behavioral health issues.



As we *set sail* toward improved health outcomes for the residents of Dare County, we have identified conditions that are favorable and others with which we need to adjust the sails.

Å Anchors for Good Health

A boat dropping its anchor is grounding and securing itself to a certain spot where it wants to stay put. The anchor symbol is used throughout this profile to feature good, successful, and stable health assets in our community.



The boat is a vessel that takes us somewhere we want to go. A sailboat arrives at its destination through the power of the wind and adjustment of the sails. The sailboat symbol is used to feature areas where we need to make adjustments, so that we can become the healthiest community we can be.



Chronic Disease Prevention & Management



Lanchors for Good Health

We are living longer than ever before. We are meeting these challenges through education and the provision of resources. The following anchors demonstrate the ways in which our community is working towards aging with health and vitality.

- The Dare County has lower rates of diabetes mortality when compared to other parts of the region and North Carolina. The most recent data showed a 53.7% decrease in diabetes related deaths since the last assessment. Dare's cancer mortality rate is 20% lower than the last Health Assessment as well.
- Å Many educational programs have been put into place to teach young residents the needed skills to lead healthier lives and avoid chronic disease. Peer Power, a chronic disease prevention program, is currently available in all Dare County middle and high schools. The program utilizes a peer education model to teach healthy habits to children while prevention is still a possibility.
- The Opportunities to be physically active are endless in Dare County. Our beaches provide the perfect environment to be active during every season. Dare County is also home to 17 public parks, perfect for walking and jogging. Residents have access to six public recreational centers and 15 private Gyms/Sports Clubs/recreational facilities. Additional sidewalks, trails, and multi-use paths are providing residents with more opportunities to be active.
- Dur community has responded to prior assessments, and Chronic Disease Management Programs are now available to help people manage their conditions. Services offered by a variety of community partners include: Chronic Disease Care Management, Diabetes Prevention, Diabetes Education, and Smoking cessation classes.



🔔 Let's Set Sail

HCOB has the Healthy Living Taskforce to navigate toward improved outcomes for obesity, diabetes, cancer, chronic lower respiratory disease, and heart disease. The navigational plan will be based on the following information from the 2016 Dare County Community Health Assessment:

- ⚠ The Mortality rate for heart disease exceeds the North Carolina rate and is increasing among both males and females. Dare County has seen an 11.5% increase in heart disease deaths since the last Community Health Assessment.
- Mhile Dare County's death rate for Chronic Lower Respiratory Disease (CLRD) is lower than the North Carolina rate, Dare County's rate is increasing, especially among females. Since the 2013 Assessment, Dare County has seen a 45.8% increase in CLRD related deaths.
- ⚠ Chronic Liver Disease & Cirrhosis related deaths have increased 36.5% since the last Community Health Assessment was conducted. Participants in the survey reported having a diagnosis of high blood pressure (43.6%), high cholesterol (39.3%), and overweight or obese (32.8%).

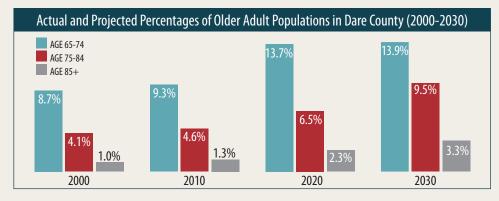




Oldez Adult Population Issues

Å Anchors for Good Health

We are fortunate that Dare County's beaches, volunteer opportunities, and slower pace appeal to people looking for a place to retire. The proportion of every age group age 65 and older in Dare County is expected to increase between 2010 and 2030. We consider our senior population a vital part of our healthy community – anchors for good health indeed!



- Recent assessments pointed to the need for respite care for family members caring for aging loved ones. Dare Respite Care was formed in 2006 and coordinates volunteers who provide brief/periodic breaks for those who are caring for a loved one.
- Activities and services for adults are offered at three centers strategically located throughout Dare County. Facilities include the Thomas A. Baum Senior Center in Kill Devil Hills, the Dare County Center in Manteo, and the Fessenden Center in Buxton.
- A Falls-Prevention Coalition was formed in 2012 to help reduce the risks and harm associated with falling among elderly residents.
- In 2014 the HCOB Dementia & Alzheimer's Taskforce launched the program Here with You!, offering relationships between people who care and people who are providing care. It links caregivers with a trained mentor, giving individualized support during their times of need.



Let's Set Sail

Our Community is growing, and as we grow, it is important that we are ready to accommodate the needs of our older adult population. The Dementia & Alzheimer's Taskforce will continue to explore opportunities to enhance medical care for individuals with Alzheimer's. The newly-formed Friendly Aging Taskforce will develop a strategic plan for facilities to accommodate this growing population. This course for action is based on the following information uncovered by the Community Health Assessment:

- Currently, there is only one state-licensed adult care home, Spring Arbor of the Outer Banks, with a total of 102 beds. There is also only one state-licensed nursing facility, Peak Resources, in Nags Head, with a total of 126 beds.
- The reported Dare County death rate from flu and pneumonia is higher than the state rate.
- Alzheimer's is the 7th leading cause of mortality in Dare County, and the death rate has increased by 20.1% since the 2013 Community Health Assessment.



Mental 9lealth & Substance Abuse

Å Anchors for Good Health

Much has been accomplished in the area of substance abuse and mental health. Just 10 years ago, there was little in place to help local residents in this area. The strides made in preventing and treating substance abuse seem to have a domino effect, with one good anchor leading to another!

- In 2002, the Community Health Needs Assessment highlighted substance abuse as our perceived number one health concern. As a result, the Substance Abuse Taskforce was formed. The Dare Coalition Against Substance Abuse and the Substance Abuse Demonstration Project (now known as New Horizons) were programs developed as a result of taskforce work.
- New Horizons, operating since the summer of 2008, now has expanded services to include substance abuse counseling, mental health, and intensive outpatient care. Gap funding has been made available by Dare County to ensure everyone in need receives substance abuse services, regardless of their ability to pay.
- Prevention Education is now abundant in our community and we are starting to see a cultural shift in youth attitudes and behaviors associated with substance abuse.
- Tele-psychiatry services are now available in the Emergency Departments of several regional hospitals, including The Outer Banks Hospital.
- The Outer Banks Physicians' Coordinating Council on Prescription Drug Abuse was formed in 2012. Over 60 local physicians have pledged to make a positive difference in the area of prescription drug abuse.



Dare County has made tremendous strides in providing additional resources and services in the area of mental health and substance abuse. With all the forward motion, HCOB recognizes that now is not the time to lower the sails. We still have work to do; to ensure that residents receive adequate mental health and substance abuse care, and that the cultural shift among youth continues on a course that favors abstaining from substance abuse and use. The following information from the Community Health Assessment puts wind in our sails to continue towards improved health outcomes.

- Dare County has a higher incidence of alcohol-related vehicular crashes when compared to the rest of the region and North Carolina. The 2016 Community Health Assessment revealed an average of 7.8% crashes in Dare County to be alcohol related, compared to 5.2% for North Carolina and 6% across the region.
- Substance Abuse and Mental Health were the most frequently cited health problems in the community during focus groups. The survey also indicated that respondents felt the community needed more information about substance abuse prevention.
- Outer Banks Hospital Emergency Department discharges related to mental, behavioral, and neurological diagnoses accounted for almost 4% of all discharges over the three year period inv

4% of all discharges over the three year period investigated; while Inpatient discharges related to mental health concerns accounted for a little over 7% of all discharges.

Additionally, Dare County's suicide mortality rate significantly exceeds the state rate and is increasing, particularly among males.

Approximately

14%
of survey participants
reported not knowing
where to seek help for
a mental health or
substance abuse problem.



Good health is a journey, join us!

We invite you to join our crew. Working together, members of our community have always achieved great outcomes, and we will continue to reach new destinations of health and quality of life for all who live, work, and play in our community. This is an invitation from Healthy Carolinians of the Outer Banks to join us in our quest for a healthier community.

Get involved by joining a taskforce today! Visit darenc.com/hcob to sign up for a taskforce or contact your local HCOB Coordinator at 252.475.5079.

Acknowledgements

This report is the culmination of a tremendous effort by the members of Healthy Carolinians of the Outer Banks Partnership (HCOB), whose dedicated focus on and support for the health and well-being of the residents of Dare County is indeed remarkable:

HCOB Executive Committee

Brandi Rheubottom, (Chair) Director Dare County Older Adult Services Dianne Denny, (Vice Chair) Spring Arbor Assisted Living

Denise DePedro, (CHA Coordinator) The Outer Banks Hospital Kelly Nettnin, (CHA Coordinator) Dare County Department of Health & Human Services

Amy Montgomery, The Outer Banks Hospital Sheila Davies, Dare County Department of Health & Human Services

Laura Willingham, (HCOB Coordinator) Dare County Department of Health & Human Services

HCOB Partnership

Beulah Ashby, Dare County Water Department Carmen Hooker Odom, Community Member Catisha Bryant, Dare County Dept. of Health & Human Services Deb McDonald, Outer Banks Relief Foundation Emily Holub, Children and Youth Partnership Dr. Ernest "Ernie" Larkin, The Outer Banks Hospital Gail Hutchison, Dare County Sheriff's Office Gail Sonnesso, GEM Day Services Ginger Candelora, Mano Al Hermano Jay Burrus, Dare County Dept. of Health & Human Services Jennifer Allen, Sentara Kitty Hawk Jennifer Schwartzenberg, The Outer Banks Hospital

Jenniffer Albanese, Interfaith Community Outreach, Inc. John Donlan, Dare County Schools

Karen Brown, Outer Banks Chamber of Commerce

Kim Stetson, Outer Banks Wedding Association Linda Palombo, The Outer Banks Hospital Michael Lewis, Outer Banks Hotline

Melanie Corprew, Dare County Dept. of Health & Human Services

Michelle Decker, New Horizons/PORT Human Services Patty McKenna, Community Services Collaborative

Richard Bruce, Pigmans BBQ

Rick Gray, Community Care Clinic of Dare County

Dr. Roger Lever, The Outer Banks Hospital Ronnie Sloan, The Outer Banks Hospital

Roxana Ballinger Dare County Dept. of Health & Human Services

Skeeter Sawyer, HCOB Past Chair Tess Judge, Community Member

Tim Shearin, Dare County Dept. of Health & Human Services

Timothy Baker, Community Member

Support of this document was also provided by many other entities. The Partnership greatly appreciates the help of our vital community stakeholders.



