

# 2025 COMMUNITY NEEDS ASSESESSMENT

Clinical Care, Oral Health,  
Mental Health, and  
Substance Use

March 20, 2025



A close-up photograph of a hand placing a white die on top of a row of five other white dice. The dice are arranged to spell out the word 'GREET'. The background is a soft-focus green.

# Quick Connection

*Speedy Meet, Greet, and Share!*

**G R E E T**

**As you glance through today's agenda, what's one topic you're looking forward to hearing more about?**

**1 MINUTE**



# CNA UPDATE & FEEDBACK

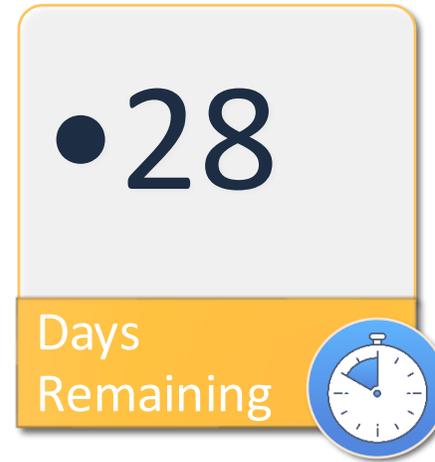
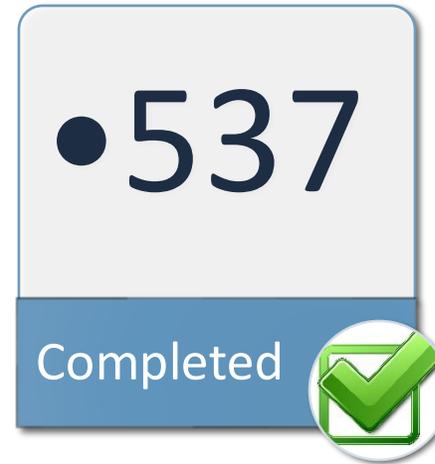
---

Jessica Grant  
**Executive Director**  
Healthy Cabarrus

# Community Survey is *LIVE!*



<https://survey.alchemer.com/s3/8162936/CCCC-Survey>



# Session 3

## *Feedback and Follow-up*

Overall, how satisfied are you with today's meeting?

4.57



What aspects of the meeting did you find most useful or effective?



“Data related to people living outside of Cabarrus that work here.”

“Unique topics I don’t hear much about.”

“Virtual option due to weather’

“Handouts”

“Data, data, data!”

“Park and greenways info”

“Health and STI data”

“Clear graphs”

“Knowledgeable presenters”

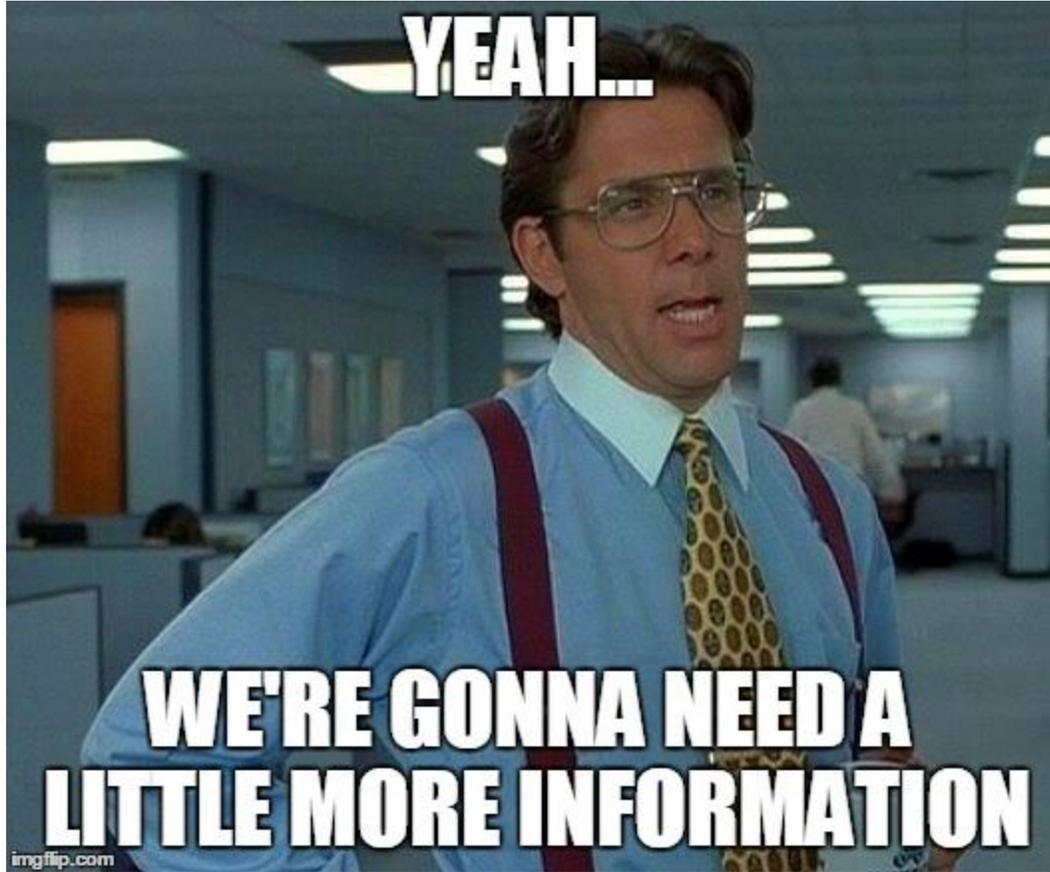
“Flexibility”

“None”; N/A

“Larger room”;  
“More space”

“More time”

“Difficult to hear virtual  
presenters/participants”



- Aging Workforce
- Commuters
- STI Education in Public Schools
- Food Insecurity and Chronic Conditions



# ADULT HEALTH AND CLINICAL CARE ACCESS

---

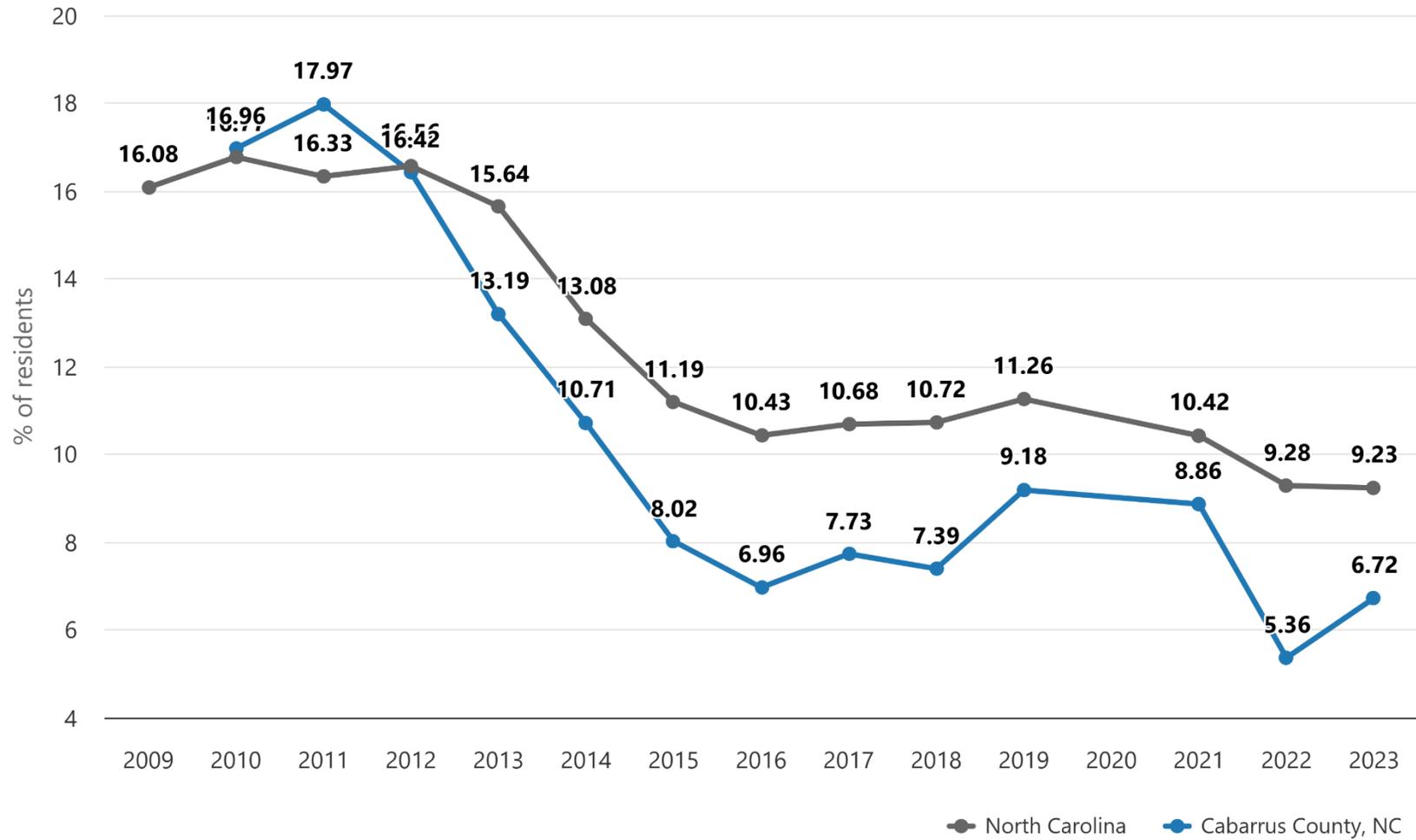
Asha Rodriguez, MBA

**Facility Executive**

Atrium Health Cabarrus

# Uninsured rate

North Carolina and comparison

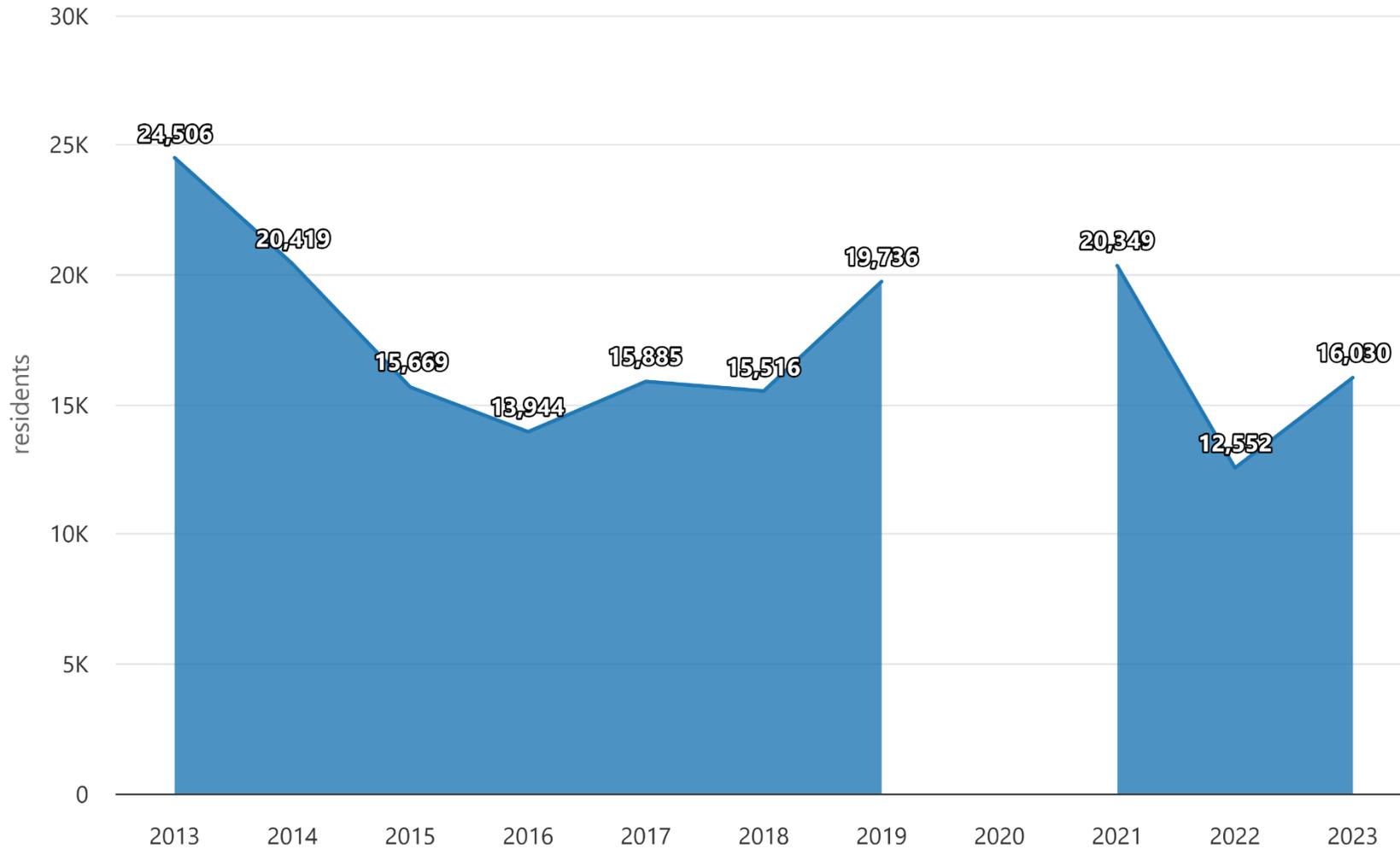


Created on Metopio | metop.io | Data source: U.S. Census Bureau: American Community Survey (ACS) (Tables B27001/C27001)

Uninsured rate: Percent of residents without health insurance (at the time of the survey).

# Uninsured residents

Cabarrus County, NC

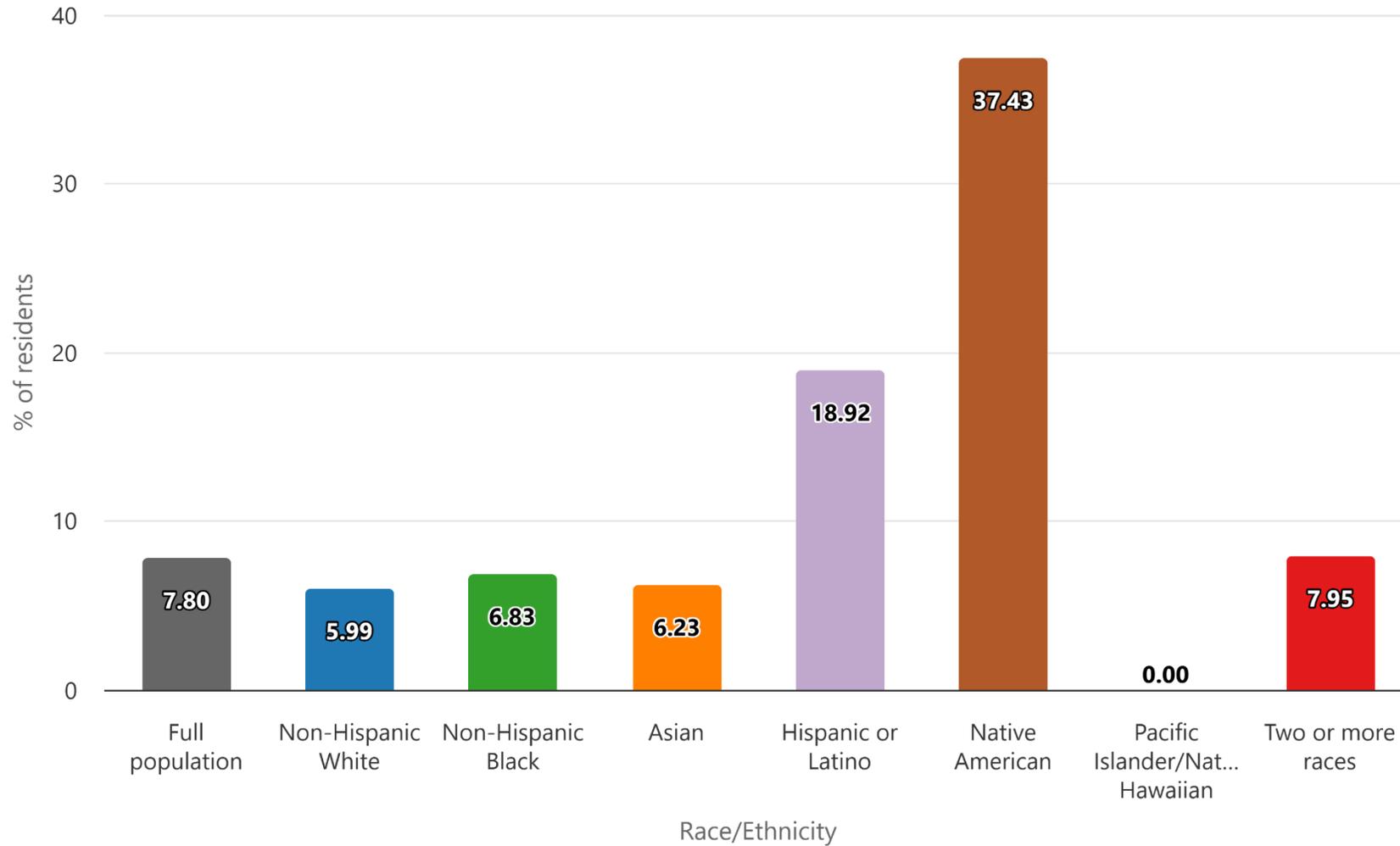


Created on Metopio | metop.io | Data source: U.S. Census Bureau: American Community Survey (ACS) (Tables B27001/C27001)

**Uninsured residents:** Number of residents without health insurance.

# Uninsured rate by Race/Ethnicity, Cabarrus County, NC

2019-2023

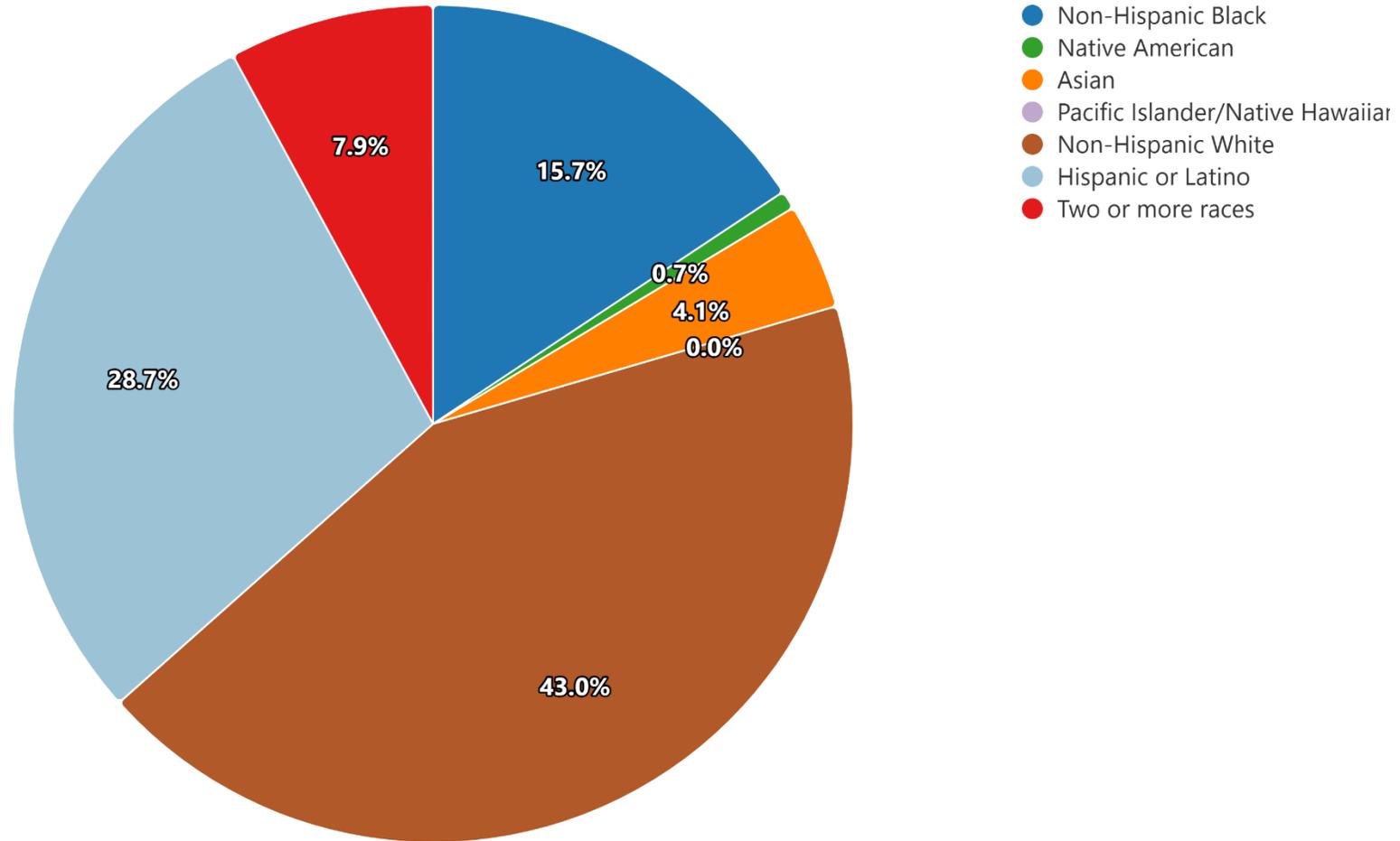


Created on Metopio | metop.io | Data source: U.S. Census Bureau: American Community Survey (ACS) (Tables B27001/C27001)

Uninsured rate: Percent of residents without health insurance (at the time of the survey).

# Uninsured residents by Race/Ethnicity

Cabarrus County, NC, 2019-2023

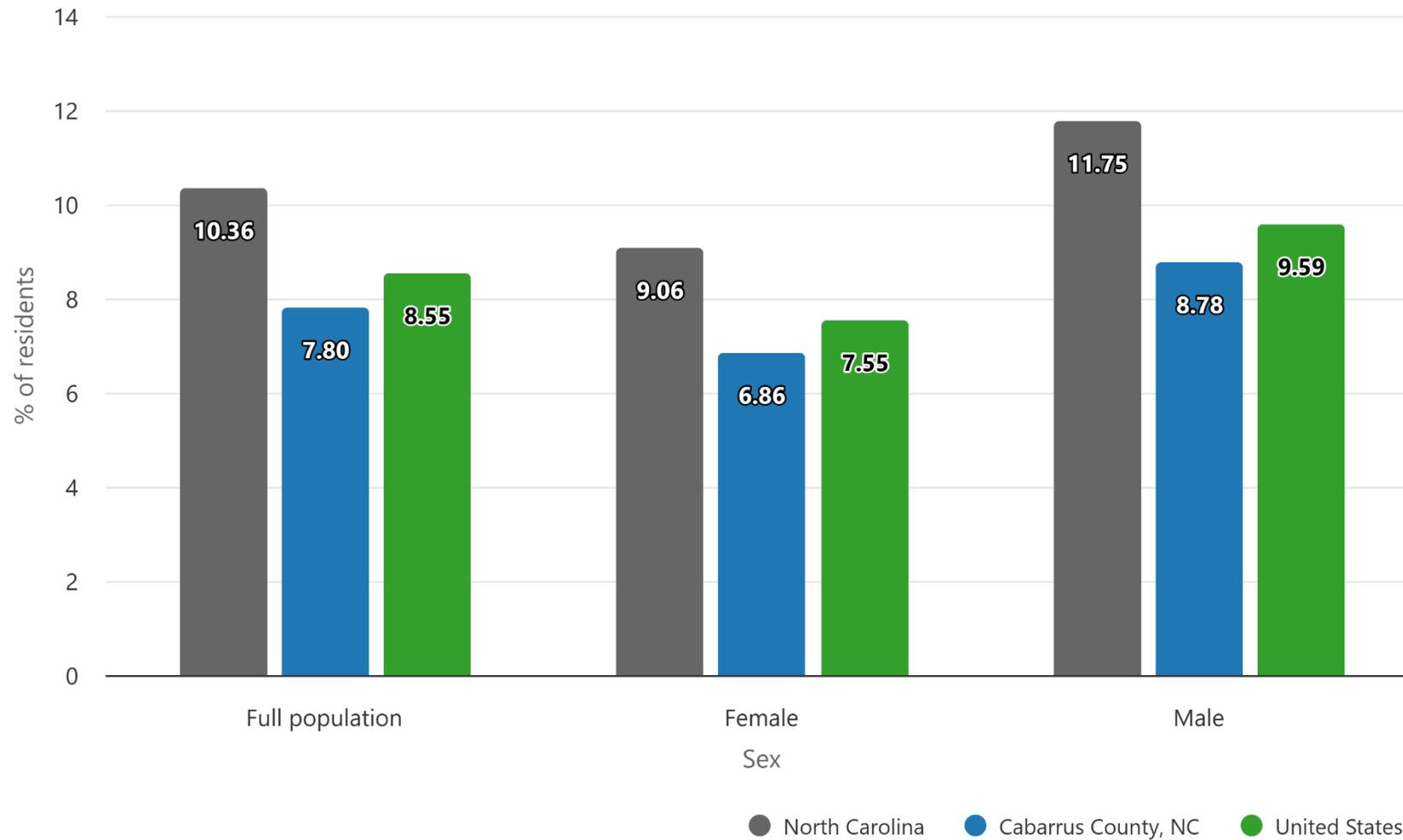


Created on Metopio | metop.io | Data source: U.S. Census Bureau: American Community Survey (ACS) (Tables B27001/C27001)

Uninsured residents: Number of residents without health insurance.

# Uninsured rate by Sex, 2019-2023

North Carolina and comparison

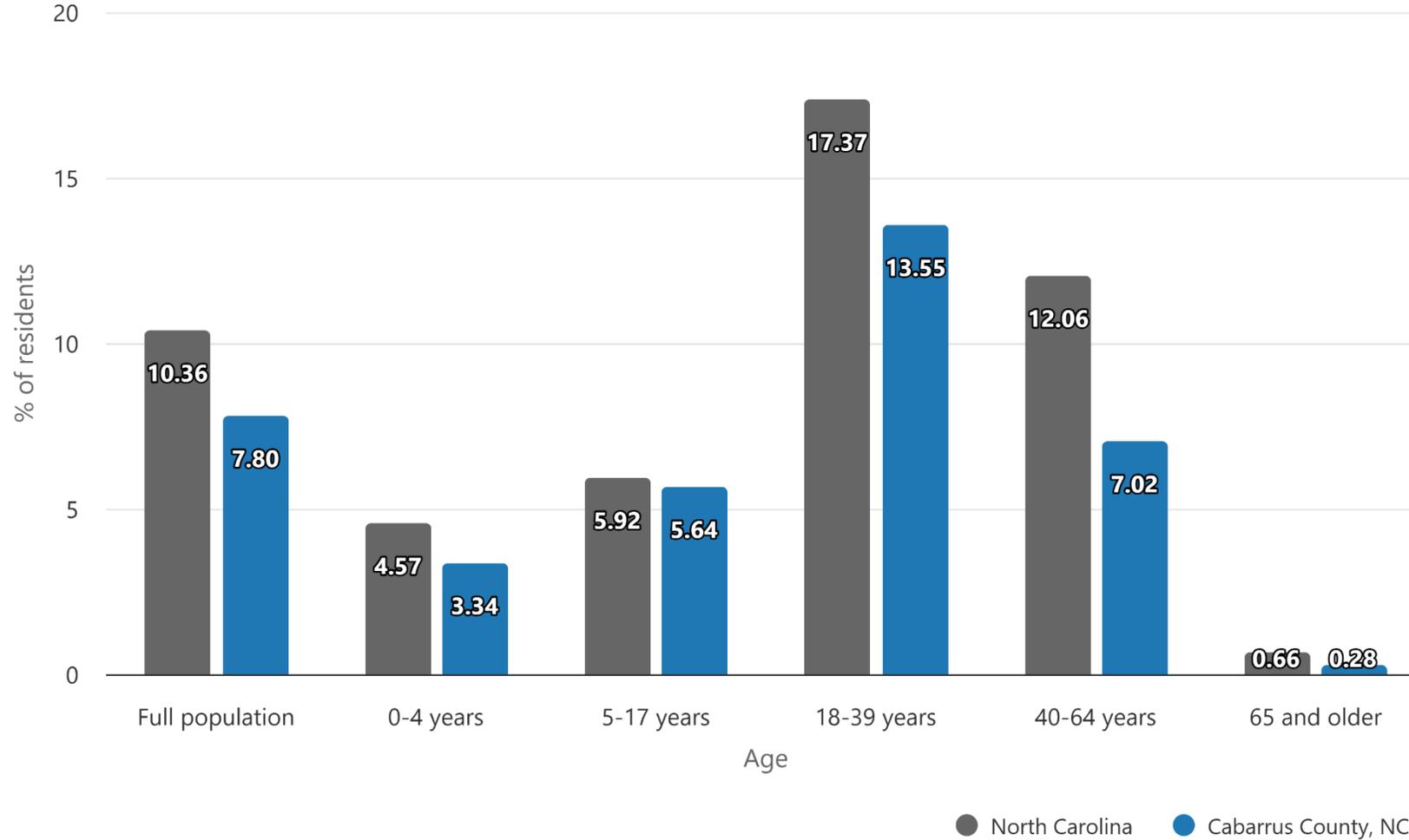


Created on Metopio | [metop.io/i/rn2ptcrf](https://metop.io/i/rn2ptcrf) | Data source: U.S. Census Bureau: American Community Survey (ACS) (Tables B27001/C27001)

Uninsured rate: Percent of residents without health insurance (at the time of the survey).

# Uninsured rate by Age, 2019-2023

North Carolina and comparison

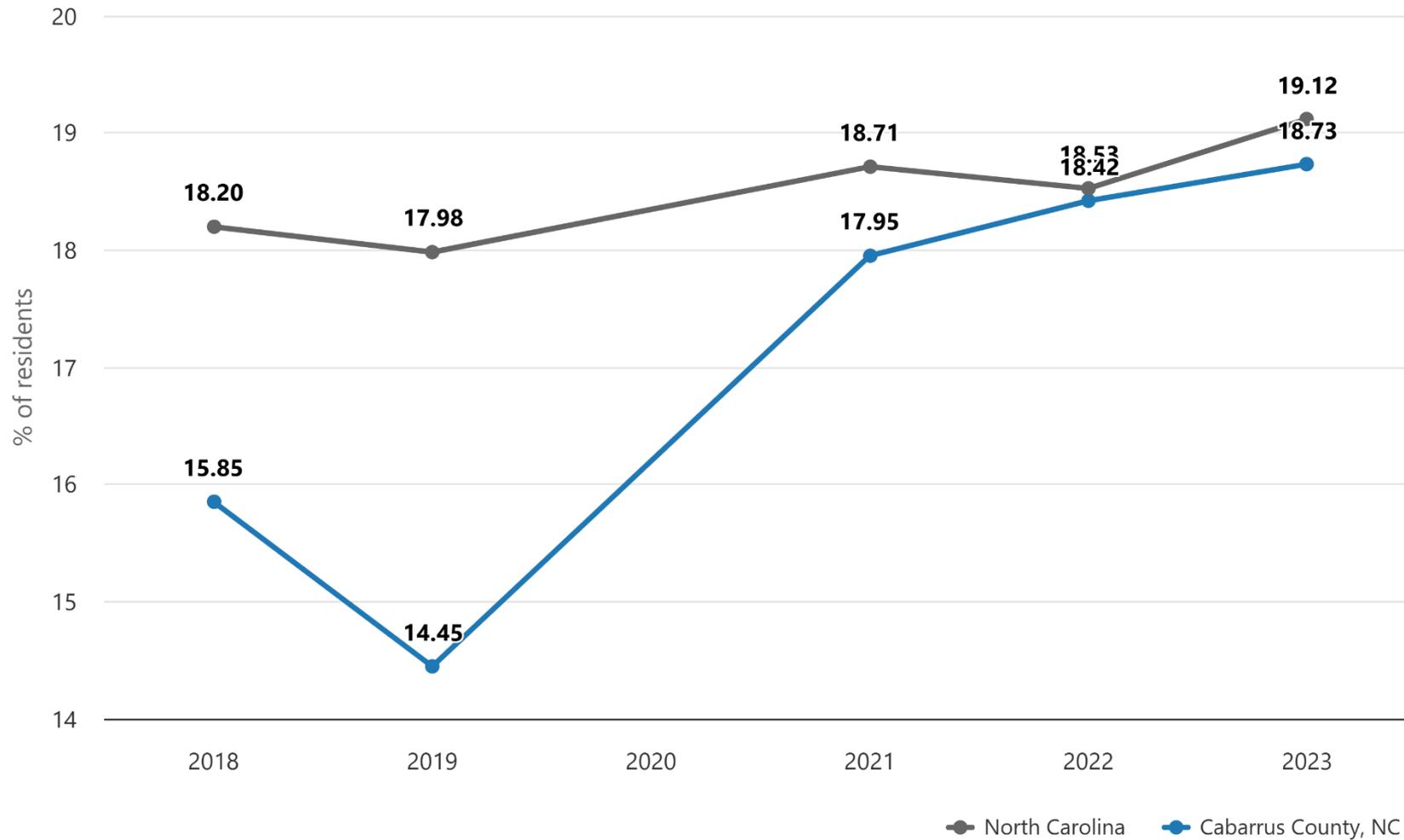


Created on Metopio | [metop.io/i/ou9tjxth](https://metop.io/i/ou9tjxth) | Data source: U.S. Census Bureau: American Community Survey (ACS) (Tables B27001/C27001)

Uninsured rate: Percent of residents without health insurance (at the time of the survey).

# Medicaid coverage

North Carolina and comparison

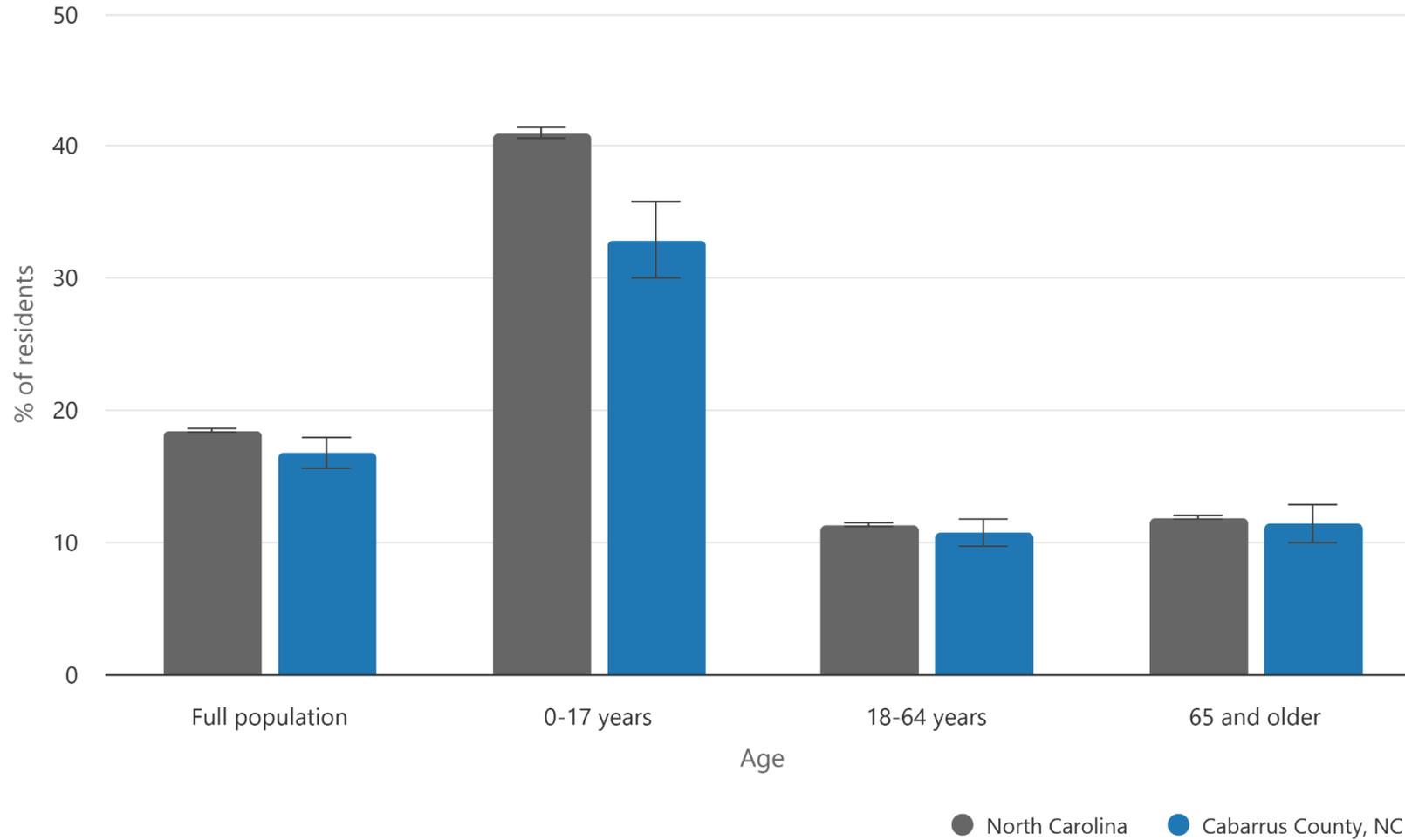


Created on Metopio | metop.io | Data source: U.S. Census Bureau: American Community Survey (ACS) (Tables S2704, S2701, and B27010)

**Medicaid coverage:** Percent of residents covered by Medicaid, a state-administered health insurance program for residents meeting certain income limits and other eligibility standards that vary by state.

# Medicaid coverage by Age, 2019-2023

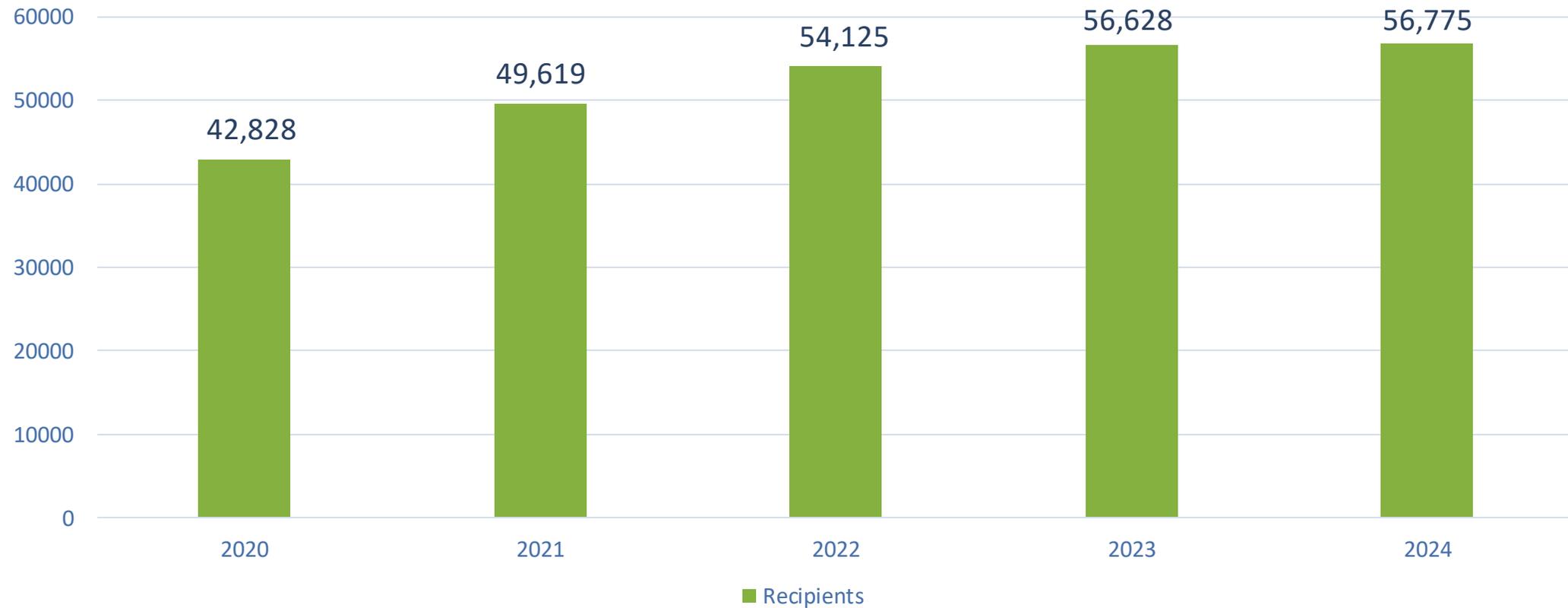
North Carolina and comparison



Created on Metopio | metop.io | Data source: U.S. Census Bureau: American Community Survey (ACS) (Tables S2704, S2701, and B27010)

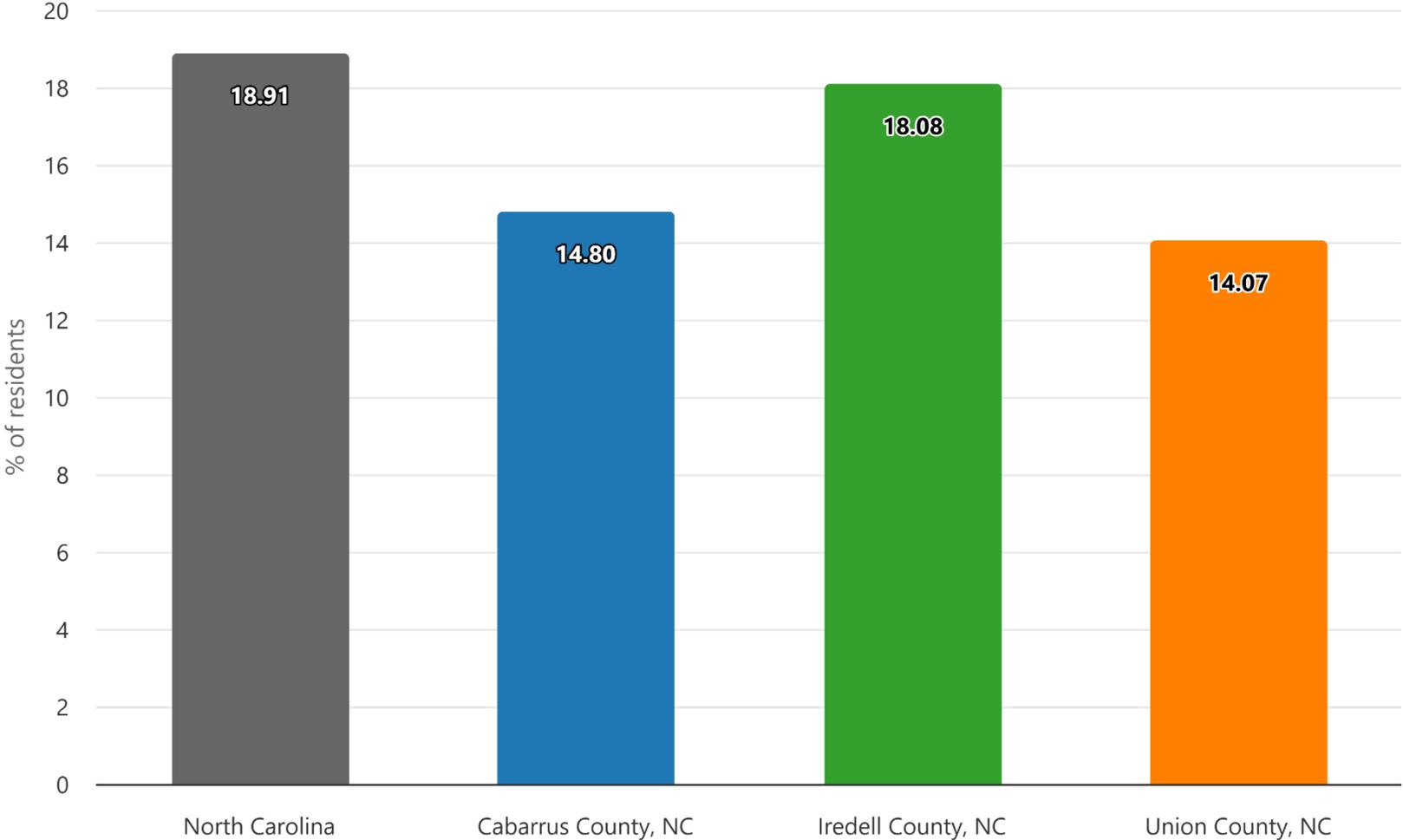
**Medicaid coverage:** Percent of residents covered by Medicaid, a state-administered health insurance program for residents meeting certain income limits and other eligibility standards that vary by state.

# Avg. # of Medicaid Recipients Cabarrus



# Medicare coverage, 2019-2023

North Carolina and comparison



Created on Metopio | metop.io | Data source: U.S. Census Bureau: American Community Survey (ACS) (Tables S2704, S2701, and B27010)

Medicare coverage: Percent of residents covered by Medicare, the federal health insurance system for seniors and some people with disabilities.

# Defining Medicare

---

## Part A

- Covers inpatient care, including care received while in a hospital, a skilled nursing facility, and, in limited circumstances, at home.

## Part B

- Covers most of your routine, everyday care essential medical services and supplies, including doctor visits, outpatient care, preventive services, durable medical equipment, mental health services, etc.

## Part C (Medicare Advantage)

- Offered by Medicare-approved private companies. Must provide the same coverage as Original Medicare, including hospital insurance (Part A) and medical insurance (Part B). In addition, Medicare Advantage plans often include additional benefits such as prescription drug coverage, vision care, hearing care, and dental care.

## Part D

- Helps individuals with the costs of either brand name or generic brand prescriptions.

# Insights Into Aging in North Carolina

## Population Estimates and Projections

### POPULATION OVERVIEW



In 2024, there were **4,503 centenarians**. This population is projected to **increase to 16,804 by 2050**, a 273% change.

In 2024, **88 counties** have more people above the age of 60 and older than under the age of 18.



	2024		2050		% Change 2024-2050
	#	%	#	%	
<b>Total</b>	10,984,106		14,241,032		30%
<b>0-17</b>	2,277,028	21%	2,841,892	20%	25%
<b>18-44</b>	3,950,947	36%	4,769,622	34%	21%
<b>44-59</b>	2,074,345	19%	2,763,692	19%	33%
<b>60+</b>	2,681,786	24%	3,865,826	27%	44%
<b>65+</b>	1,993,441	18%	3,038,133	21%	52%
<b>85+</b>	210,203	2%	529,204	4%	152%

## Demographic Snapshot (2022)

NC ranks **9th** in total population nationally. NC also ranks **9th** in the population of those age 65 and older.



An estimated **47,600** people 60 and older migrated from another state or abroad to North Carolina.



By 2031, the number of individuals aged 65 and older is **expected to surpass** the population under 18 years old.



Adults aged 85 and older are **projected to experience the fastest growth in the state** over the next 20 years.



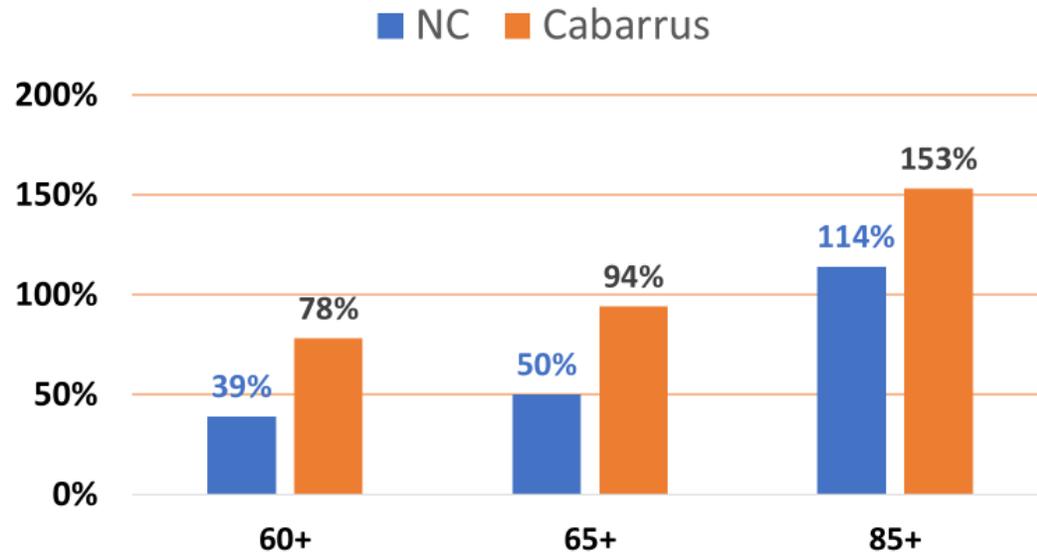
# CABARRUS COUNTY AGING PROFILE, 2022

## Projected Population Change, 2022-2042

Age	2022		2042		% Change 2022-2042
	County #	County %	County #	County %	
<b>Total</b>	238,599		335,736		41%
<b>0-17</b>	53,641	22%	73,500	22%	37%
<b>18-44</b>	85,619	36%	113,135	34%	32%
<b>45-59</b>	51,813	22%	65,553	20%	27%
<b>60+</b>	47,526	20%	83,548	25%	76%
<b>65+</b>	33,685	14%	63,960	19%	90%
<b>85+</b>	3,166	1%	8,118	2%	156%

# Our “Why?”

## Growth in the Next 20 Years: 85 and Better



## Impacts:

- Increased prevalence of functional limitations, frailty, chronic diseases
- More demand for long-term support and services

## Now Seeing:

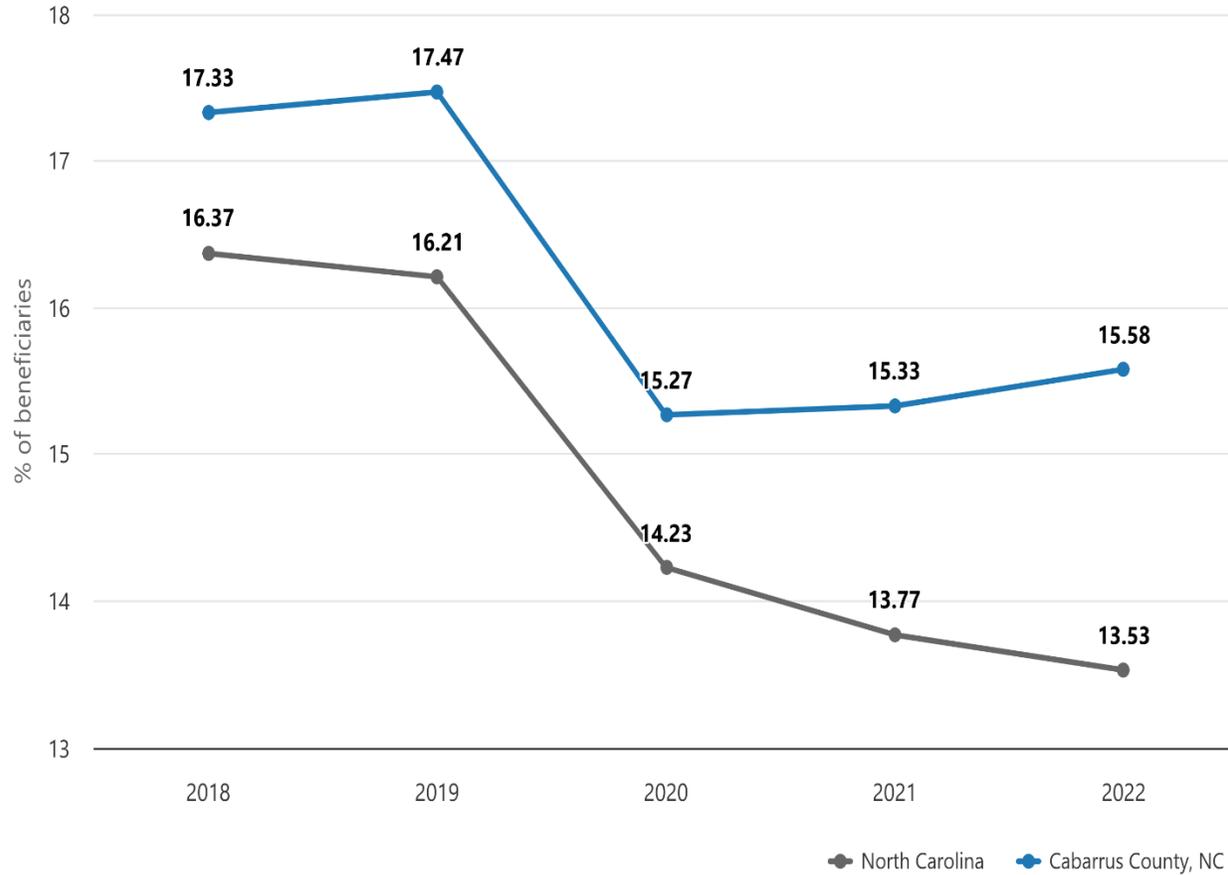
- Aging and older adults (50 and better) were identified as an emerging issue in the 2023 intra-cycle Community Health Needs Assessment
- Largest volume and % of Medicare discharges
- Largest volume and % of geriatric ED patients in any ED in GCR
- Limited availability of post-acute care options for 50 and better population care

## Top 3 causes of death in Cabarrus County

- Alzheimer's/dementia
- Cardiac
- Cancer

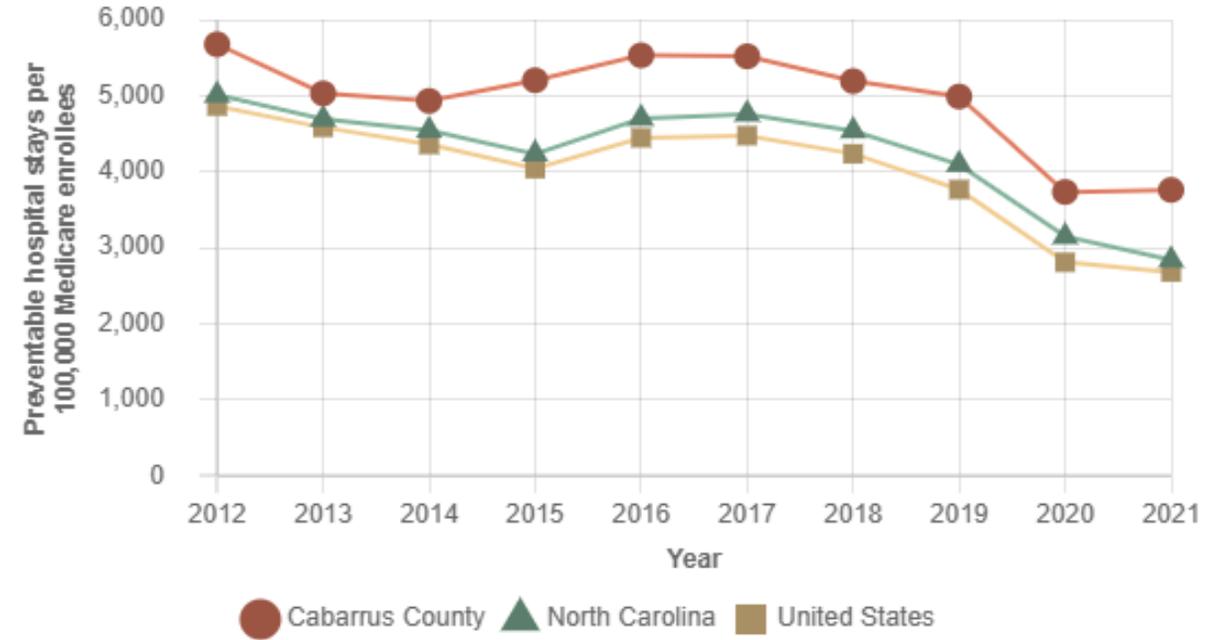
## Medicare inpatient utilization

North Carolina and comparison



## Preventable Hospital Stays in Cabarrus County, NC

Cabarrus County is getting better for this measure.



<https://www.countyhealthrankings.org/health-data/north-carolina/cabarrus?year=2024>

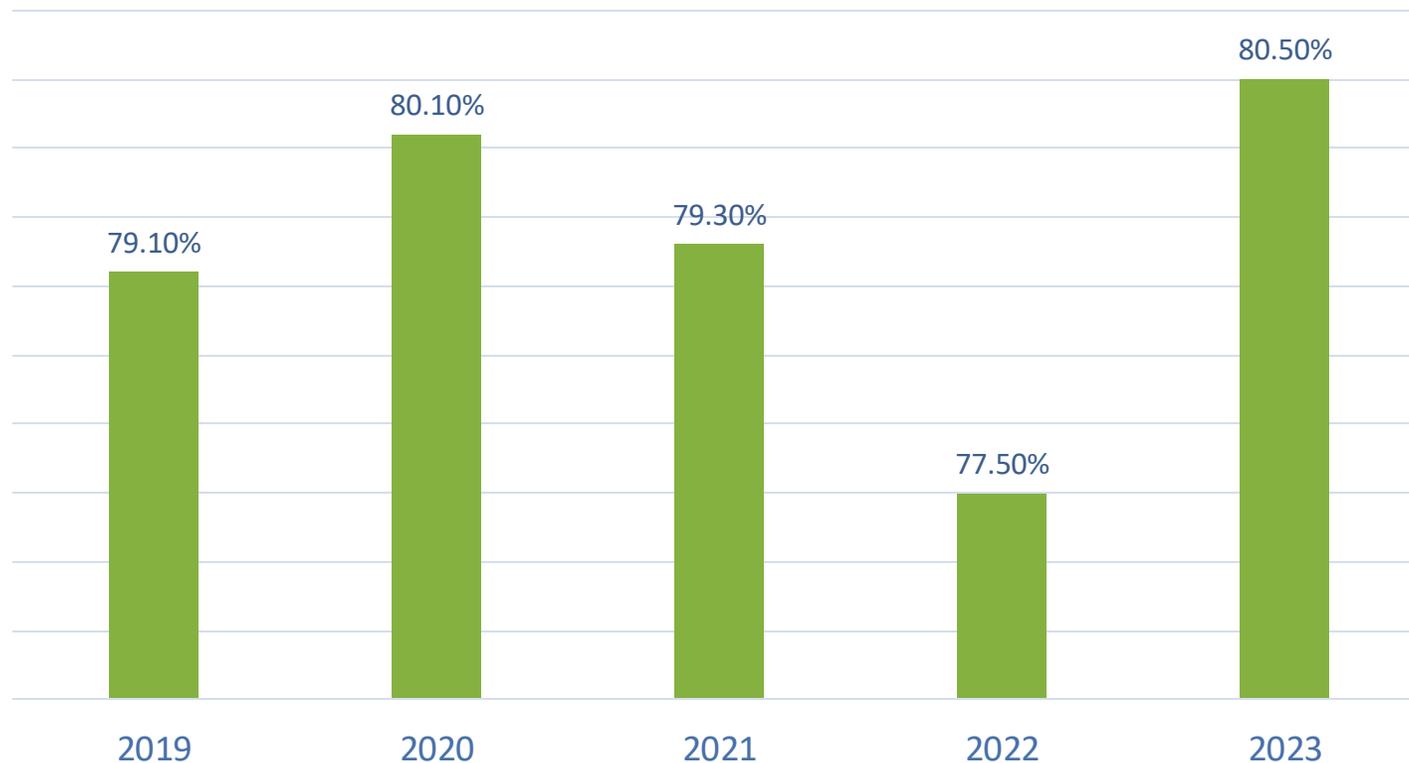
# Preventative Health Screenings

## North Carolina

### BRFSS Survey Results

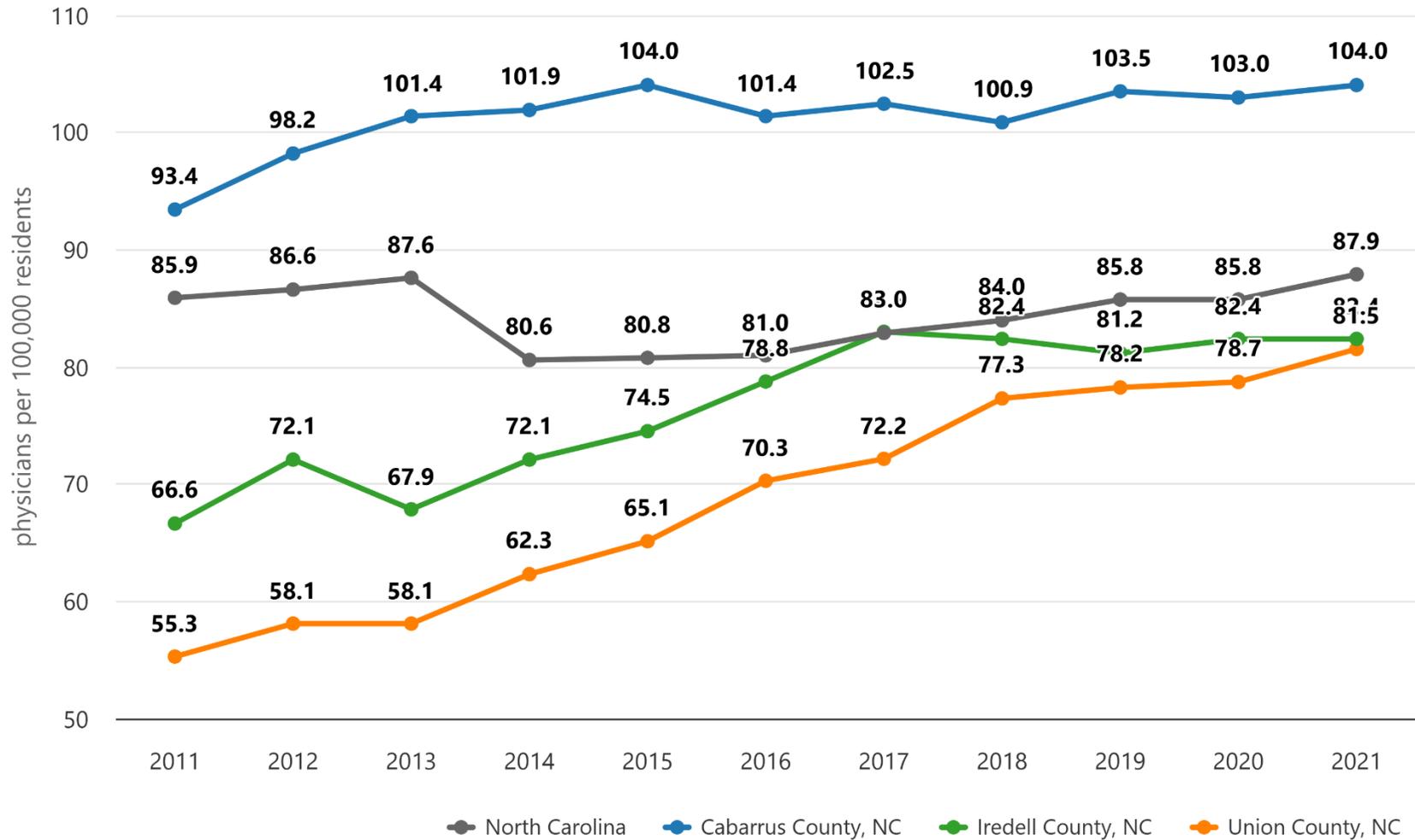
Respondents were asked “About how long has it been since you last visited a doctor for a routine checkup?”

Within the past year (<12 months)



# Primary care providers (PCP) per capita

North Carolina and comparison

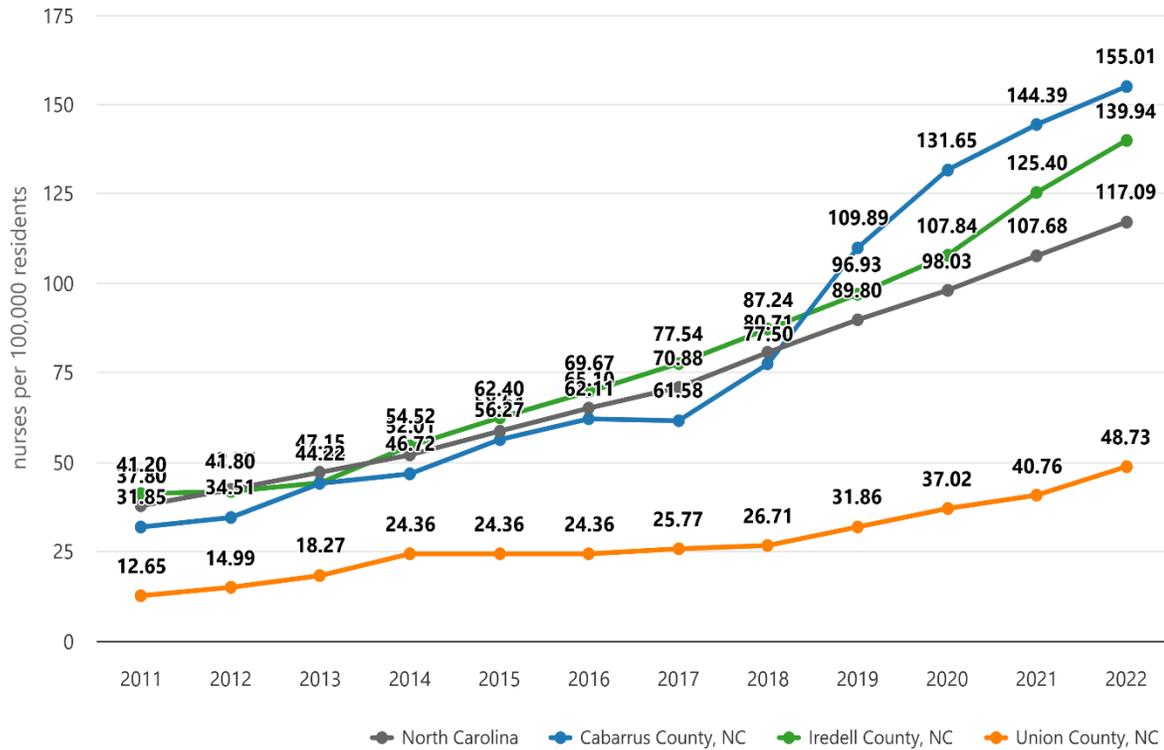


Created on Metopio | metop.io | Data source: Health Resources & Services Administration: Area Health Resources Files (County and State level data)

Primary care providers (PCP) per capita: Number of physicians in primary care (general practice, internal medicine, obstetrics and gynecology, or pediatrics) per 100,000 residents. Includes hospital residents. Excludes federal physicians and physicians age 75 or older.

## Nurse practitioners per capita

North Carolina and comparison

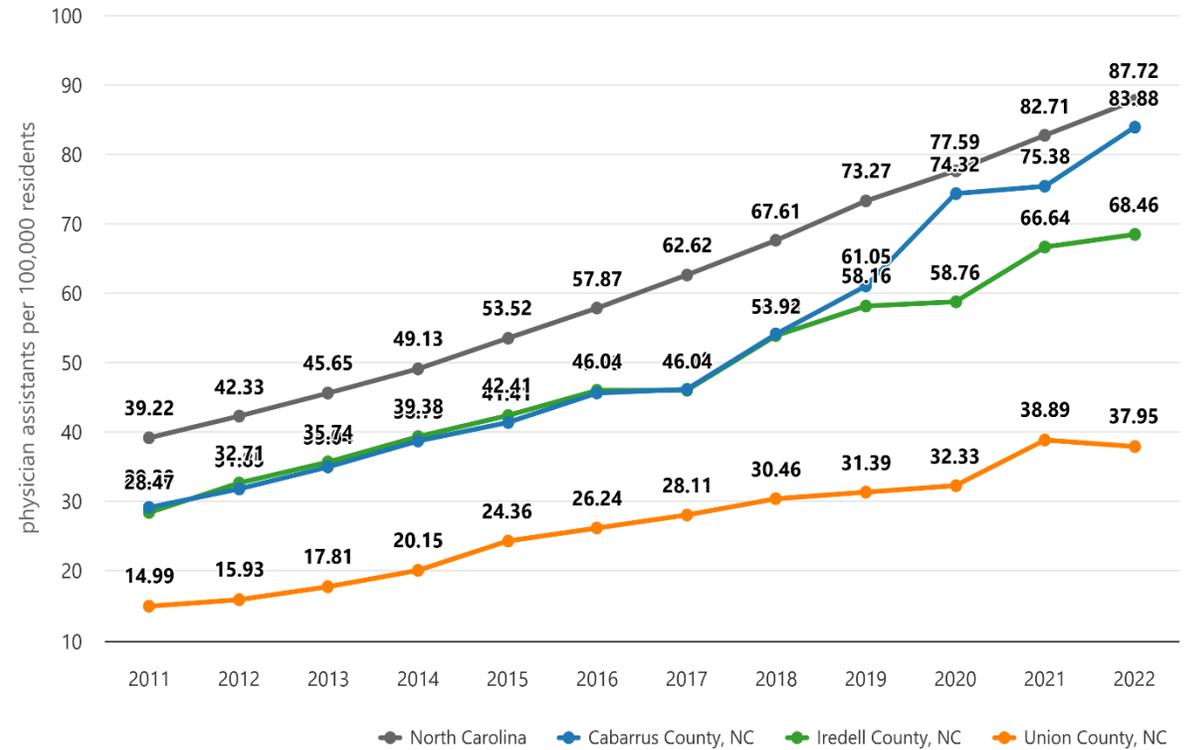


Created on Metopio | metop.io | Data source: Health Resources & Services Administration: Area Health Resources Files (CMS NPI file via Area Health Resources File)

**Nurse practitioners per capita:** Nurse practitioners per 100,000 residents. A nurse practitioner is a registered nurse provider with a graduate degree in nursing who has completed additional training beyond basic nursing education and provides primary health care services in accordance with state nurse practice laws or statutes. Nurse practitioner specialists include, family nurse practitioners, gerontological nurse practitioners, pediatric nurse practitioners, obstetric-gynecologic nurse practitioners, and school nurse practitioners.

## Physician assistants per capita

North Carolina and comparison



Created on Metopio | metop.io | Data source: Health Resources & Services Administration: Area Health Resources Files (CMS NPI file via Area Health Resources File)

**Physician assistants per capita:** Number of physician assistants per 100,000 residents. Physician assistants are formally trained to perform many of the routine, time-consuming tasks a physician can do. They take medical histories, perform physical exams, order lab tests and x-rays, and give inoculations. Most states require that they work under the supervision of a physician.

# Emergency Department (ED) Utilization

## *Atrium Health Cabarrus*

Emergency Department	Age	2023	2024	2025 (Jan-Feb)
<b>Cabarrus</b>	Pediatric (0-17)	9,385	10,242	1,909
	Adult (18-65)	37,788	41,051	6,770
	Geriatric (66+)	18,721	19,780	3,335
	<b>Total</b>	<b>65,894</b>	<b>71,073</b>	<b>12,014</b>
<b>Kannapolis</b>	Pediatric (0-17)	7,626	7700	1,403
	Adult (18-65)	22,658	22,536	3,995
	Geriatric (66+)	4,770	4,610	827
	<b>Total</b>	<b>35,054</b>	<b>34,846</b>	<b>6,226</b>

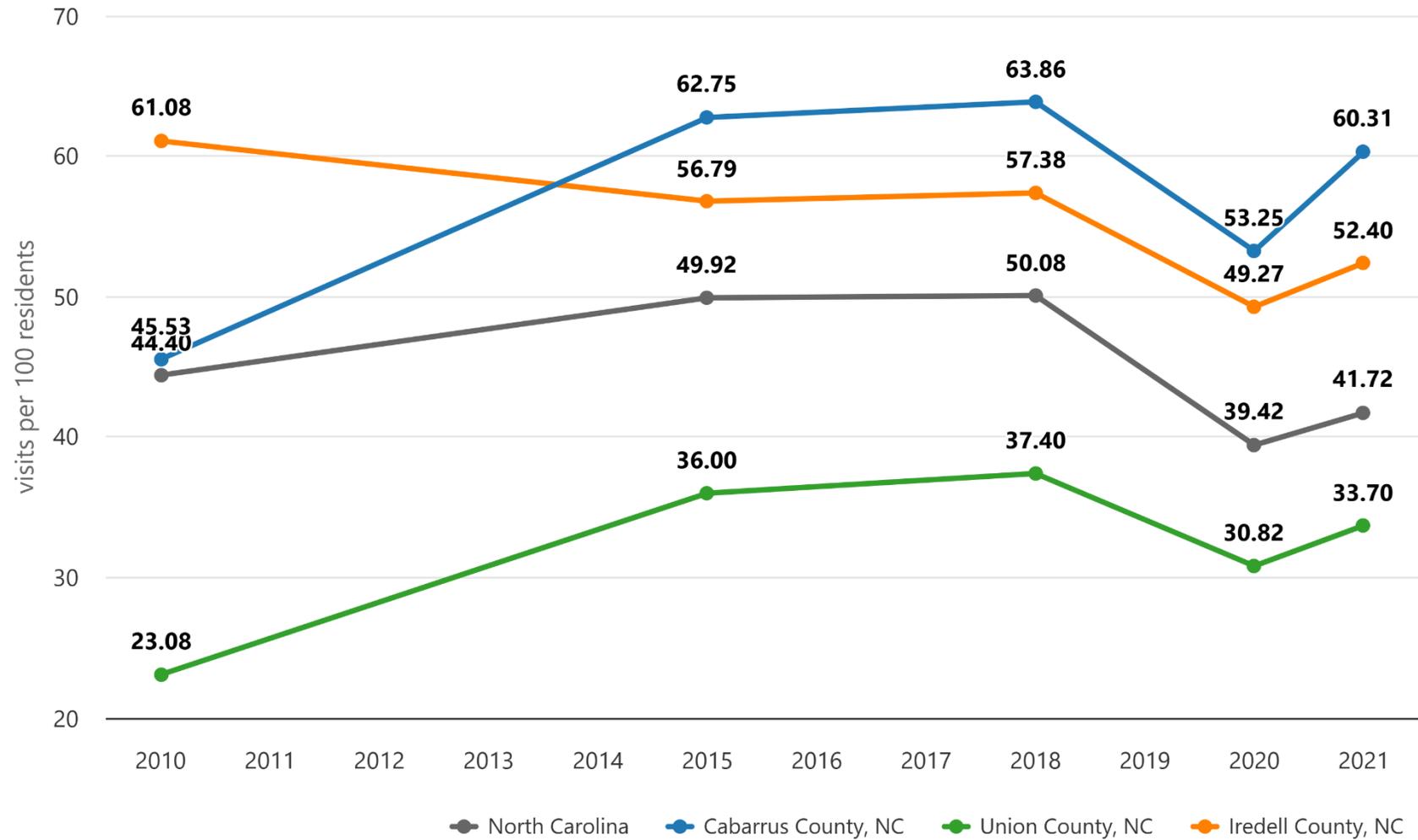
# Emergency Department (ED) Utilization

## *Atrium Health Cabarrus*

Emergency Department	Age	2023	2024	2025 (Jan-Feb)
<b>Harrisburg</b>	Pediatric (0-17)	6,470	6,175	1,200
	Adult (18-65)	18,419	18,647	3,599
	Geriatric (66+)	3,538	3,536	661
	<b>Total</b>	<b>28,427</b>	<b>28,358</b>	<b>5,460</b>

# Emergency department visits per capita

North Carolina and comparison

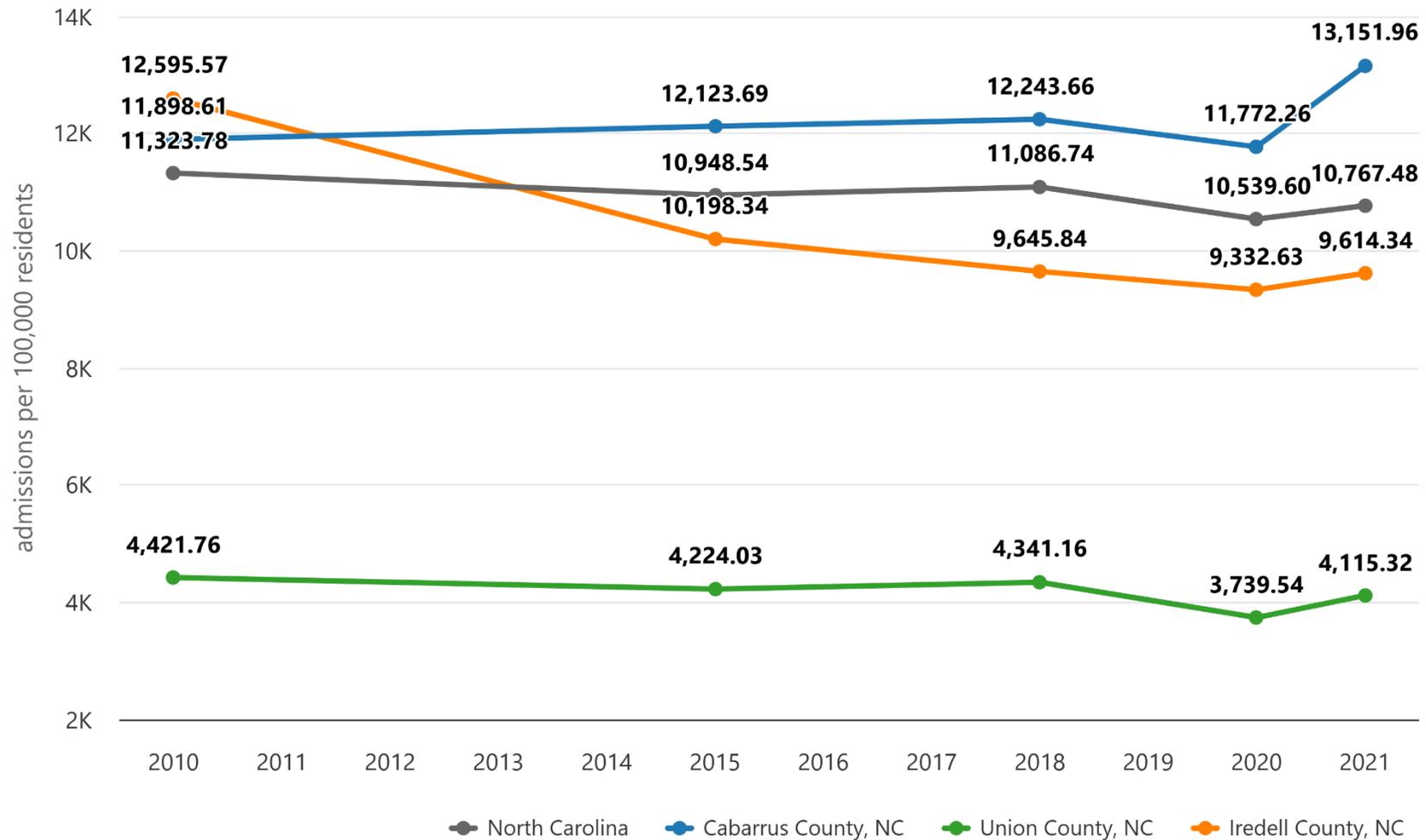


Created on Metopio | metop.io | Data source: Health Resources & Services Administration: Area Health Resources Files (AHA Survey Database via Area Health Resources File)

Emergency department visits per capita: Emergency department visits per 100 residents. Short term general hospitals only. Data is based on the location of the hospital, not the address of the patient.

# Hospital admissions per capita

North Carolina and comparison

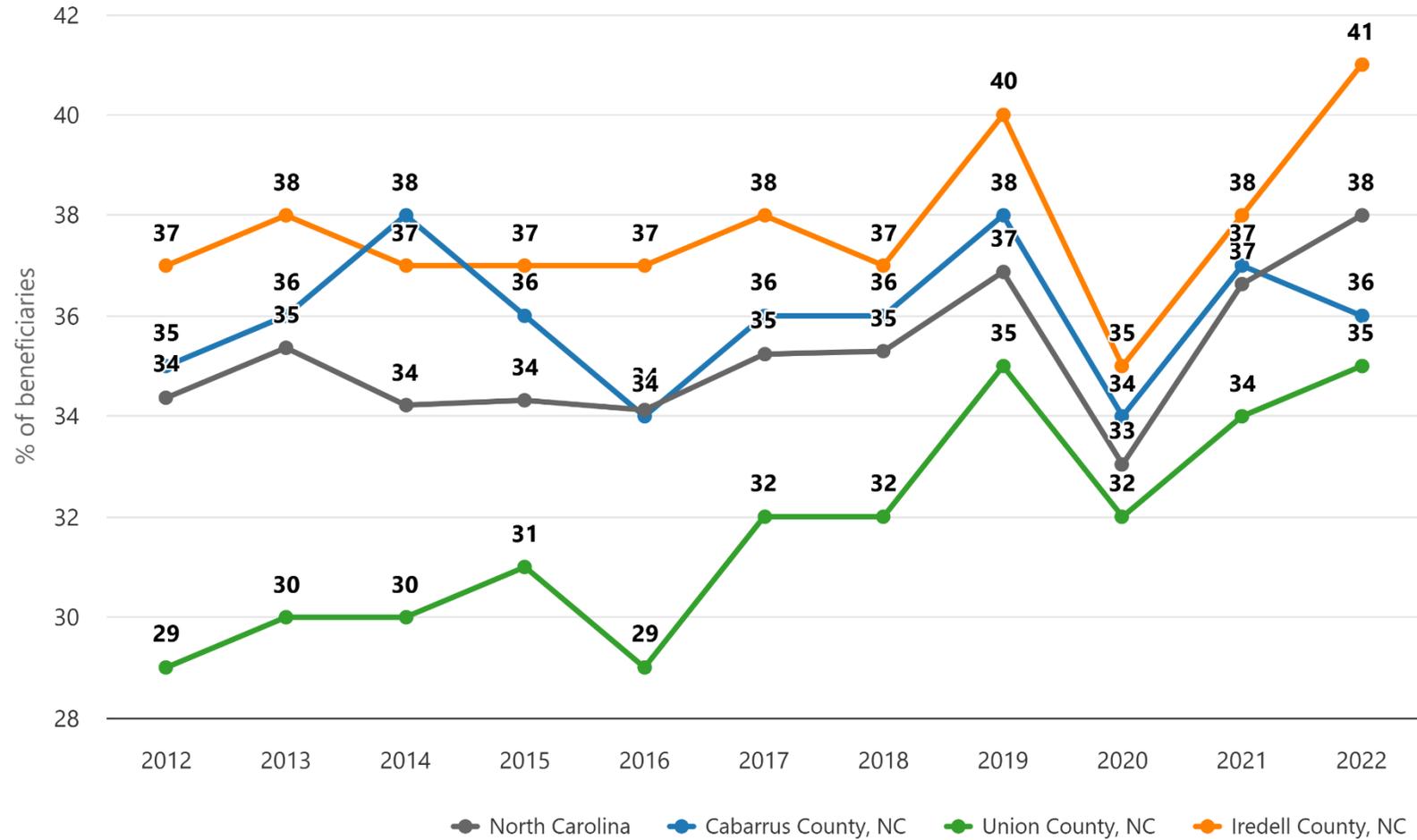


Created on Metopio | metop.io | Data source: Health Resources & Services Administration: Area Health Resources Files (AHA Annual Survey of Hospitals via file via Area Health Resources File)

**Hospital admissions per capita:** Number of patients accepted for inpatient service, per 100,000 residents. Excludes newborns. Includes neonatal admissions, swing admissions, and patients who visited the emergency room and were later admitted for inpatient services. Data is based on the location of the hospital, not the address of the patient.

# Medicare mammograms

North Carolina and comparison



Created on Metopio | metop.io | Data source: Centers for Medicare & Medicaid Services (CMS): Mapping Medicare Disparities

**Medicare mammograms:** Women who have received a mammogram in the past year. Applies to only females over 35 who are enrolled in Medicare. Age adjusted.



# COMMUNITY FREE CLINIC

---

Laura Lyerly Milliken  
**Executive Director**  
The Community Free Clinic

# The Community Free Clinic & Cabarrus Healthnet

---



## Mission:

To help Cabarrus County adults move toward wellness by providing comprehensive healthcare and support services. We do this by removing barriers to care for our patients.



# Services

Medical Home for acute and chronic disease care

Annual enrollment/  
reenrollment services  
for all Healthnet  
Providers

Lab Testing

Subspecialty Referrals

Free Prescriptions &  
OTC Medications

Dental and Behavioral  
Health Services

Retinal Screenings &  
Diabetic Supplies

Patient Navigation

- Billing Assistance
- Medical Literacy Assistance

Medical Devices, Brace  
and Supports

Health Coaching &  
Lifestyle Medicine  
Programming

Food Pharmacy  
Programming &  
Emergency Meals

# Cabarrus Healthnet

## History



- Founded in 2001
- Central point of coordination of care and services

## Purpose



To have a seamless system of comprehensive care that connects people to healthcare and other community resources

## Vision



Every person has an equal chance for a healthy life.

## Eligibility



- Uninsured adult (*Expansion to pediatrics pending*)
- Cabarrus County Resident
- 300% or less of FPL

## Partners

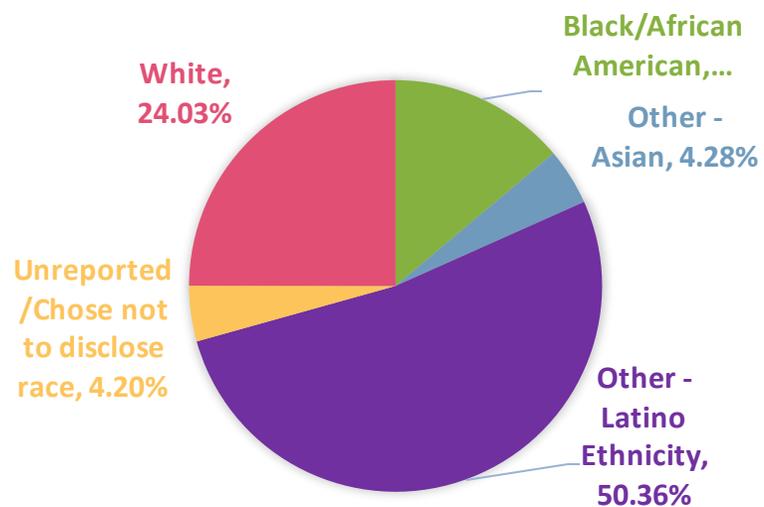


Over 70 partner medical practices

- Over 20 Internal and Family Medicine Practices
- Atrium Health Practices
- Novant Practices
- Local Dental Practices
- Subspecialty Practices, including OrthoCarolina, General Surgery, Podiatry, Dermatology, Cabarrus Eye Center and LabCorp

# Patients Served, 2024

## RACE/ETHNICITY

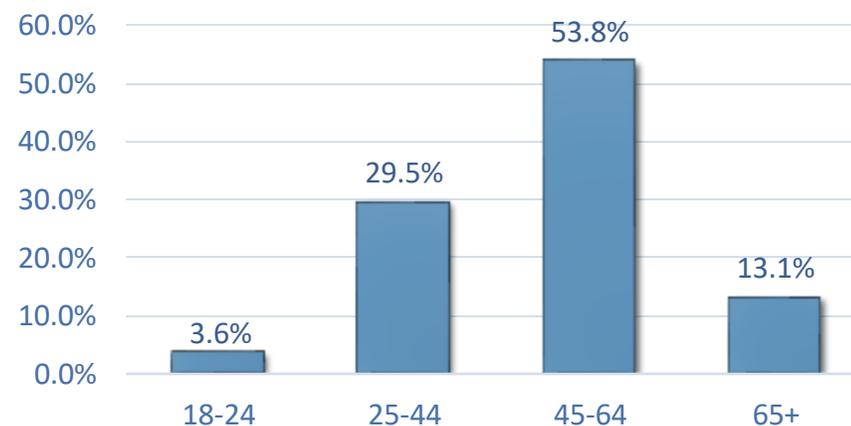


Female  
58%



Male  
42%

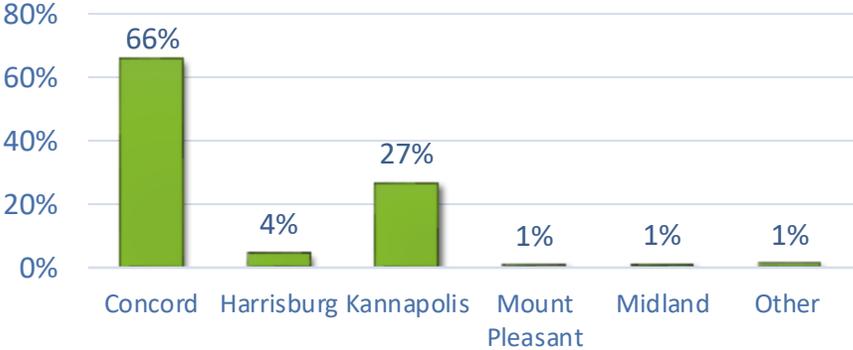
## AGE



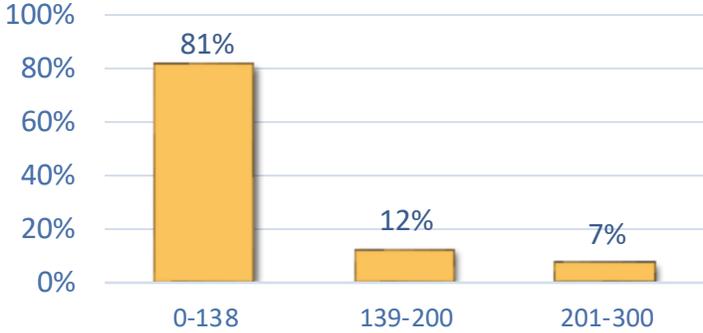
\*1261 Patients Served

# Patients Served, 2024

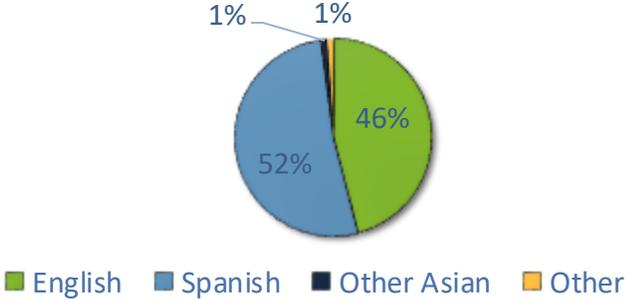
### City



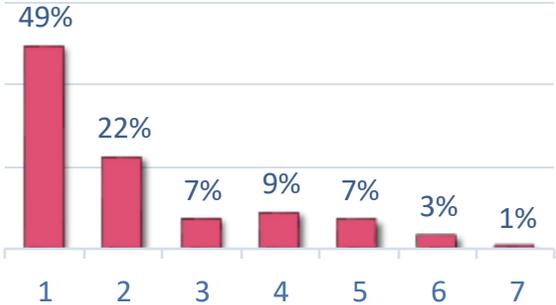
### Federal Poverty Level %



### Preferred Language



### Household Size



# 2024 Community Free Clinic Services

\$3.5M local ER  
diversion costs  
saved

\$14,269.68 per  
patient service  
value

\$11.60 in services  
provided for  
every \$1 donated



# MATERNAL, INFANT AND CHILD HEALTH

---

Megan Easterday, MD

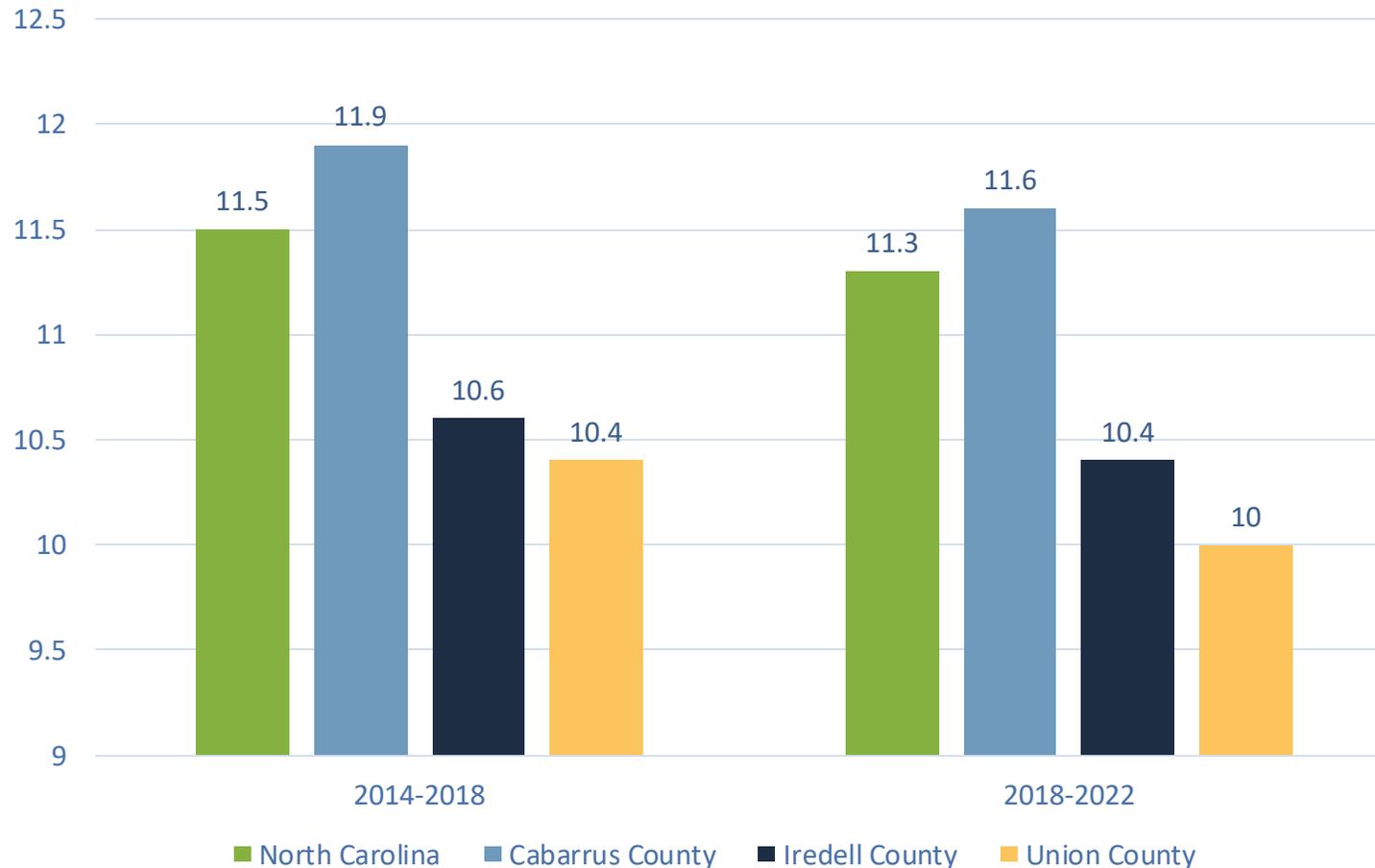
**Medical Director**

Cabarrus Health Alliance

# Live Birth Rate

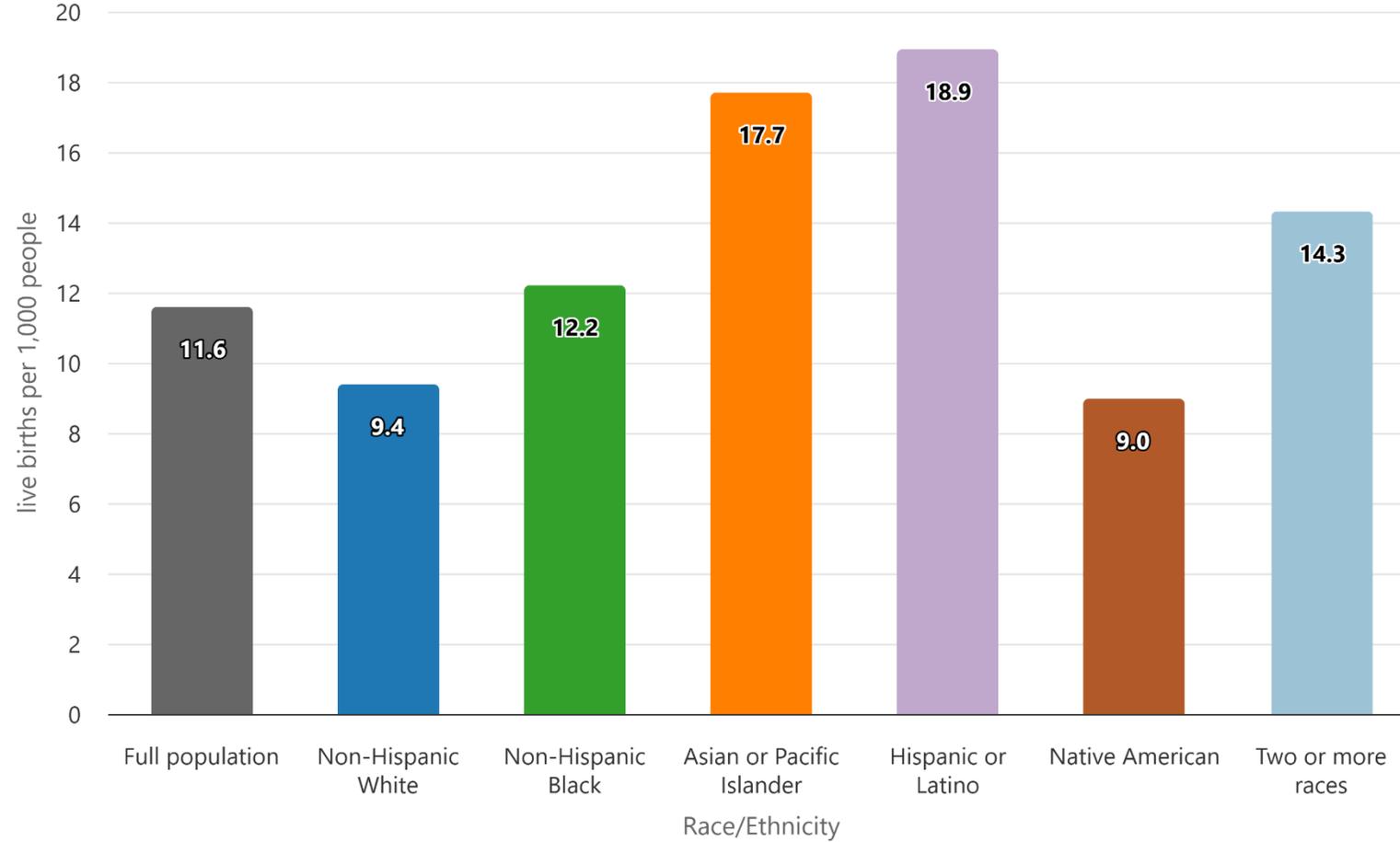
*Rate per 1,000 Population*

Globally, birth rates ranging from **10–20** births per 1,000 are considered low, while rates from **40–50** births per 1,000 are considered high.



# Live birth rate (NC) by Race/Ethnicity, Cabarrus County, NC

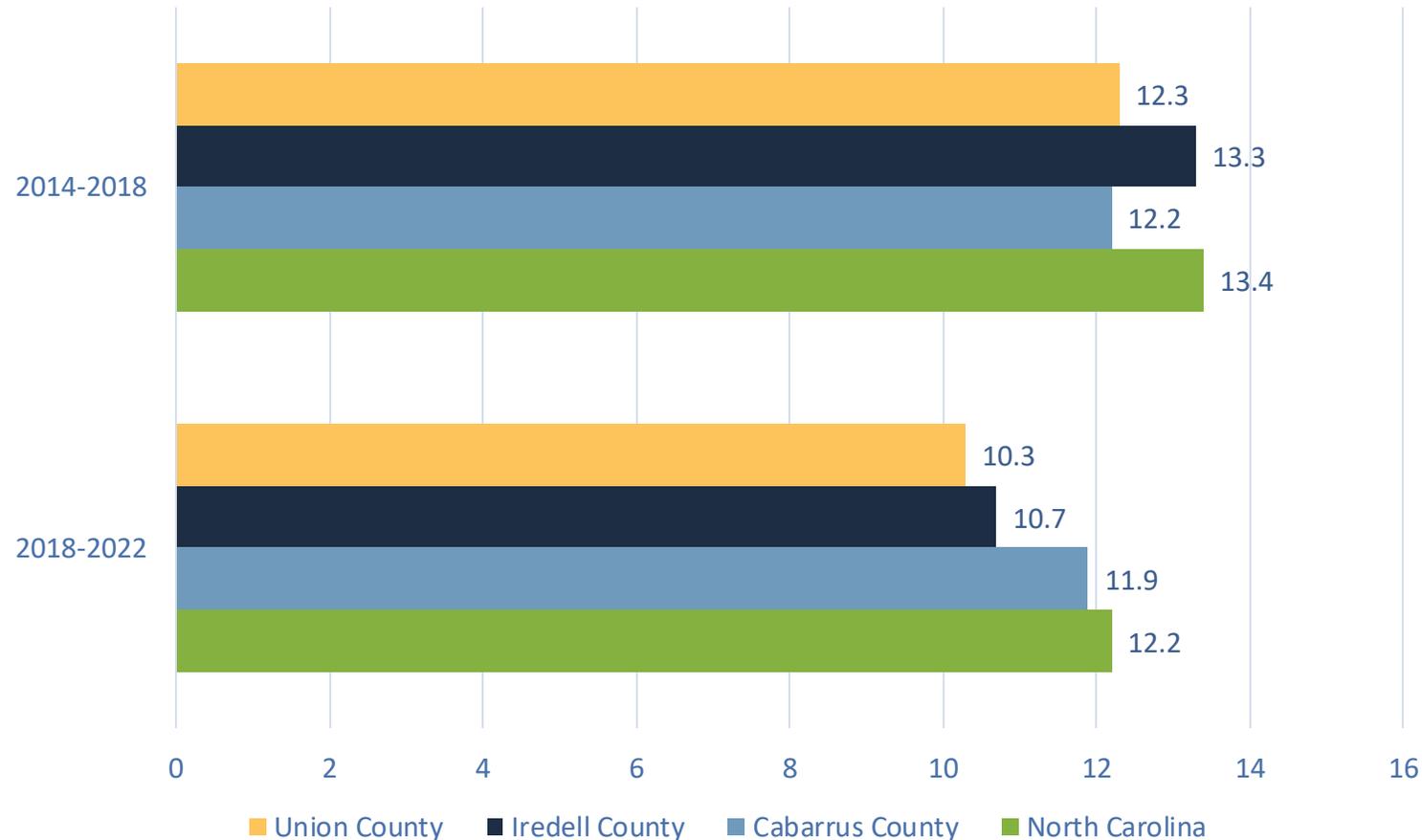
2018-2022



Created on Metopio | [metop.io/i/mbettnyz](https://metop.io/i/mbettnyz) | Data source: North Carolina Department of Health and Human Services (NCDHHS); North Carolina State Center for Health Statistics (NC SCHS)

**Live birth rate (NC):** Live births in the past year per 1,000 people. A live birth is defined as the full delivery or removal of a fetus from its mother, regardless of the pregnancy's duration, where the fetus exhibits signs of life after separation.

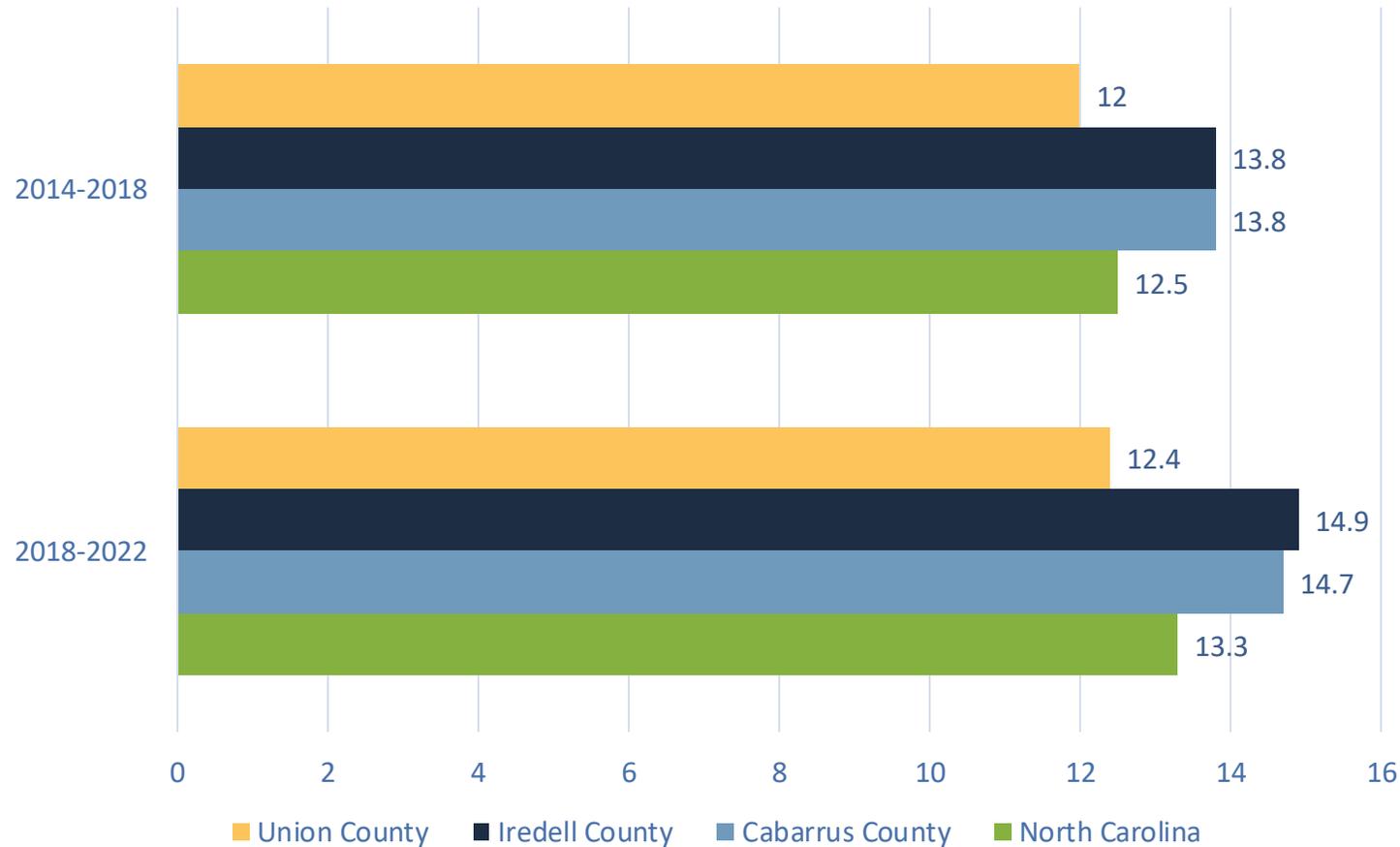
# Percent of High Parity Births out of Live Births



High parity is defined as either:

- Mothers under 30 with 5+ children
- Mothers under 25 with 4+ children
- Mothers under 20 with 2 or 3 children

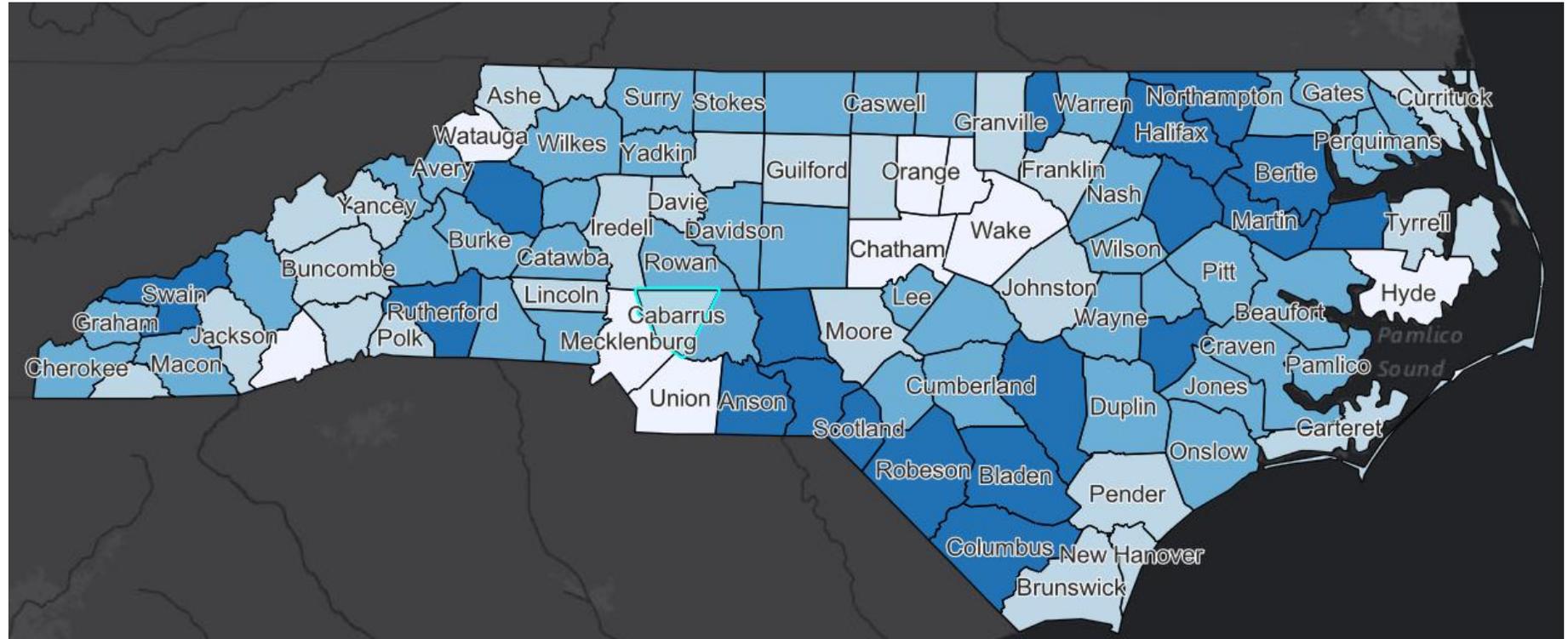
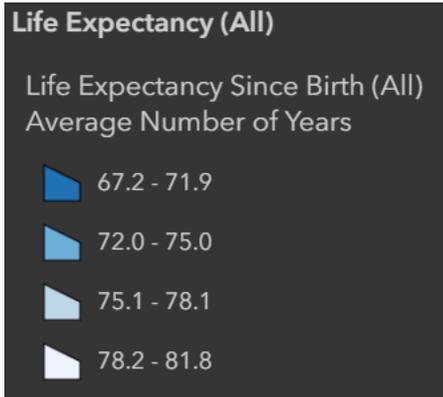
# Percent of Short Interval Births out of Live Births



Includes interval from last delivery to conception of 6 months or less

People are encouraged to wait 18 months between pregnancies for optimal health outcomes

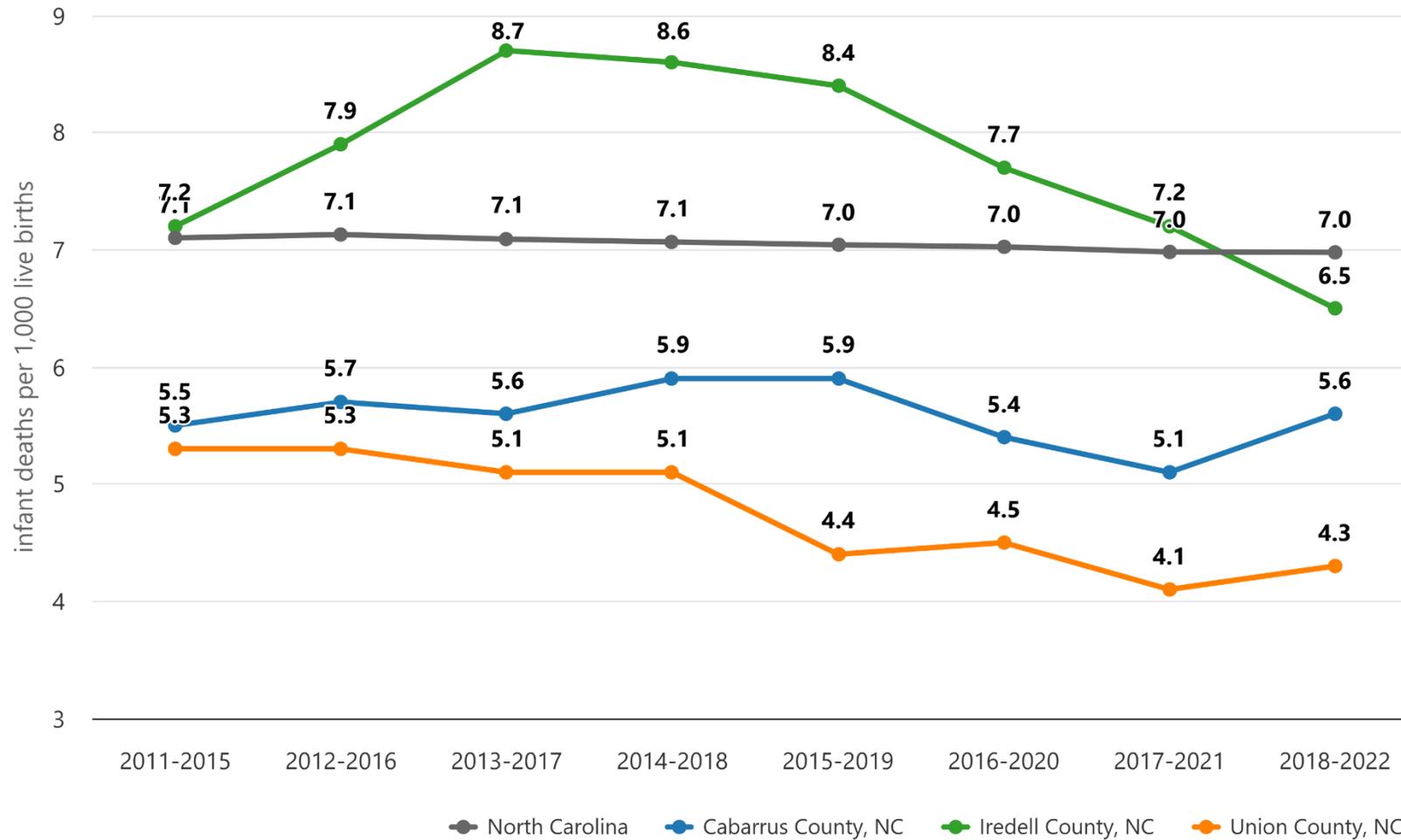
# Life Expectancy at Birth 2021-2023



Cabarrus County: 77.5  
(2016-2018 78.4)

# Infant mortality rate (NC)

North Carolina and comparison

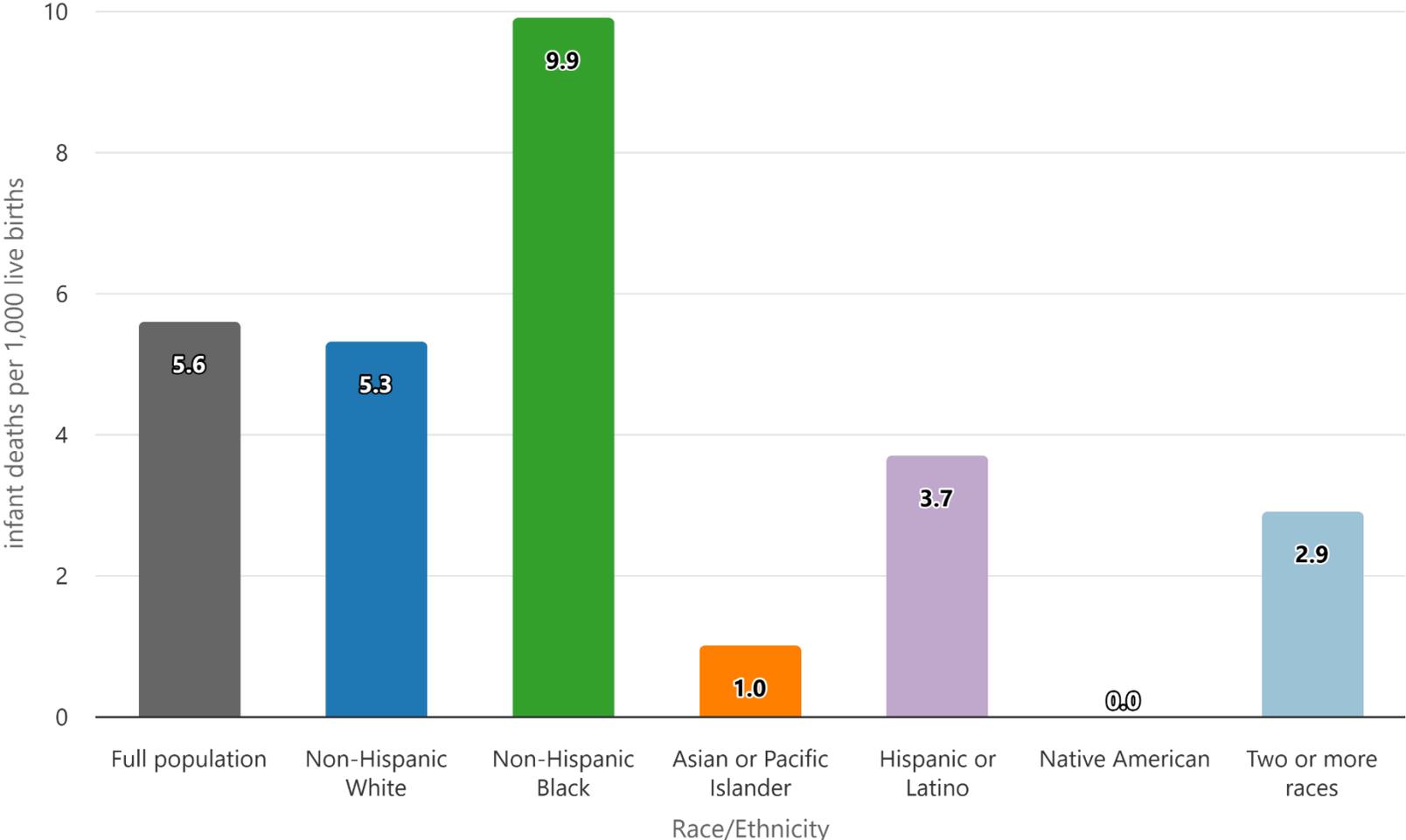


Created on Metopio | metop.io | Data source: North Carolina Department of Health and Human Services (NCDHHS): North Carolina State Center for Health Statistics (NC SCHS)

Infant mortality rate (NC): Infant deaths in a year per 1,000 live births. Infant death is defined as death of a live born infant under one year of age.

# Infant mortality rate (NC) by Race/Ethnicity, Cabarrus County, NC

2018-2022



Created on Metopio | [metop.io/i/nttau2es](https://metop.io/i/nttau2es) | Data source: North Carolina Department of Health and Human Services (NCDHHS); North Carolina State Center for Health Statistics (NC SCHS)

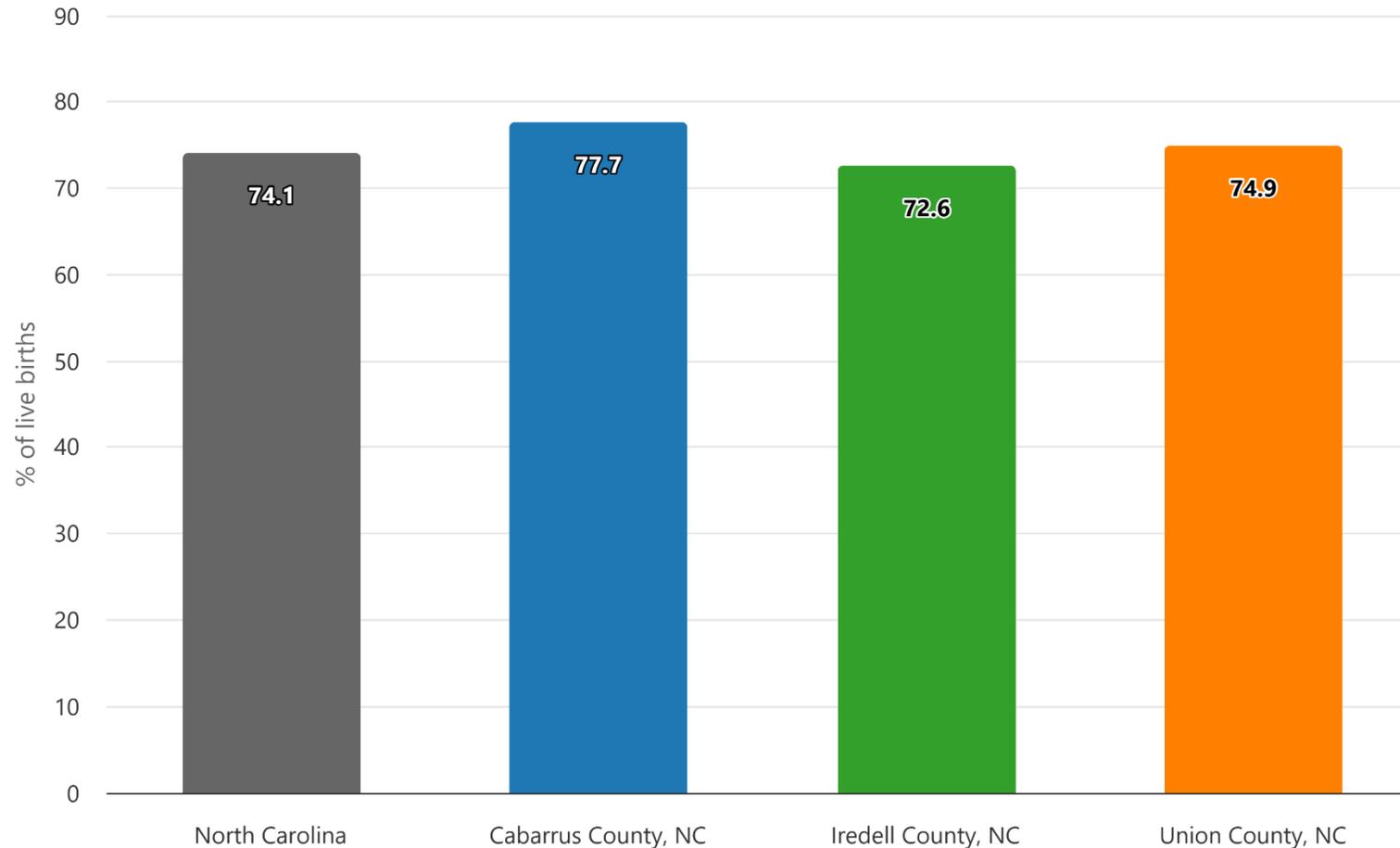
Infant mortality rate (NC): Infant deaths in a year per 1,000 live births. Infant death is defined as death of a live born infant under one year of age.

# Racial Disparities in Infant Mortality (2018-2022)- Cabarrus County

- **White infant mortality rate: 5.3 per 1,000 live births**
- **Black infant mortality rate: 9.9 per 1,000 live births**
- **The Black infant mortality rate is 1.9 times higher than the White infant mortality rate.**

## Prenatal care in first trimester, 2020-2022

North Carolina and comparison

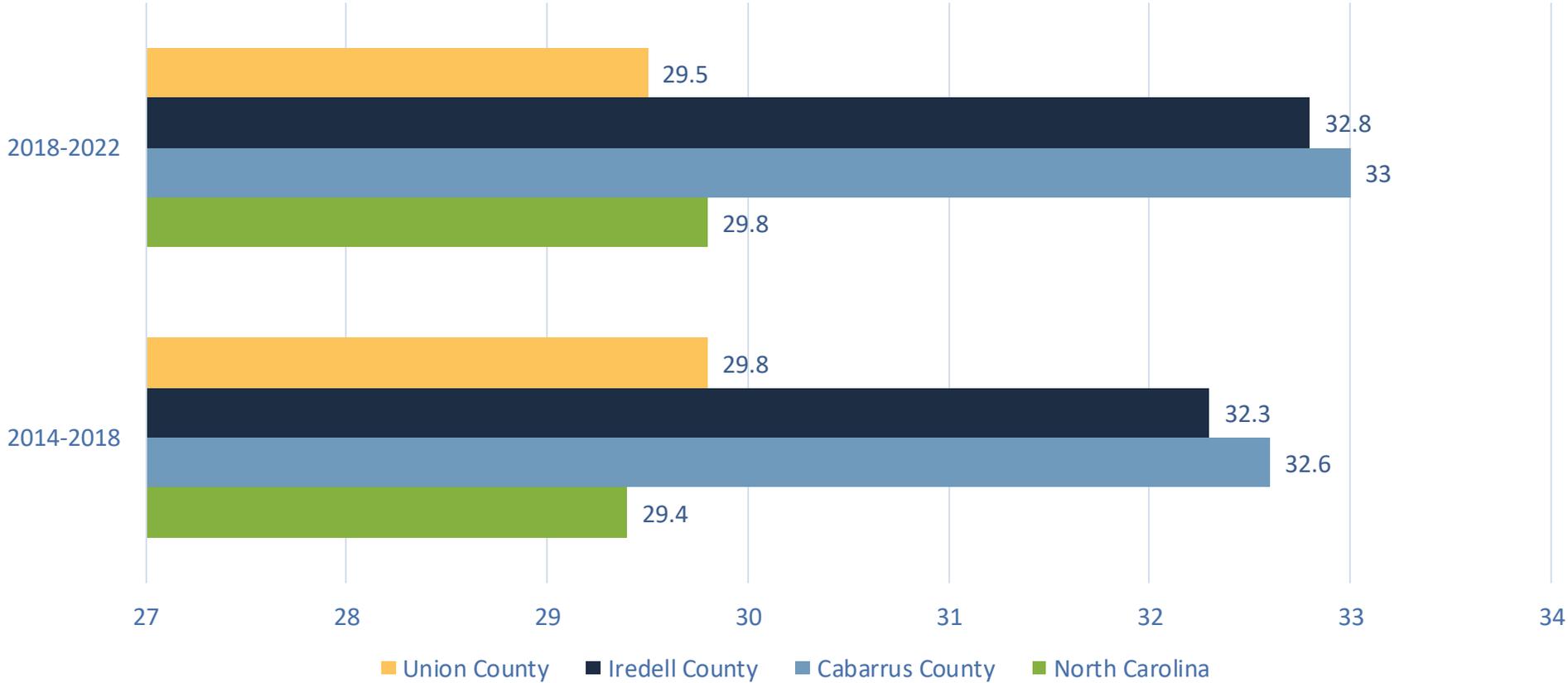


Healthy People 2030 goal for 80.5% of the population to initiate early and adequate prenatal care

Created on Metopio | metop.io | Data source: Health Resources & Services Administration: Maternal and Child Health Bureau (MCHB)

Prenatal care in first trimester: Estimated percentage of live births with first trimester prenatal care.

# Percent of C-Section Deliveries



# Top 5 Causes of Infant Deaths in 2023 for North Carolina

---

1. Prematurity and low birth weight (17.3%)

2. Congenital malformations, deformations, and chromosomal abnormalities (16.5%)

3. Other ill-defined and unknown causes of death (13%)

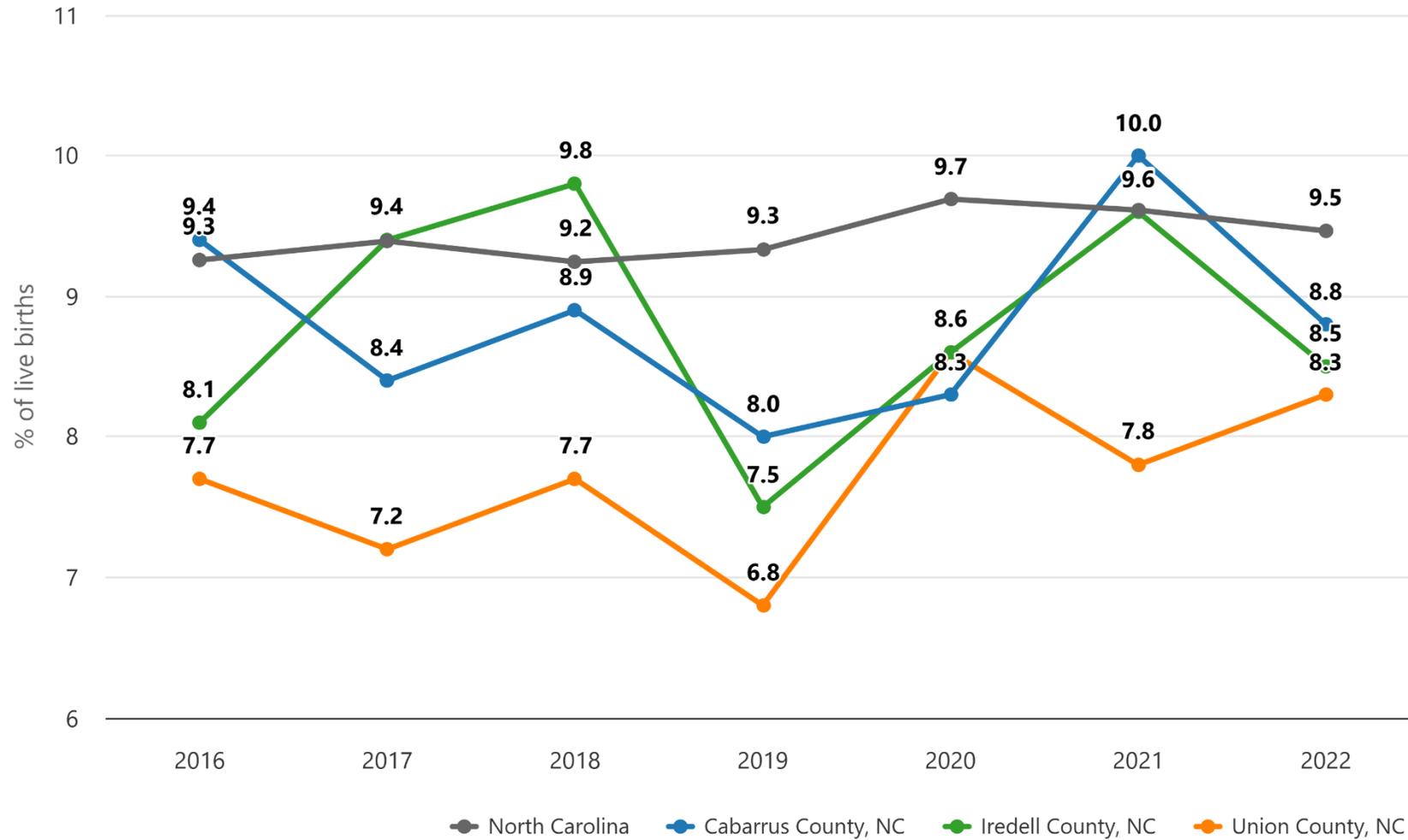
4. Other conditions originating in the perinatal period (12.1%)

5. Newborn affected by maternal factors/complications of pregnancy, labor & delivery (10%)



# Low birth weight (NC)

North Carolina and comparison

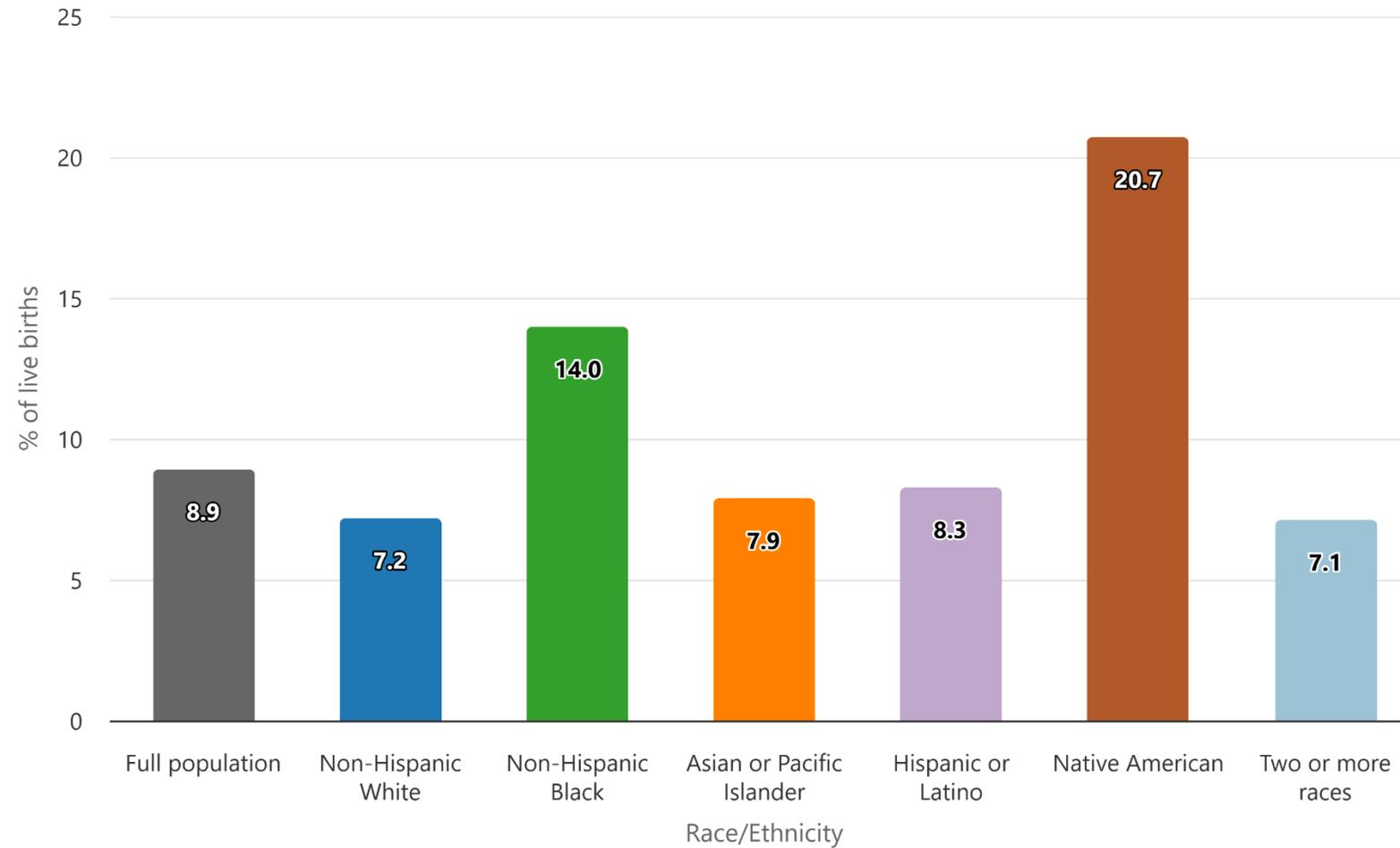


Created on Metopio | metop.io/i/2ysamopr | Data source: North Carolina Department of Health and Human Services (NCDHHS): North Carolina State Center for Health Statistics (NC SCHS)

**Low birth weight (NC):** Percent of live births with a birth weight of less than 2,500 grams (5 lbs, 8 oz). Infants may be low birth weight because of inadequate interuterine growth or premature birth. Risk factors include sociodemographic and behavioral characteristics, such as low income and tobacco use during pregnancy.

## Low birth weight (NC) by Race/Ethnicity, Cabarrus County, NC

2018-2022



Created on Metopio | [metop.io/i/udcxpkh3](https://metop.io/i/udcxpkh3) | Data source: North Carolina Department of Health and Human Services (NCDHHS): North Carolina State Center for Health Statistics (NC SCHS)

**Low birth weight (NC):** Percent of live births with a birth weight of less than 2,500 grams (5 lbs, 8 oz). Infants may be low birth weight because of inadequate interuterine growth or premature birth. Risk factors include sociodemographic and behavioral characteristics, such as low income and tobacco use during pregnancy.

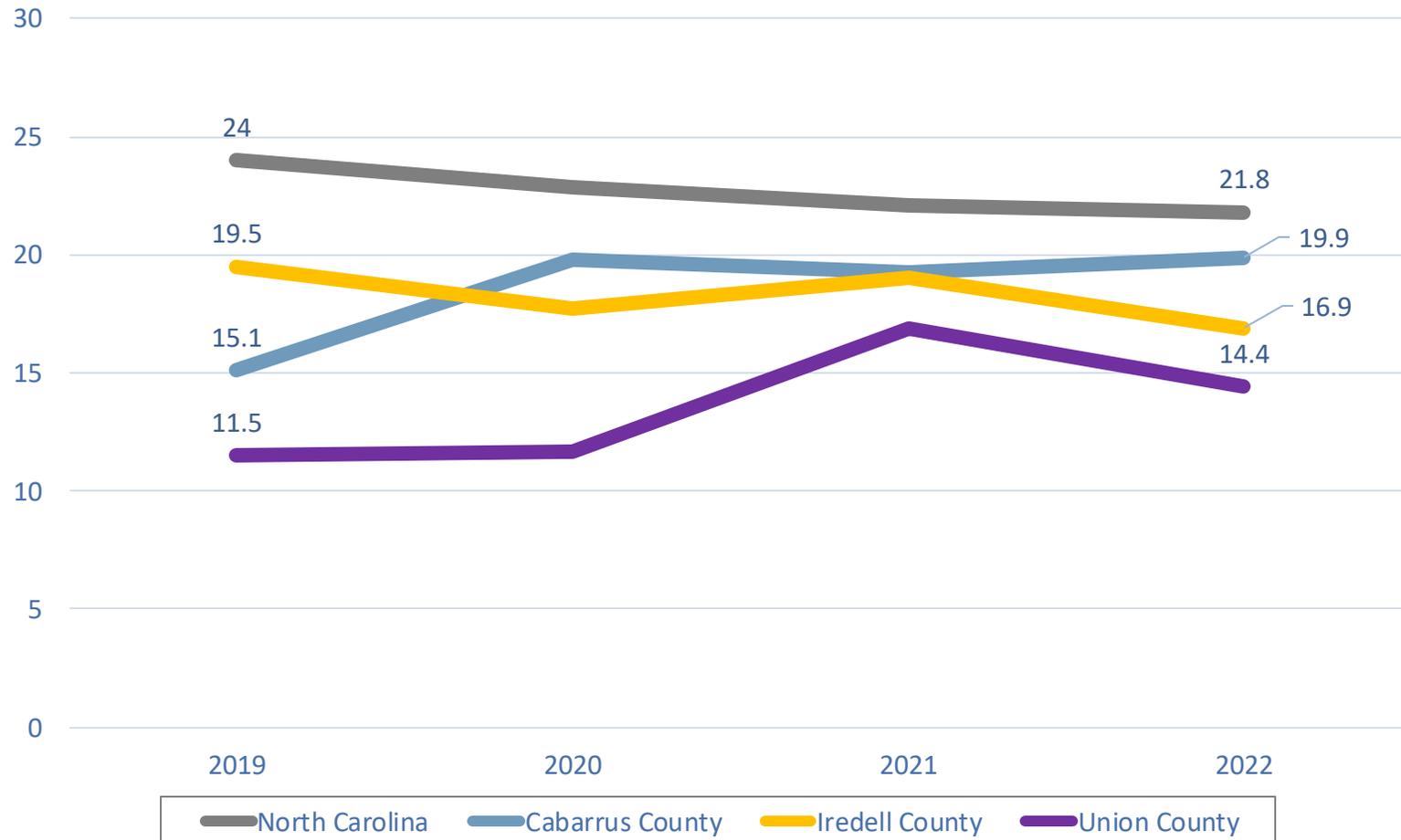
# Factors Associated with Prematurity and Low Birth Weights

---

- Black, Native Hawaiian/Pacific Islander, American Indian, Alaska Native Women
- Age (Teens and women >35years old)
- Maternal substance use

# Teen Pregnancy Rate

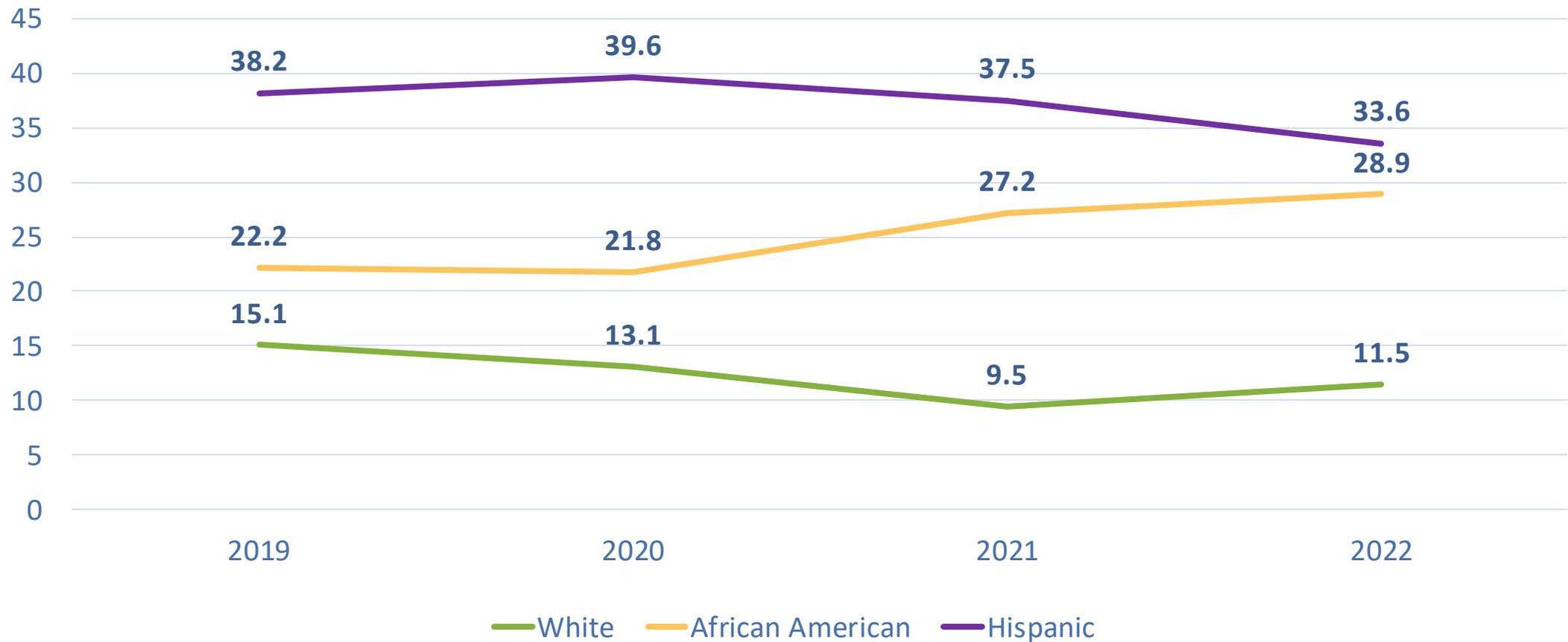
*Rate per 1,000 15-19 year old girls*



While there are some medical risks to teen pregnancies, most of these increased negative health outcomes can be associated with social and economic factors (timing of prenatal care, low-birth weight).

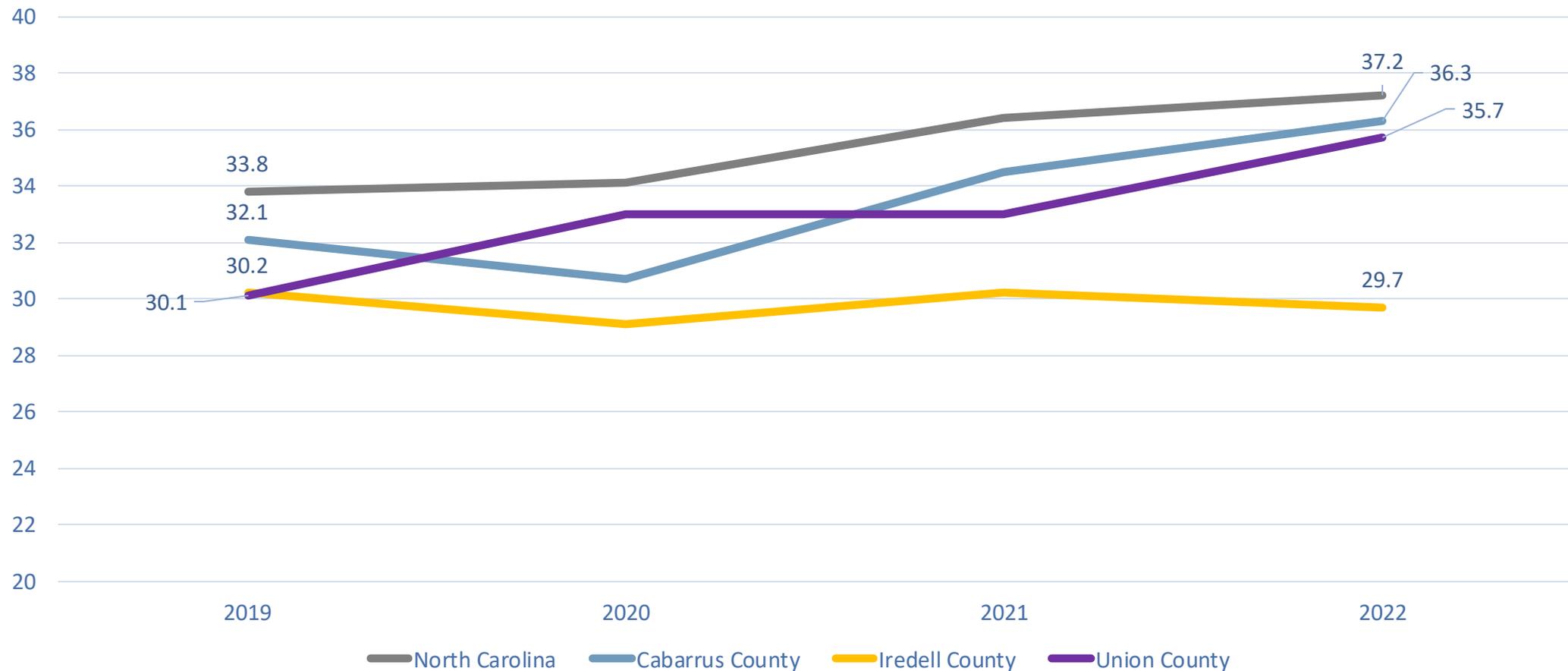
# Teen Pregnancy Rate by Race- Cabarrus County

*Rate per 1,000 15-19 year old girls*



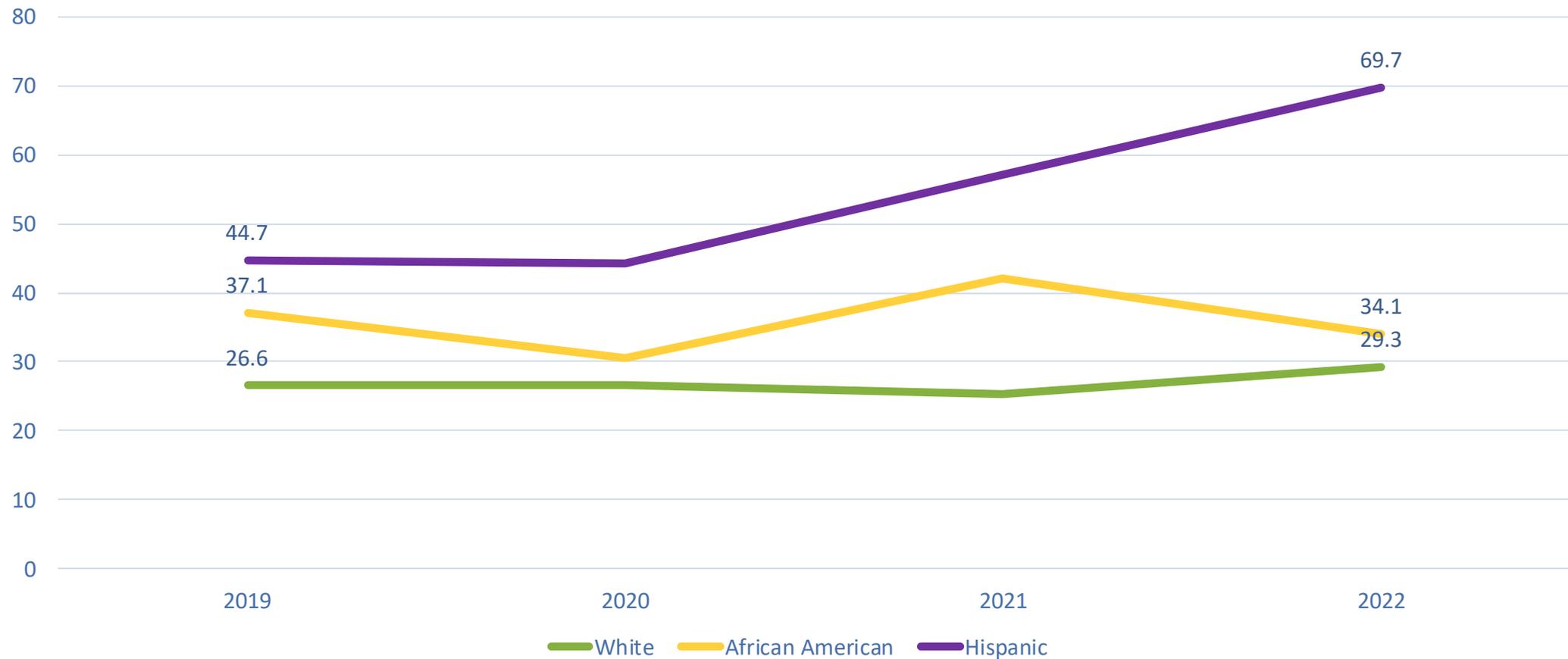
# Pregnancies with Advanced Maternal Age (>35 years old)

Rate per 1,000 35-44 year old women



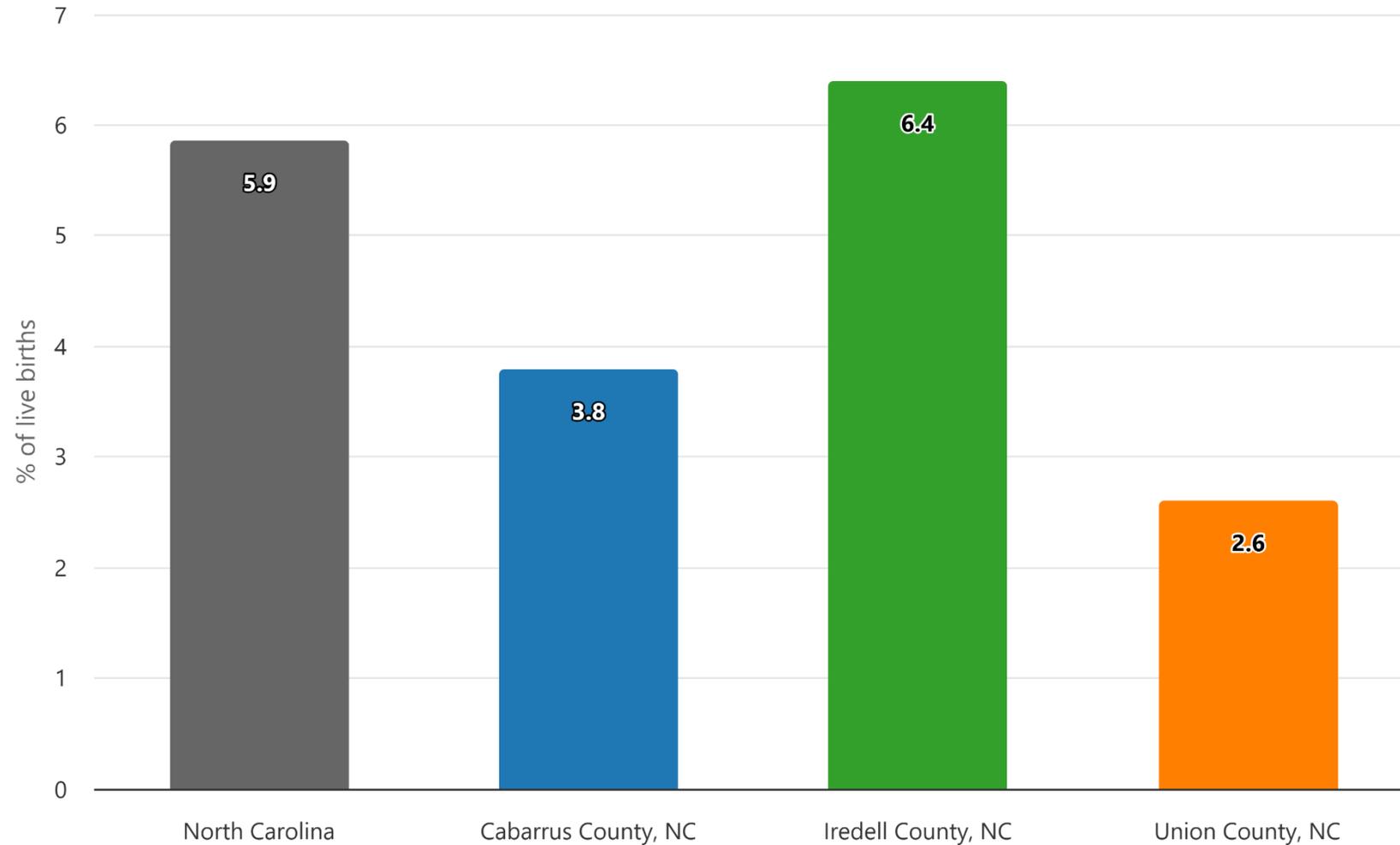
# Pregnancies with Advanced Maternal Age (Age >35 years old) by Race for Cabarrus County

*Rate per 1,000 35-44 year old women*



# Smoking during pregnancy, 2020-2022

North Carolina and comparison



Mothers who smoke while pregnant are more likely to experience pre-term labor, ectopic pregnancy, and problems with the placenta.

Created on Metopio | metop.io | Data source: Health Resources & Services Administration: Maternal and Child Health Bureau (MCHB)

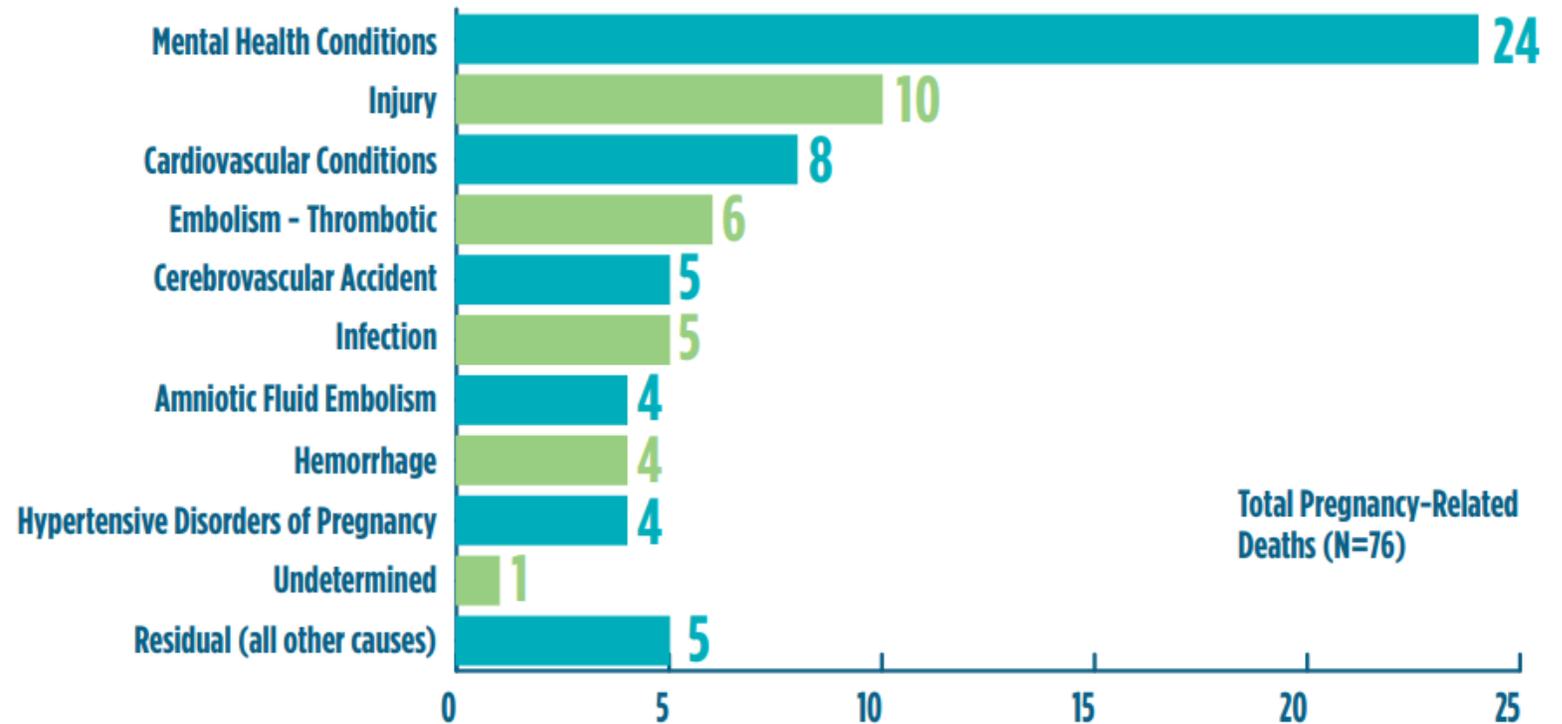
Smoking during pregnancy: Estimated percentage of live births where maternal cigarette smoking was reported during any trimester of pregnancy.

# Maternal Mortality 2018-2019

NC Maternal Mortality Review Committee (MMRC), was established by state law in 2015, to examine maternal deaths associated with pregnancy.

Next report anticipated to be released in 2025 presenting 2020-2021 data

Figure 2. Leading Causes of Pregnancy-Related Deaths, NC Residents 2018-2019



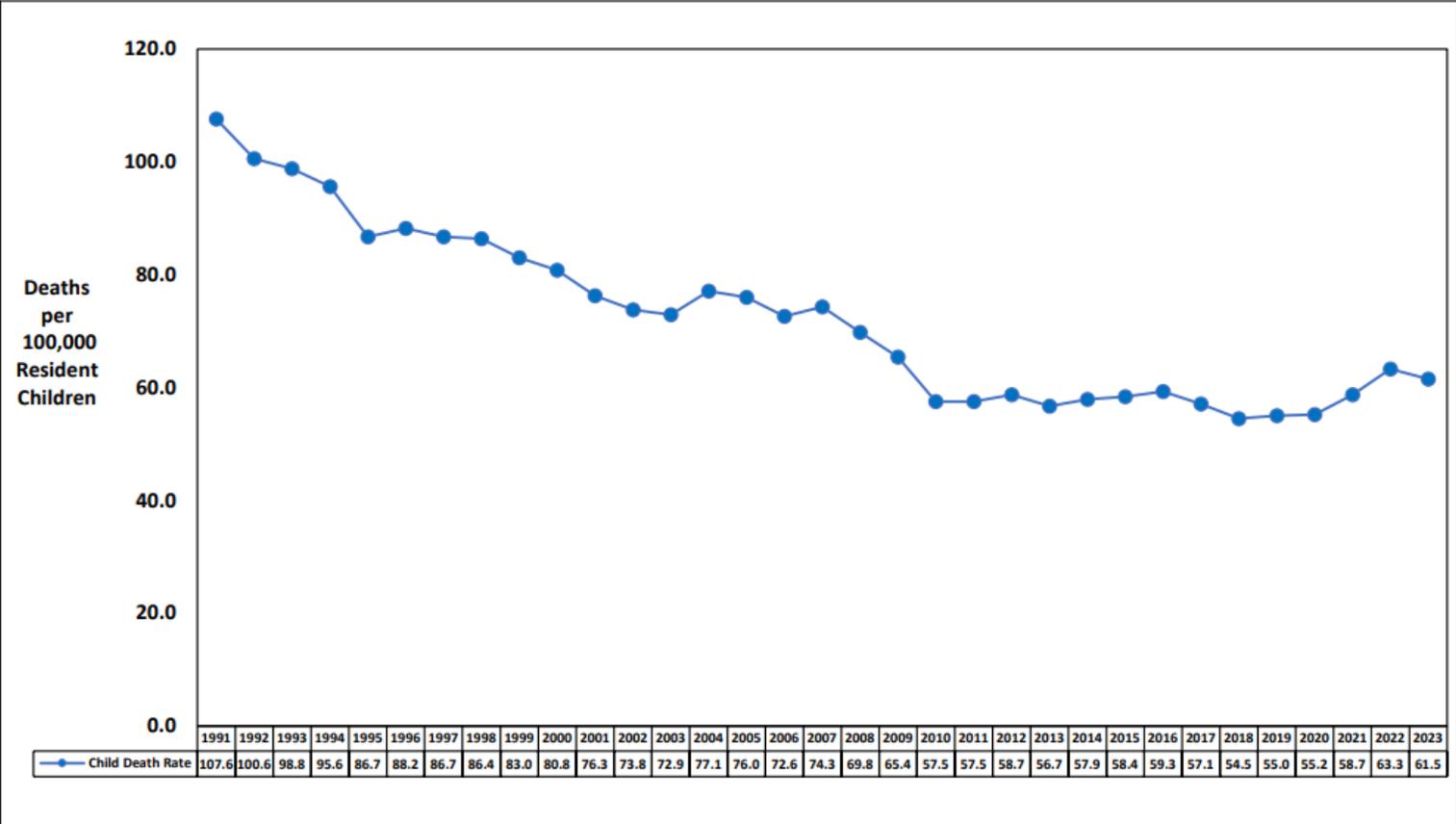
# Maternal Mortality Review

---

- 24 of the 76 pregnancy related deaths in 2018-2019 reviewed by NC MMRC were related to mental health (31.6%)
- 20 of these deaths were related to overdoses
- 18 of the 20 overdose deaths were related to opioid use, and 14 of these were specifically related to fentanyl use
- 85.5% of the maternal deaths were considered “preventable” by the review committee

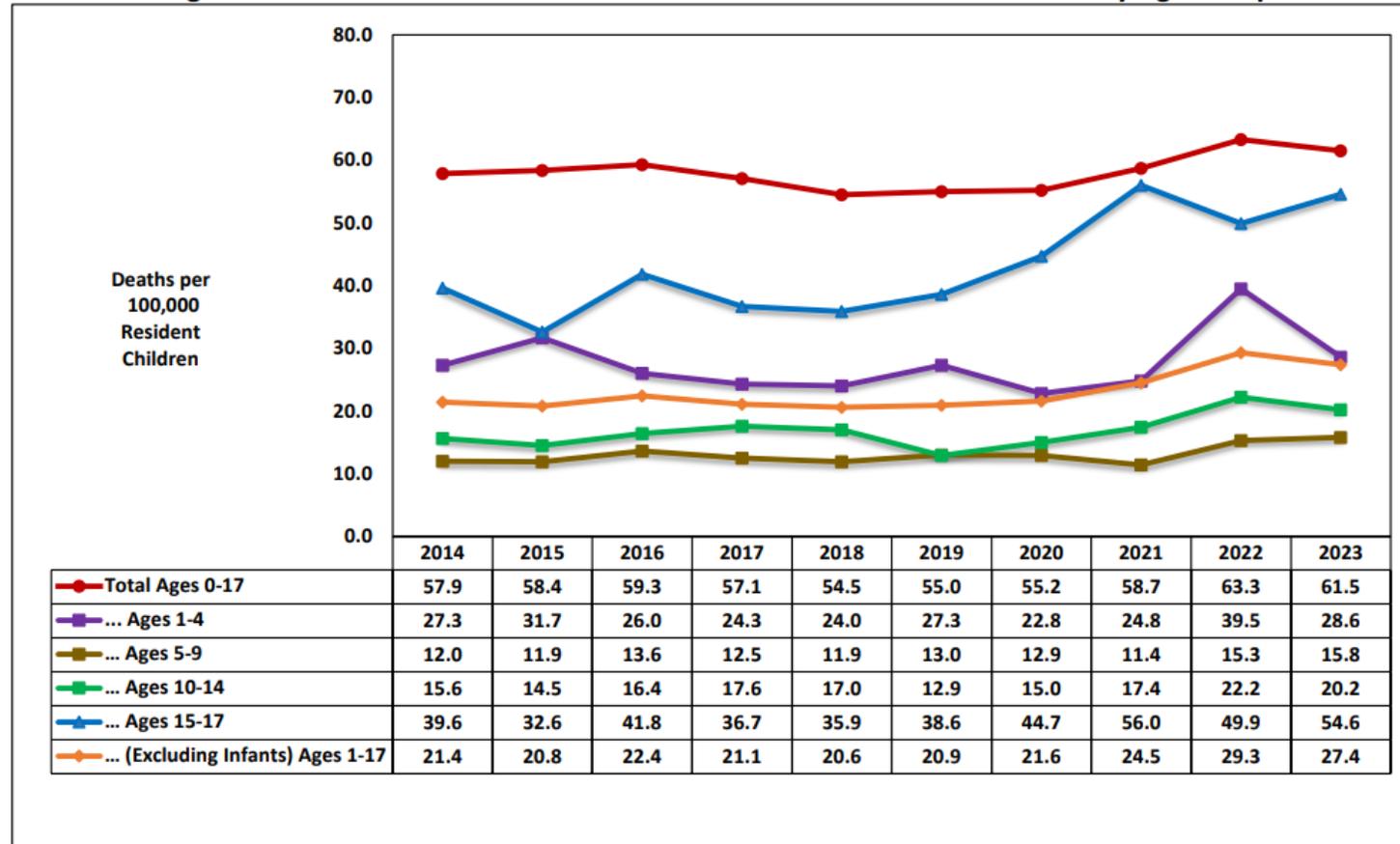
# Child Death Rates for North Carolina

Figure 1. 1991-2023 Trends in North Carolina Resident Child Death Rates Ages Birth Through 17 Years



# Child Death Rates by Age Group

Figure 2. 2014-2023 Trends in North Carolina Resident Child Death Rates<sup>†</sup> by Age Group



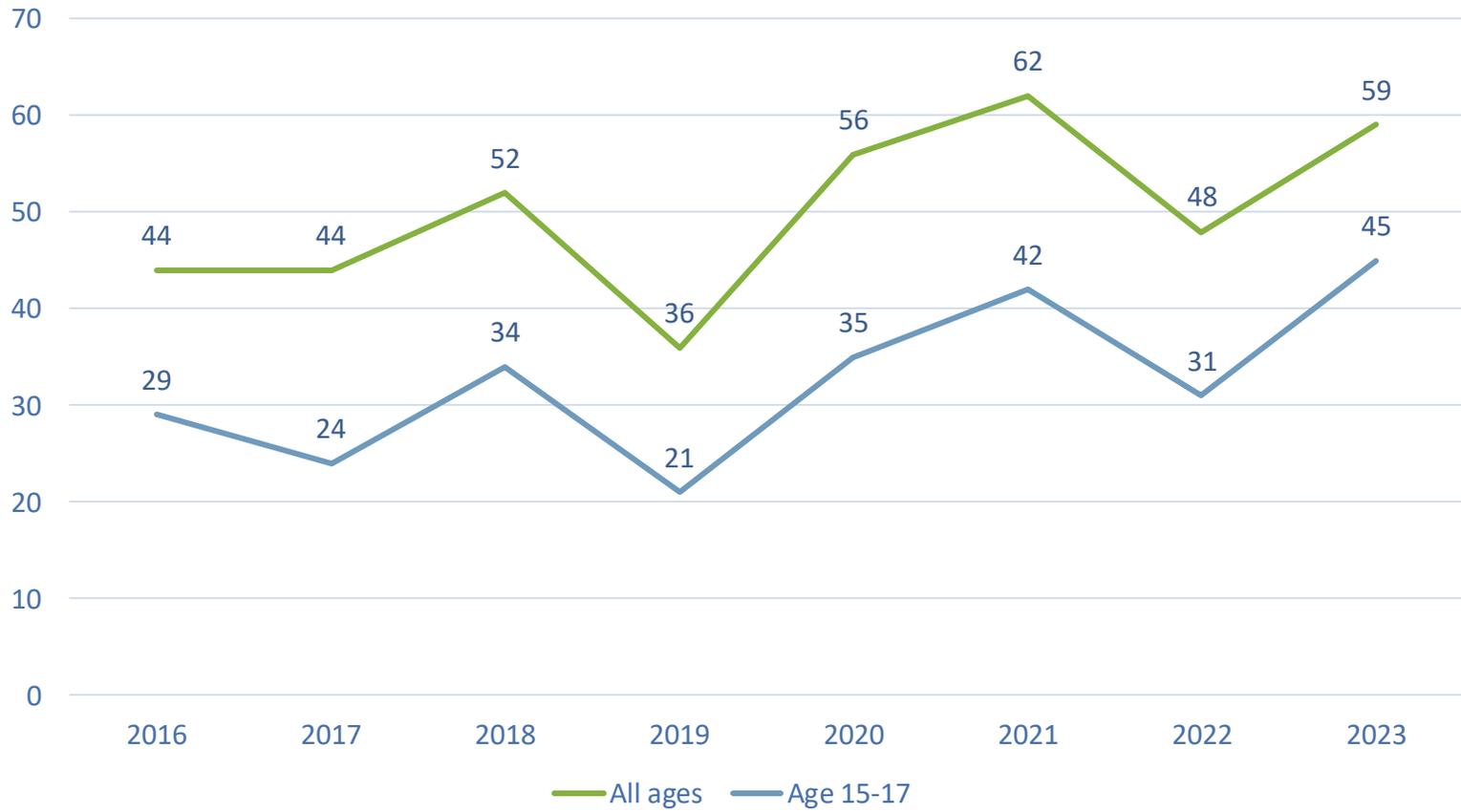
# Top Causes of Child Death by Age- 2023

All Ages, 0-17			
Rank	Cause	Number	%
1	Conditions originating in the perinatal period	448	31.2%
2	Congenital anomalies (birth defects)	176	12.3%
3	Other Unintentional injuries	124	8.6%
4	Motor vehicle injuries	101	7.0%
5	Homicide	89	6.2%
6	Cancer	59	4.1%
	Suicide	59	4.1%
8	Diseases of the heart	26	1.8%
9	Pneumonia & influenza	13	0.9%
	Septicemia	13	0.9%
	All other causes (Residual)	328	22.8%
<b>Total Deaths --- All Causes</b>		<b>1,436</b>	<b>100.0%</b>

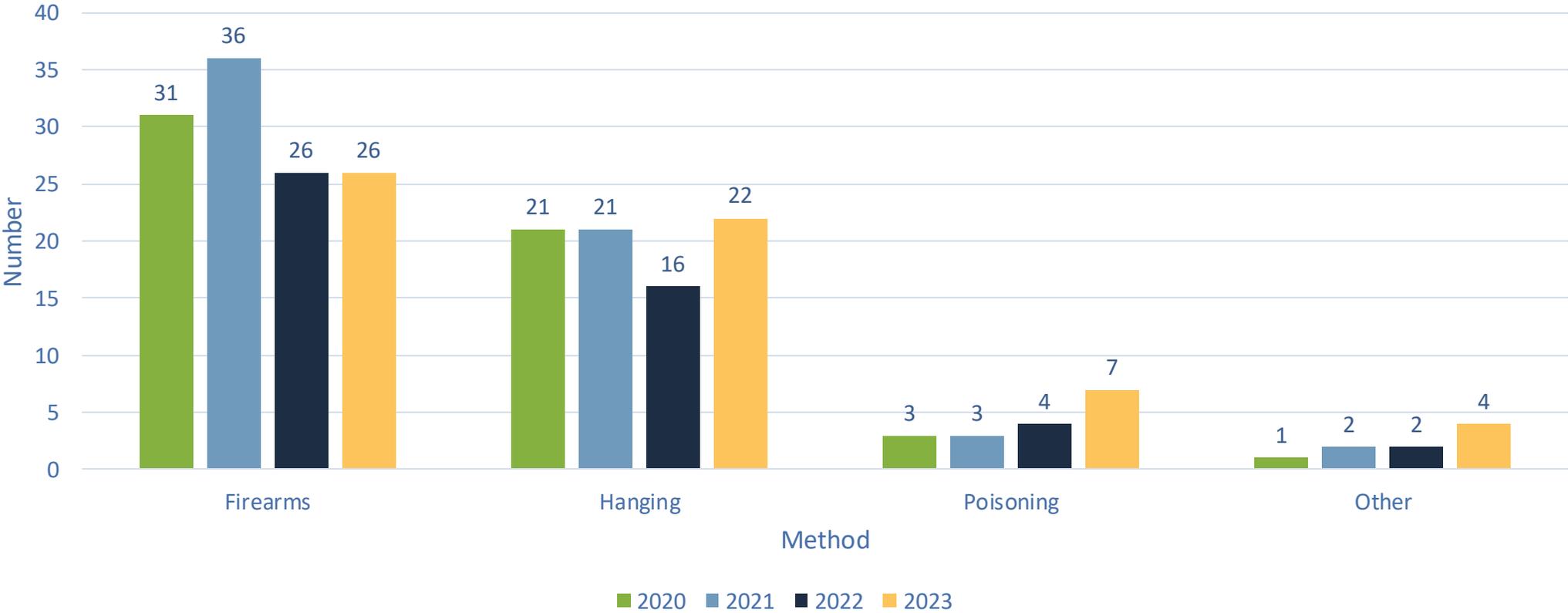
Ages 15 to 17			
Rank	Cause	Number	%
1	Motor vehicle injuries	54	23.1%
2	Homicide	47	20.1%
3	Suicide	45	19.2%
4	Other Unintentional injuries	33	14.1%
5	Cancer	13	5.6%
6	Congenital anomalies (birth defects)	6	2.6%
7	Diseases of the heart	4	1.7%
8	Cerebrovascular disease	2	0.9%
	Pregnancy, childbirth, and puerperium	2	0.9%
10	COVID-19	1	0.4%
	Diabetes mellitus	1	0.4%
	All other causes (Residual)	26	11.1%
<b>Total Deaths --- All Causes</b>		<b>234</b>	<b>100.0%</b>

# Number of Child Suicides

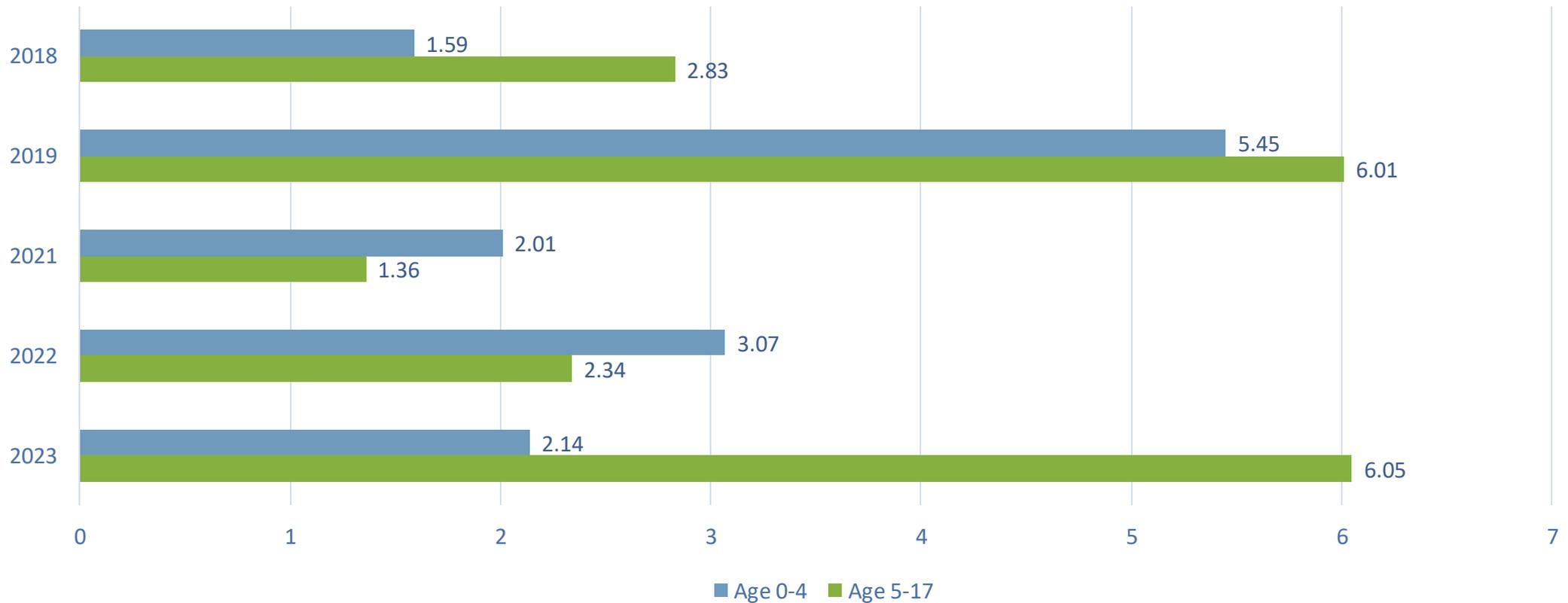
North Carolina



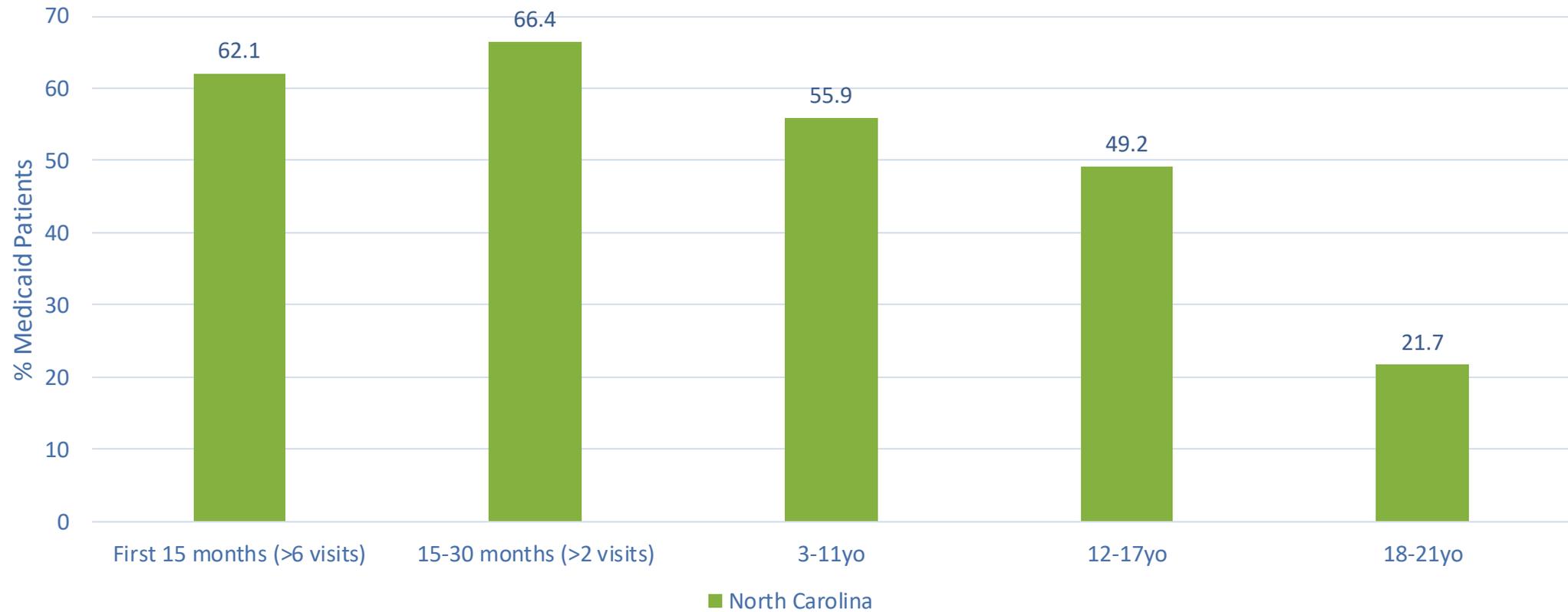
# Method of Suicide (All ages)



# Rate of Uninsured Children Cabarrus County



# Well Child Visits- North Carolina (2023)





# SCHOOL HEALTH

---

Tammy Alexander, MSN, RN, NCSN  
**School Health Director**  
Cabarrus Health Alliance



CABARRUS  
HEALTH  
ALLIANCE

**25** Years with a Nurse in Every School



# Role of the School Nurse

- School Nurses are often the 1st line of health care students receive.
- Nurses focus on the WHOLE child addressing physical and mental health, nutrition, physical activity, social issues, etc.
- Nurses bridge healthcare and education to improve health and academic outcomes for students.

# School Nurse Impact (2023-2024)

*Management of acute and emergent illnesses and injuries*

---



112,673 visits to a school health office for assessment, first-aid, medication or procedure



570 injuries which required EMS or immediate care by physician or dentist



1,323 orders for emergency medications



14 doses of stock epinephrine delivered for severe allergic reactions

# School Nurse Impact

## *Management of Chronic Health Conditions*

---

~43% of the 41,500 children in Cabarrus County and Kannapolis City Schools are identified with one or more chronic conditions that require intervention at school.

Most common chronic conditions:

1. Asthma

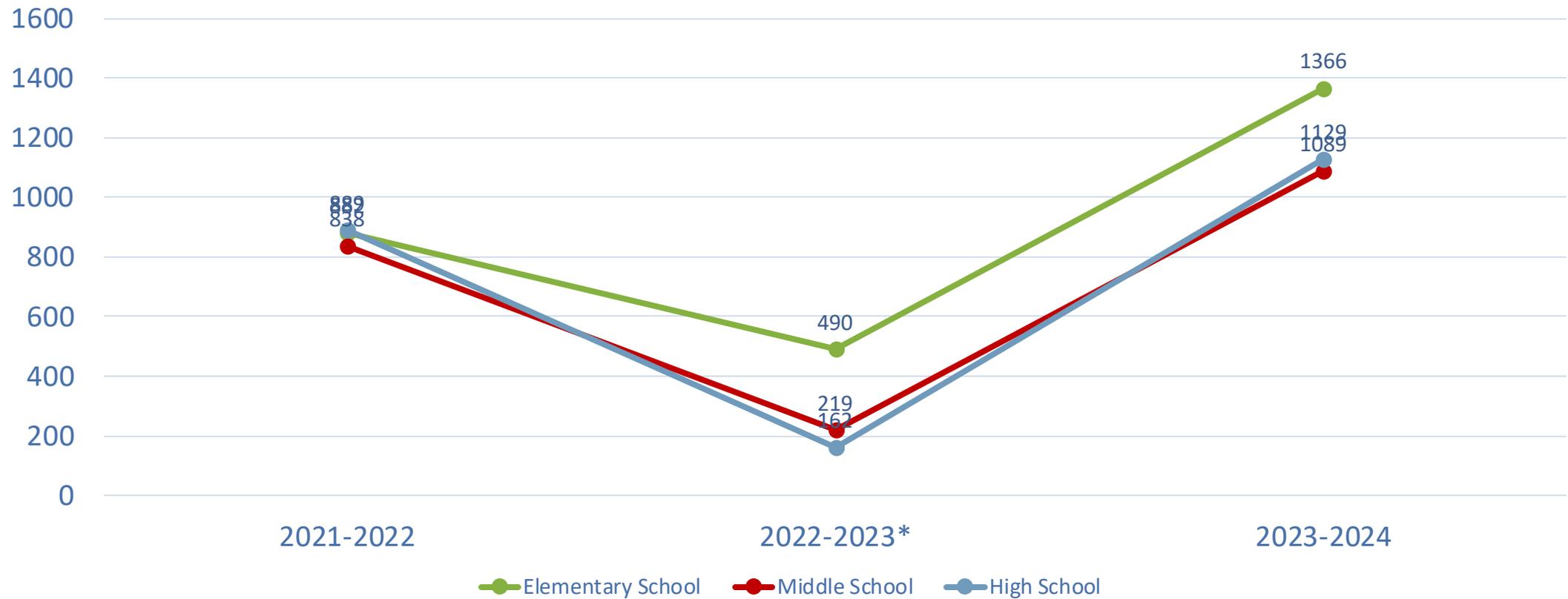
2. Diabetes

3. Severe allergies

4. Seizures

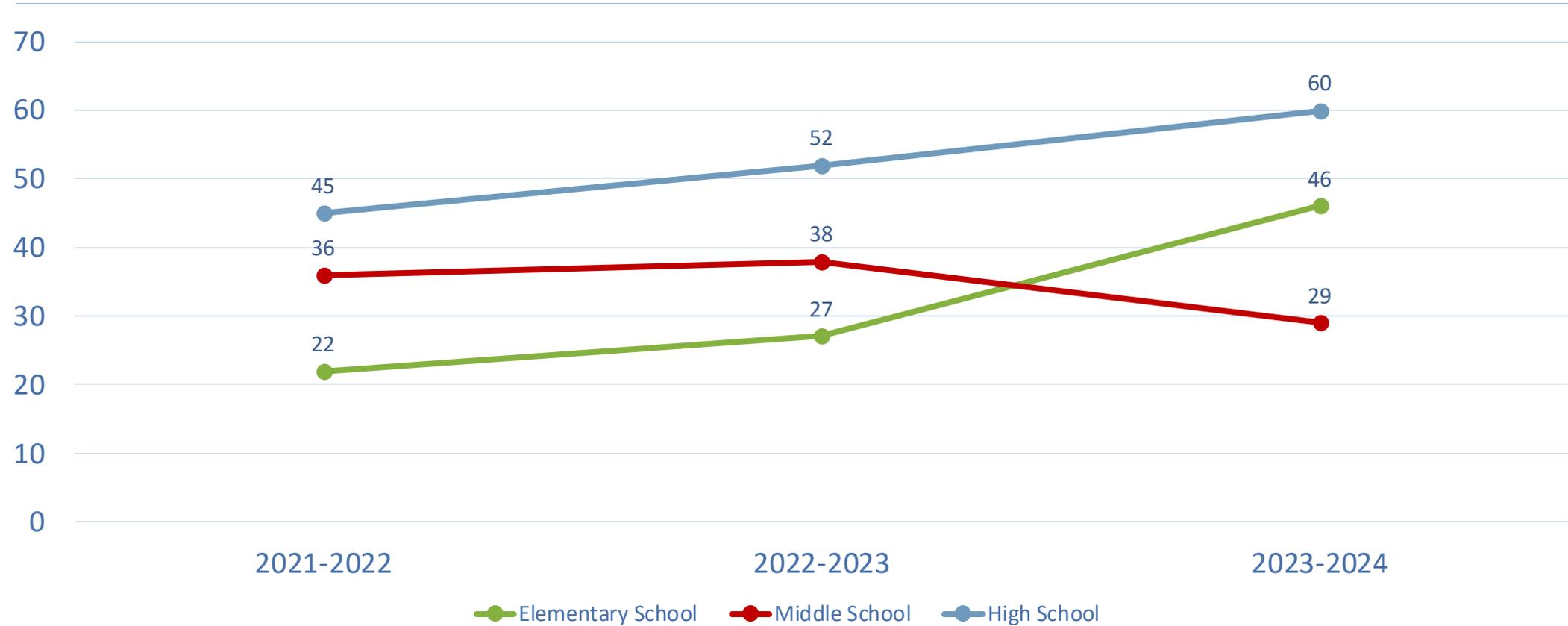
# Asthma Cases

## CCS & KCS



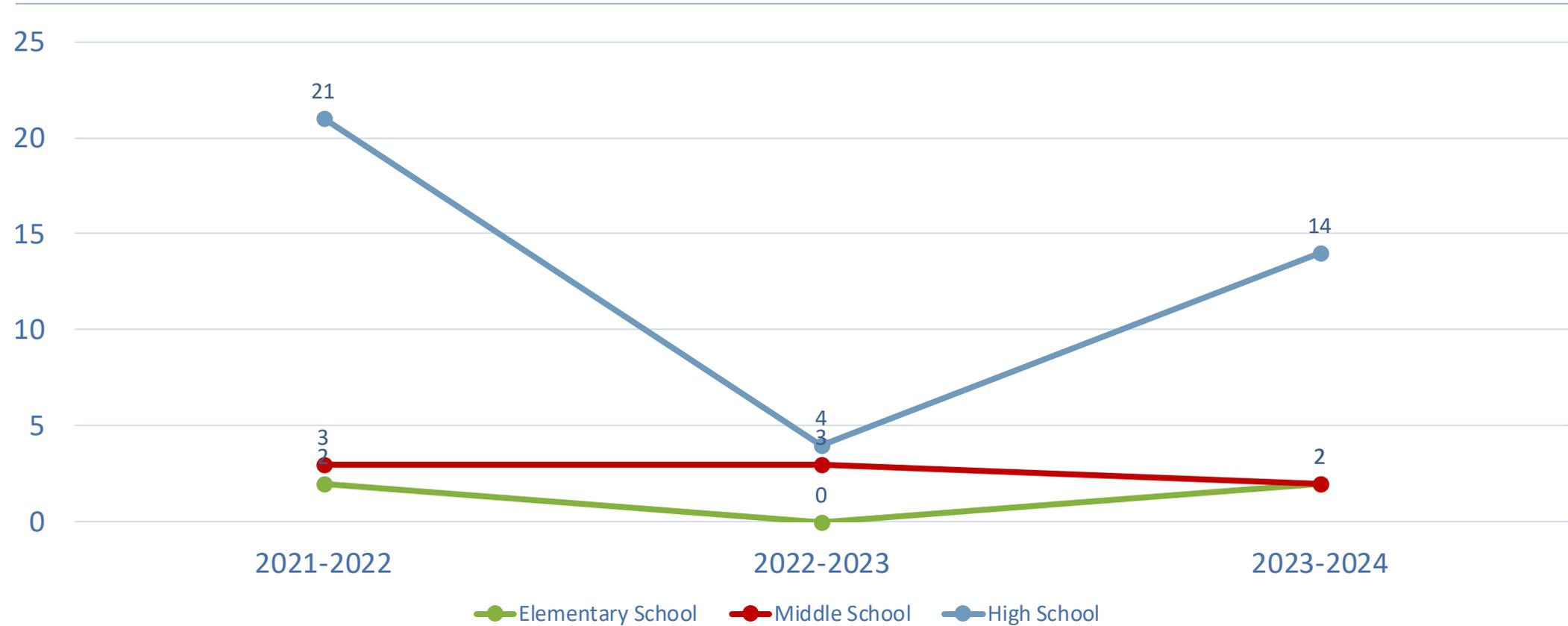
# Type I Diabetes Cases

## CCS & KCS

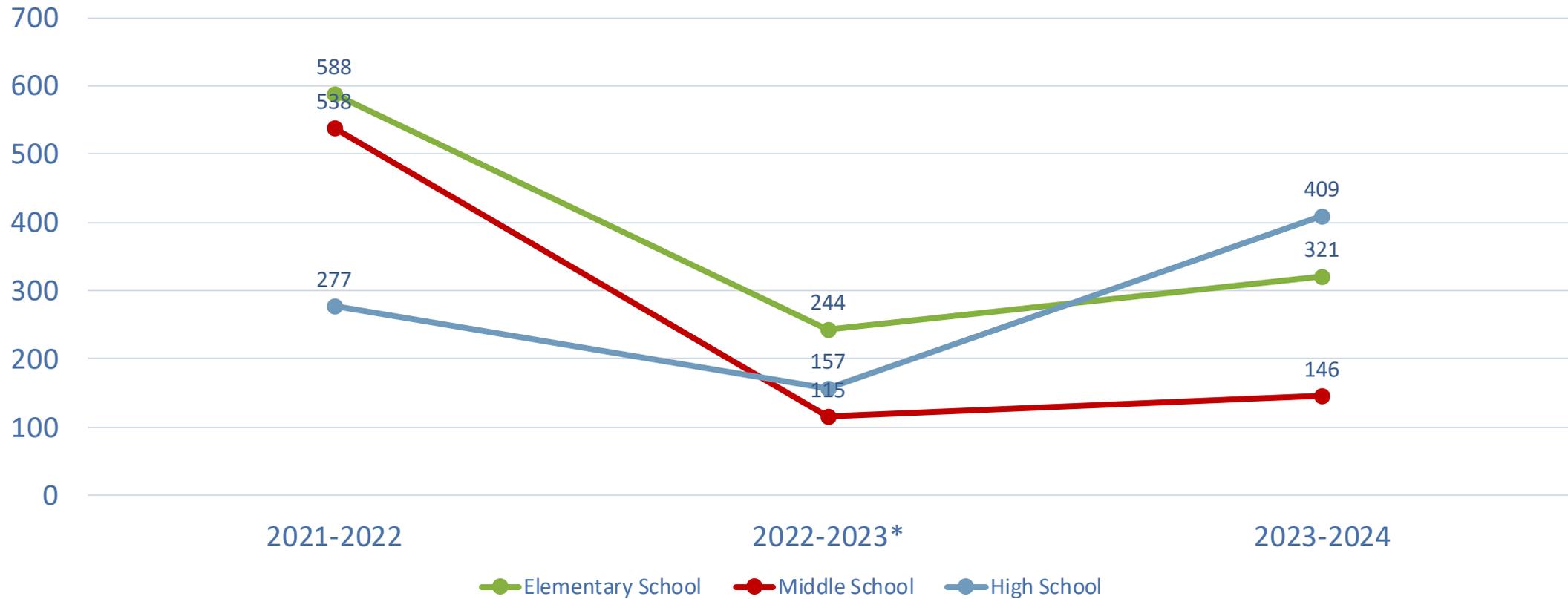


# Type II Diabetes Cases

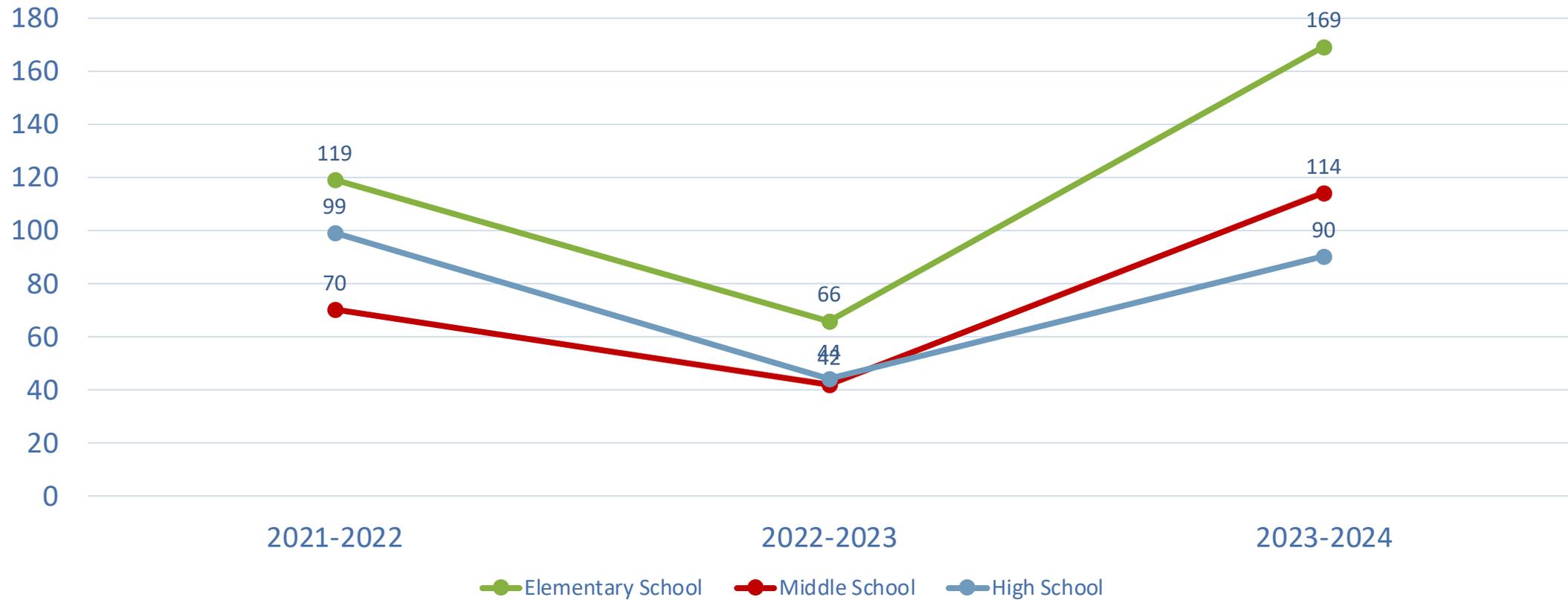
## CCS & KCS



# Severe Allergies Cases CCS & KCS

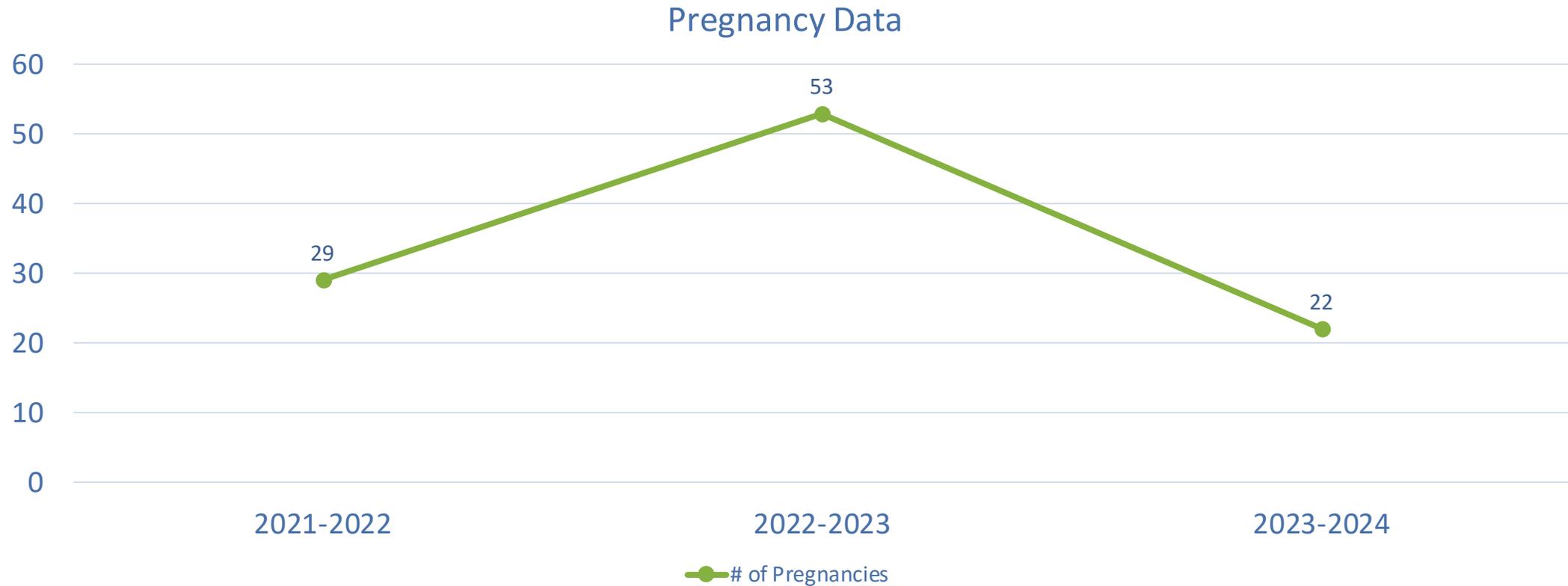


# Seizure Cases CCS & KCS



# School Nurse Impact

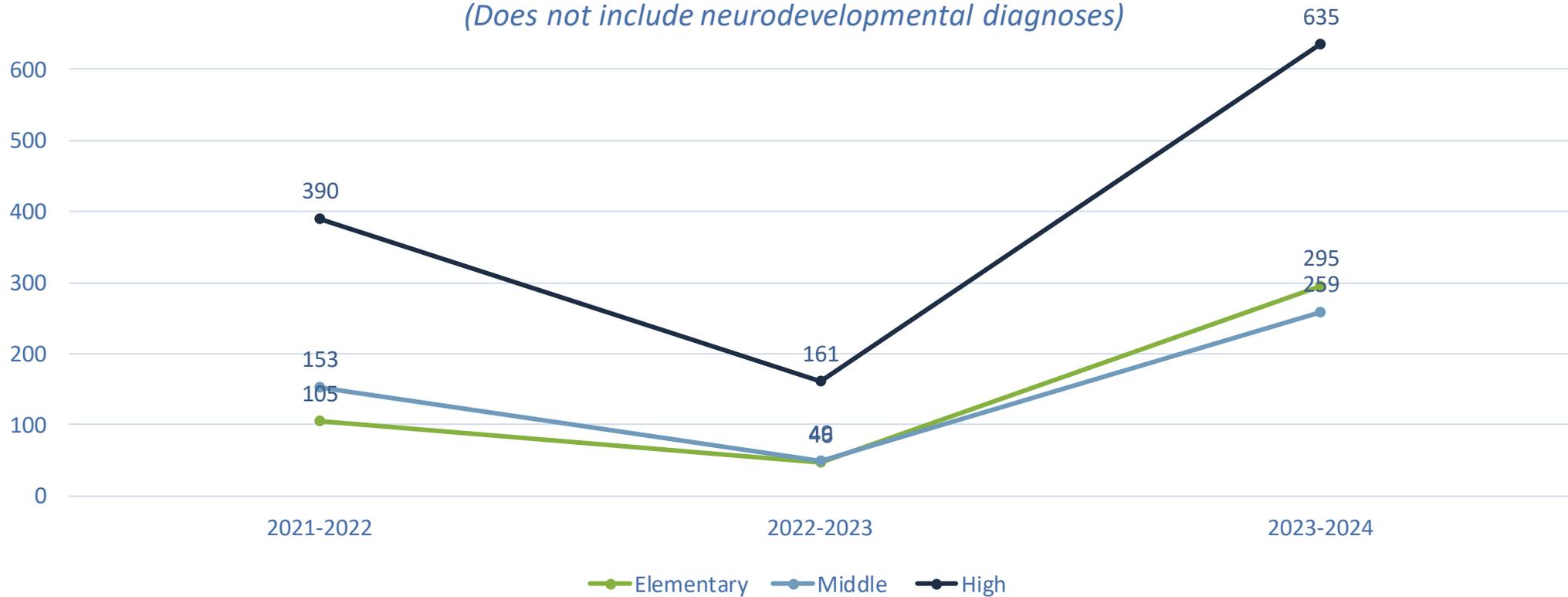
*Care Coordination, Health Promotion and Education*



# School Nurse Impact

Care Coordination, Health Promotion and Education

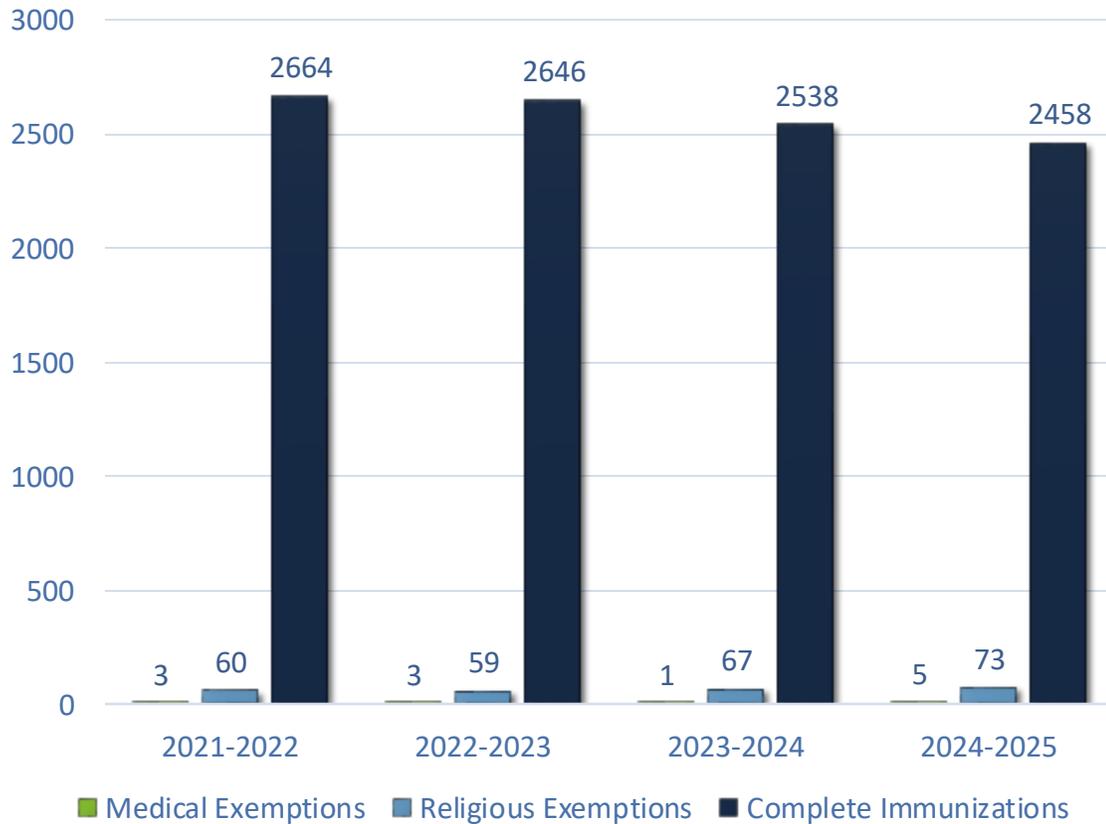
Emotional, behavioral and/or psychiatric condition  
(Does not include neurodevelopmental diagnoses)



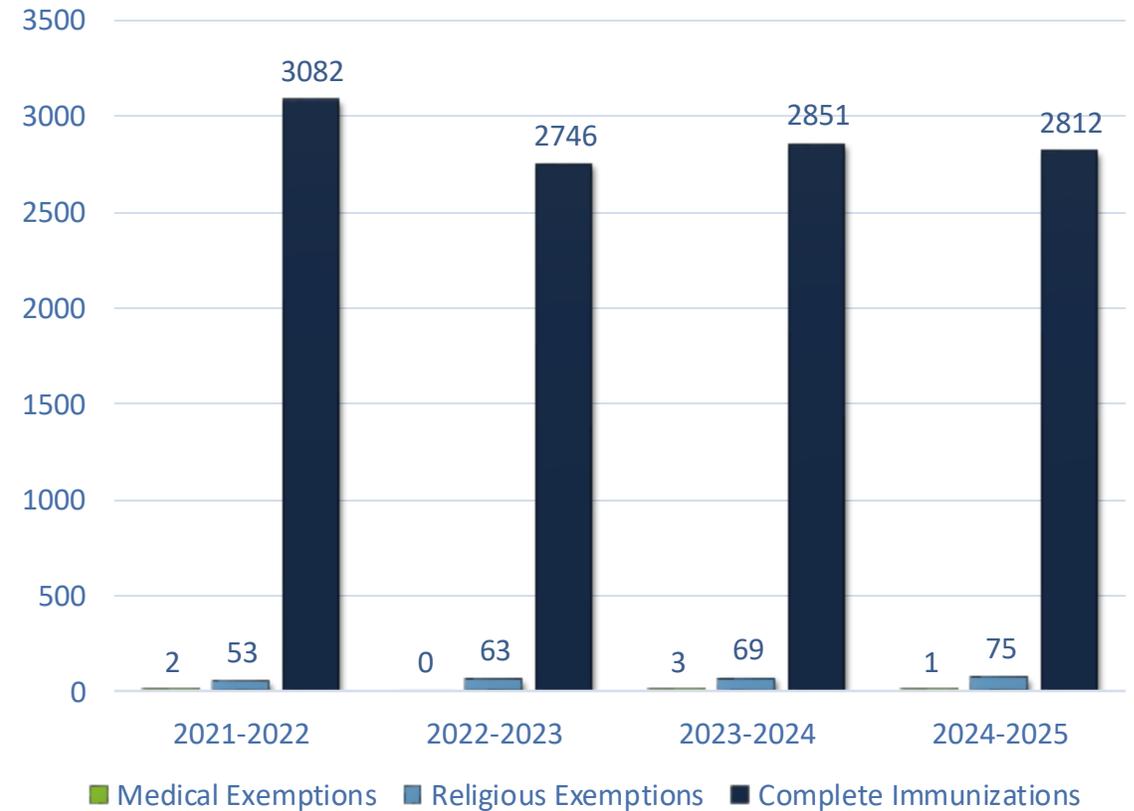
# Vaccination Exemptions

## CCS and KCS

### Kindergarten



### 7<sup>th</sup> Grade Tdap & Meningococcal





# ORAL HEALTH

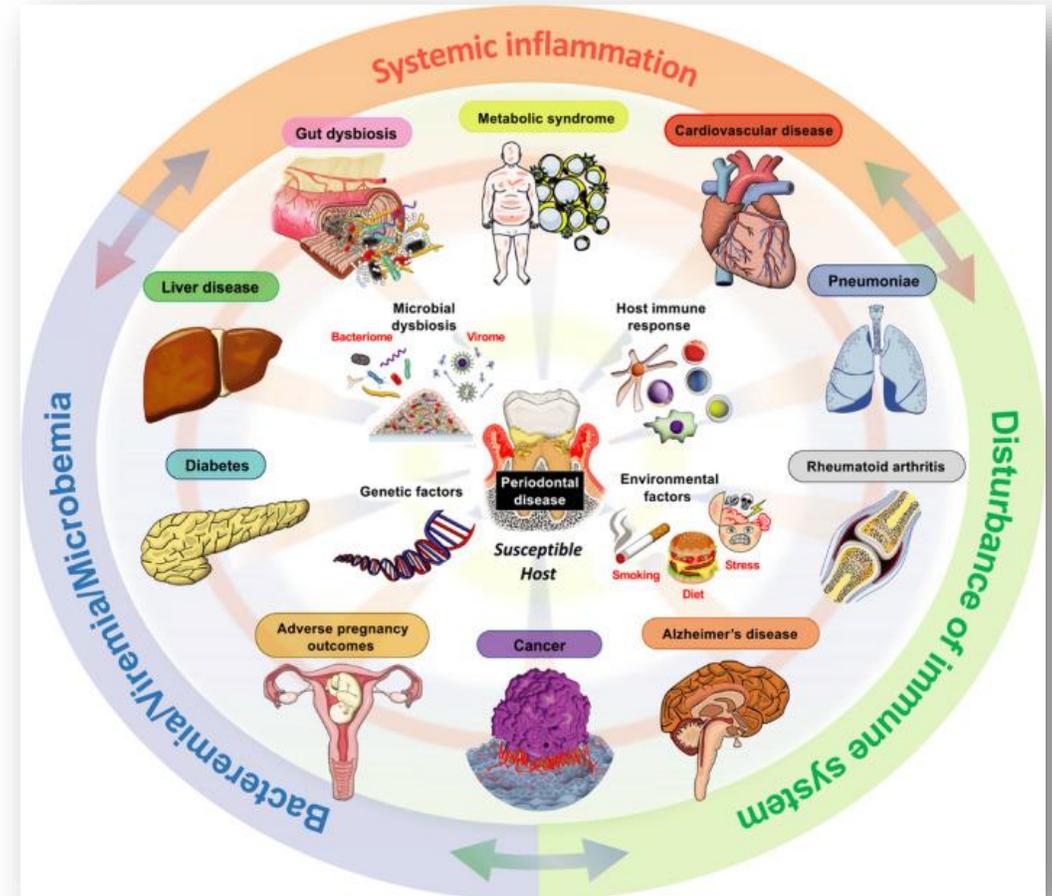
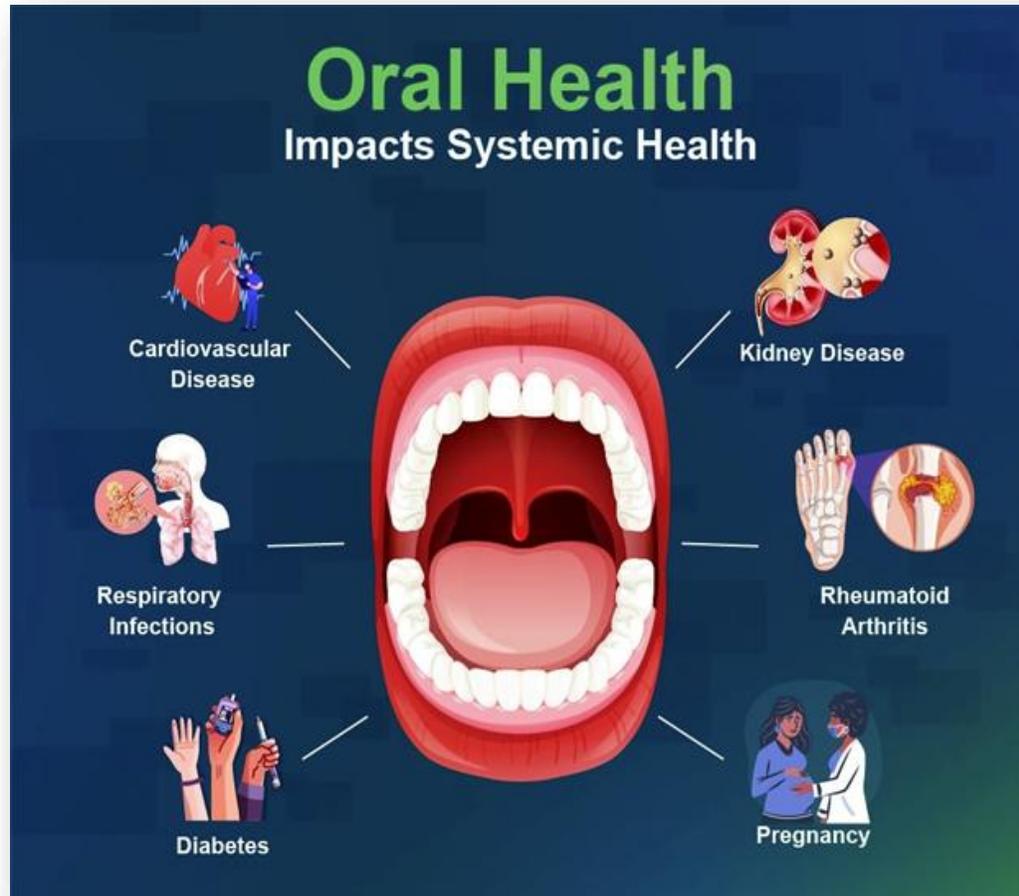
---

Elly Steel, DMD, MPH

**Dental Director**

Cabarrus Health Alliance

Oral health is integral to general health.  
*You cannot be healthy without oral health!*



Periodontal disease during pregnancy is associated with pre-term birth and low birth weight

Deep cleanings for periodontal disease can reduce A1C levels for patients with type 2 diabetes

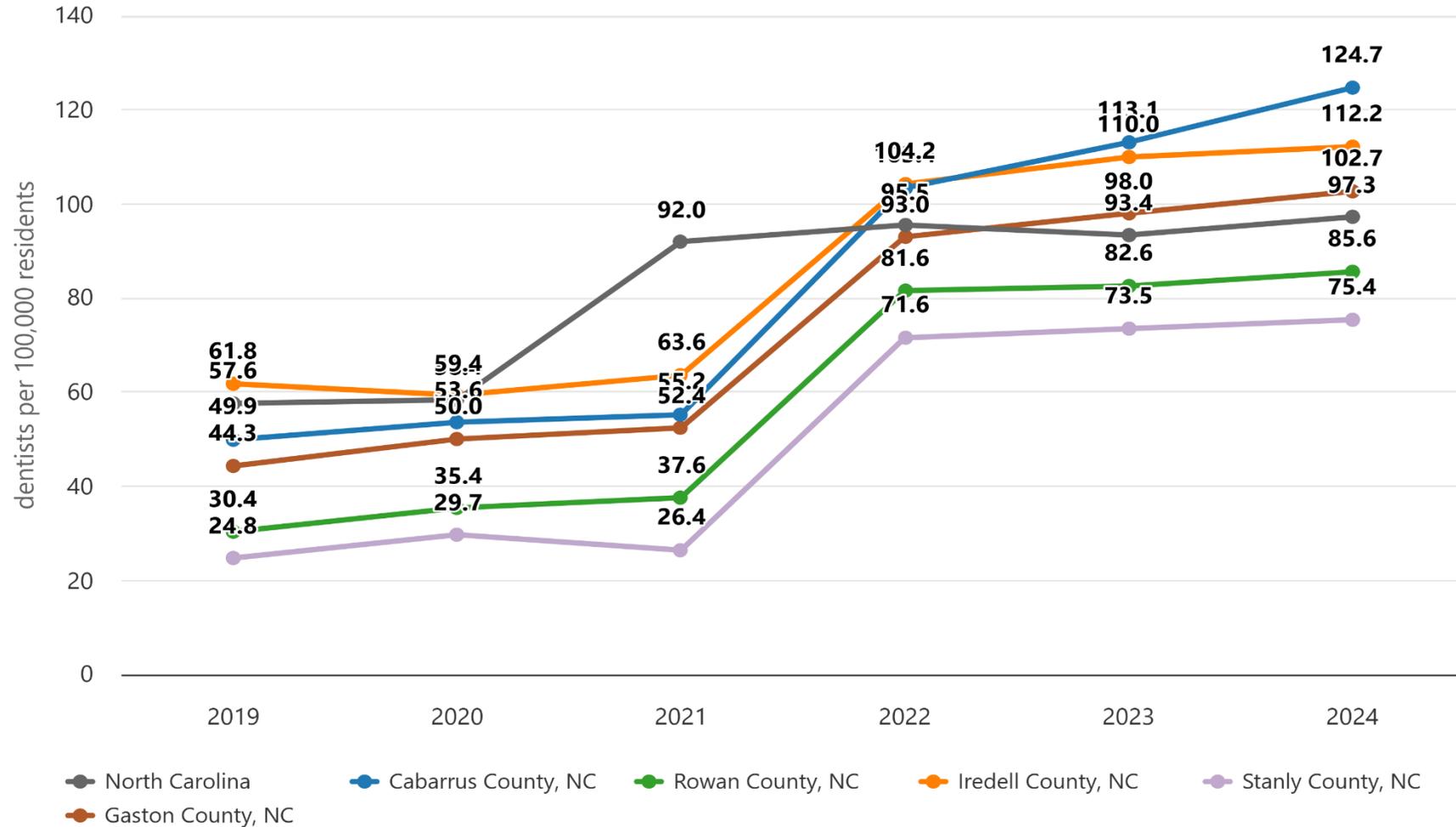
Associated with diabetes, metabolic syndrome, obesity, eating disorders, liver disease, cardiovascular disease, Alzheimer disease, rheumatoid arthritis, adverse pregnancy outcomes, and cancer

People with poor mental health are more likely than their peers to have untreated tooth pain

# Mouth-Body Connection

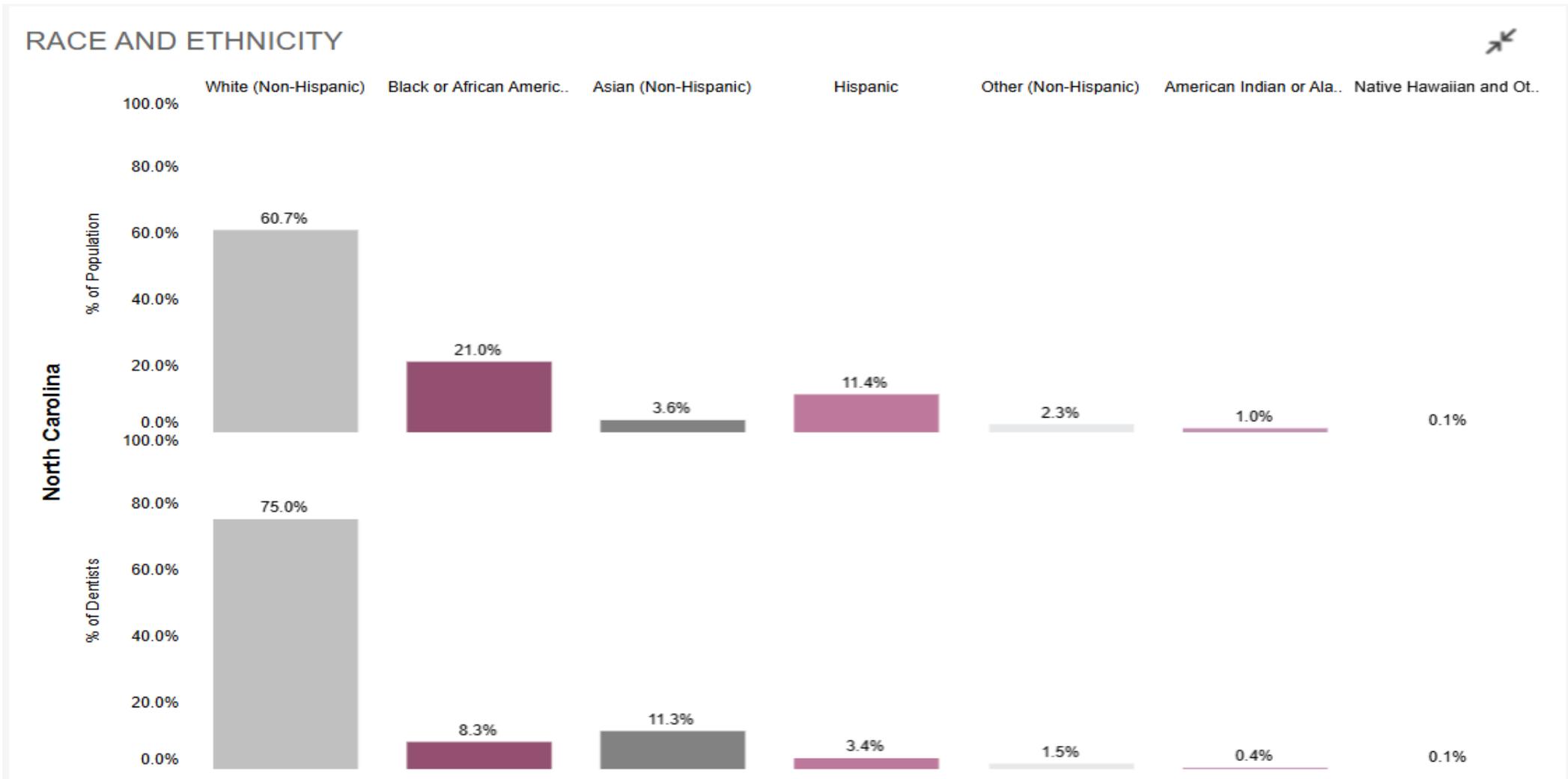
# Dentists per capita

North Carolina and comparison



Created on Metopio | metop.io | Data sources: Health Resources & Services Administration: Area Health Resources Files (County and State level data), Centers for Medicare & Medicaid Services (CMS): National Provider Identifier Files (NPI)  
Dentists per capita: Number of professionally active dentists, federal and non-federal, per 100,000 residents.

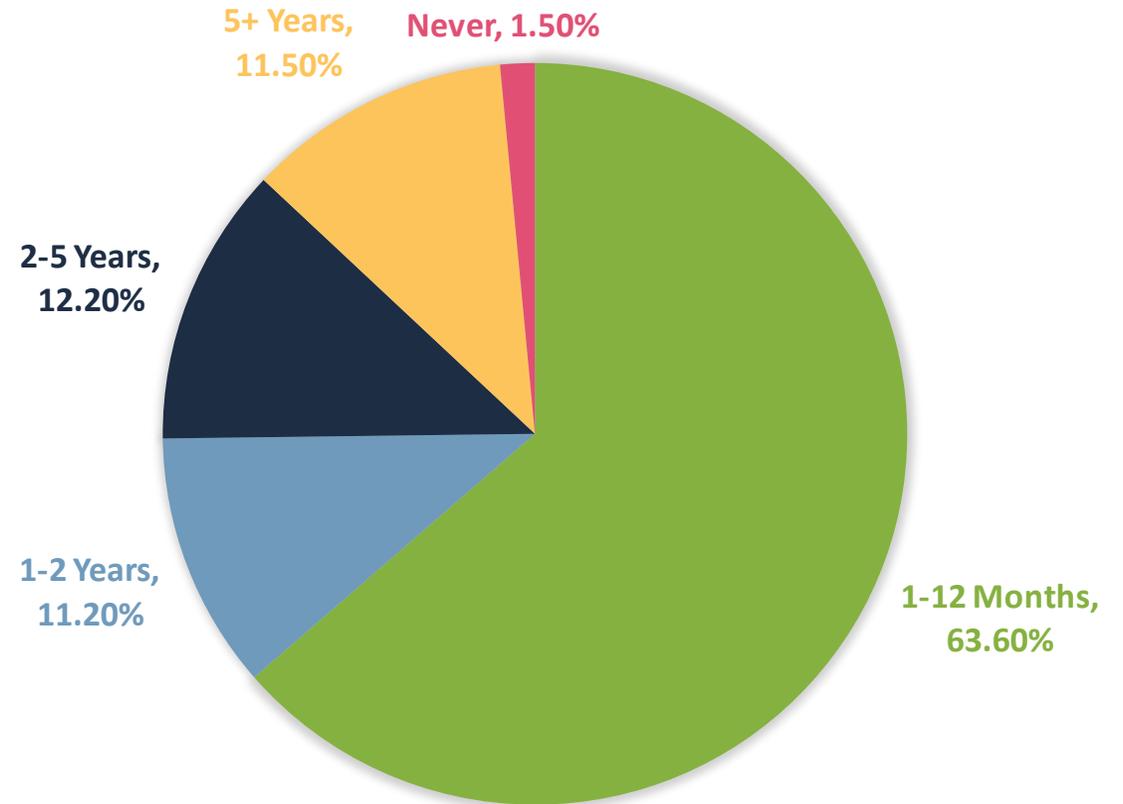
# NC Dentist Demographics, 2023



# Use of Dental Services

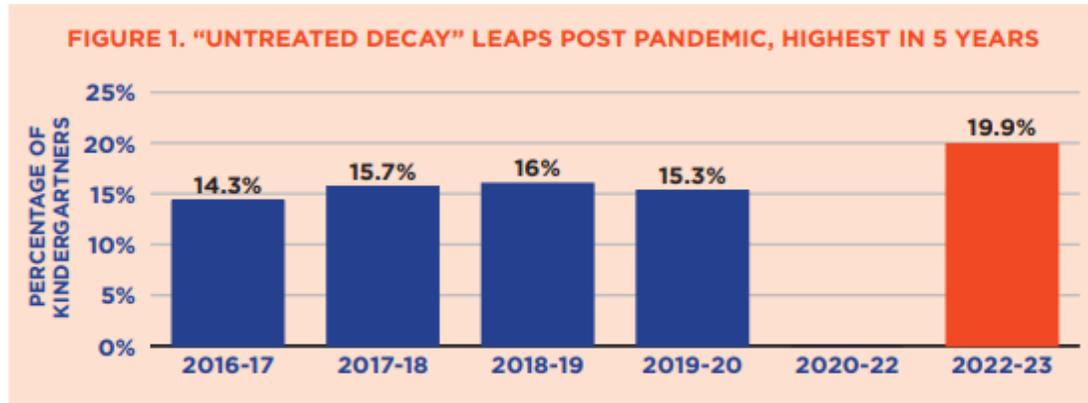
(North Carolina, 2022)

**How long has it been since you last visited a dentist or a dental clinic for any reason?**



# Kindergarten Decay Rates

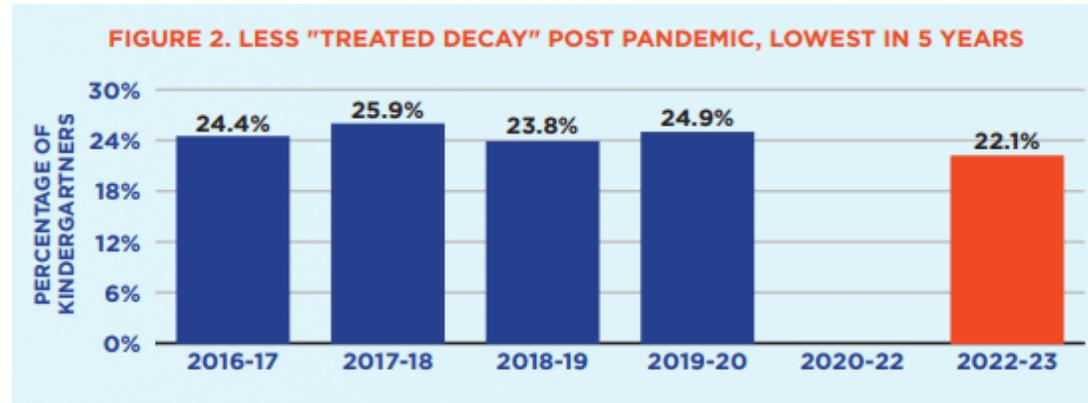
## United States



**3-FOLD RISE IN UNTREATED DECAY** among **Native Hawaiian/Pacific Islander** kindergartners post pandemic compared to **Asian** kindergartners with no increase in untreated decay post pandemic.



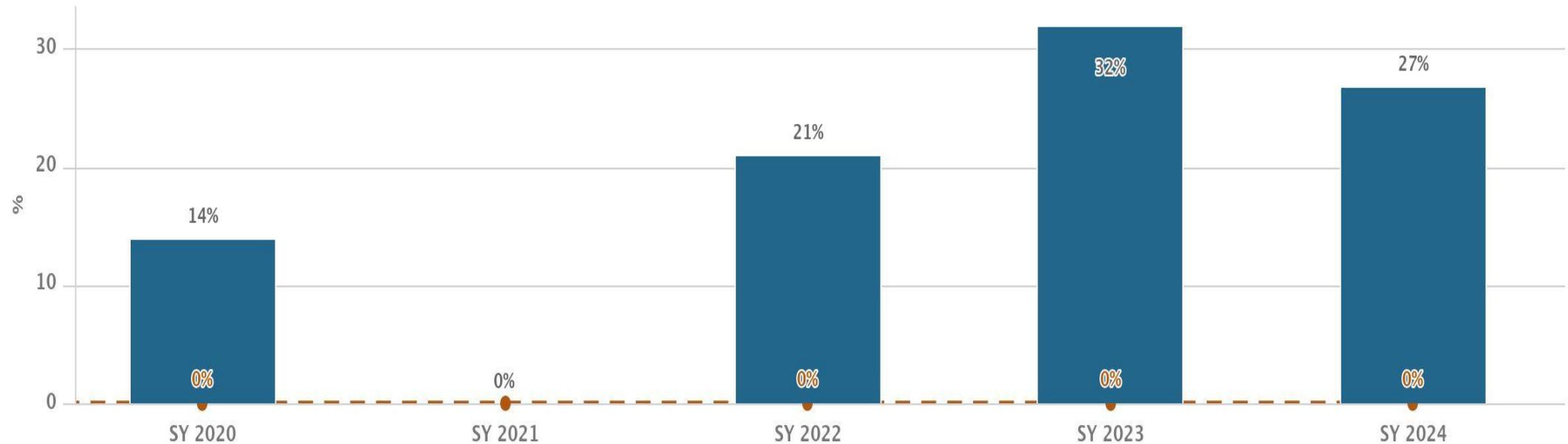
**2.5x DECREASE IN TREATED DECAY** among **Native Hawaiian/Pacific Islander** kindergartners post pandemic. **American Indian/Alaskan Native** and **Asian** kindergartners also had less treated decay post pandemic.



# % of Kindergarteners with untreated tooth decay *(Cabarrus)*

**% of Children in Kindergarten with Untreated Tooth Decay**

Data Source: Mobile Community Program Records

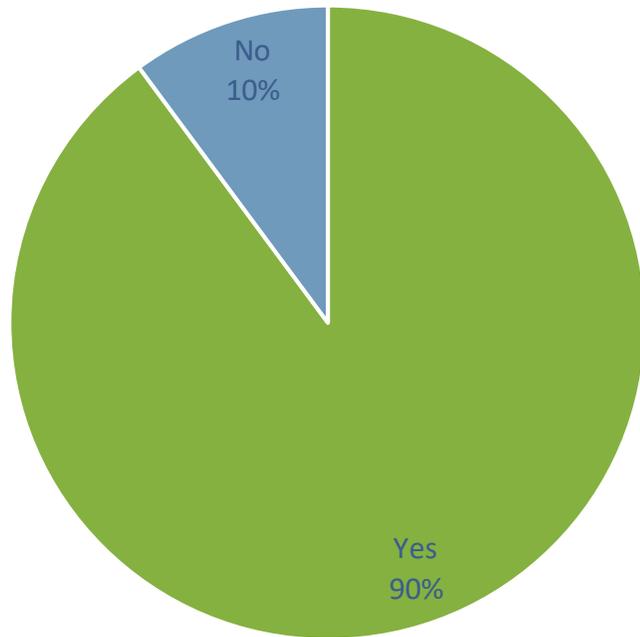


# Healthcare Utilization

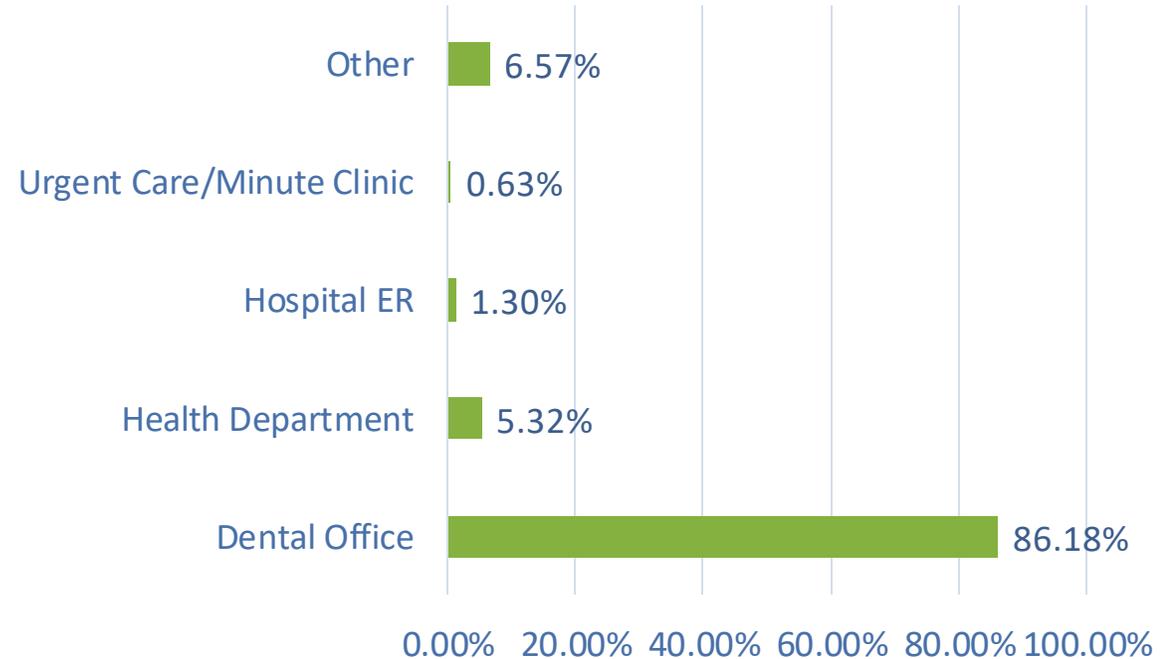
## 2020 Cabarrus Community Needs Survey

---

Do you or members of your family seek regular or preventative medical care?  
(Dental, eye, and physical exams)



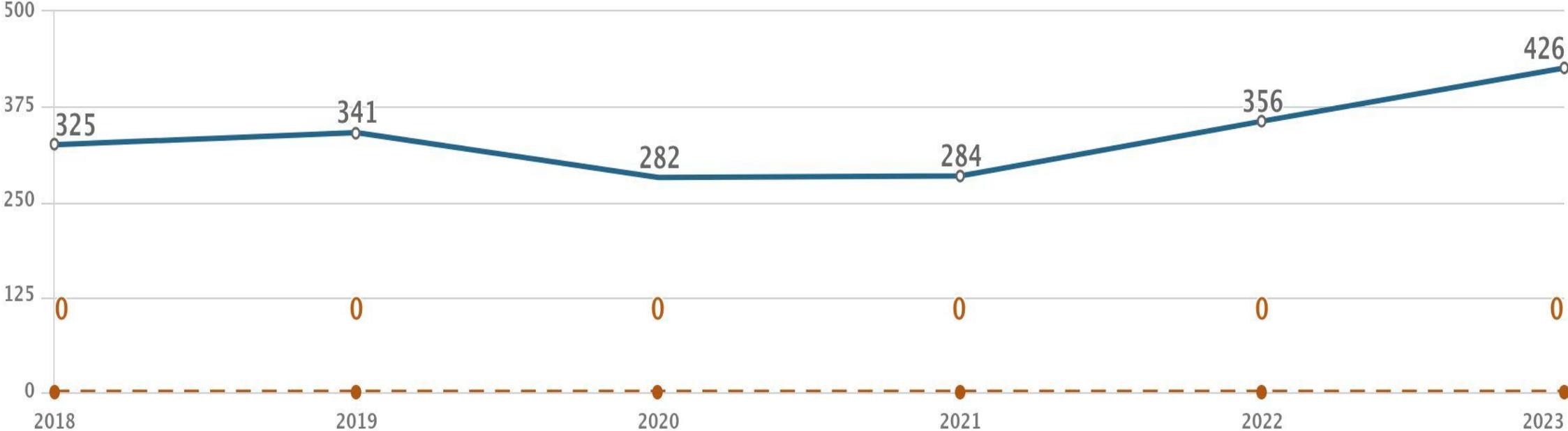
Where do you or members of your household go for dental care?



# Cabarrus County Residents ED Use

Number of Cabarrus County Residents who visit Emergency Department for Oral Health related Issue

Data Source: NC Detect Database for ED Visits for Oral Health Complaints



# Oral Healthcare Utilization

## *Region 4 Snapshot*

---

7

**54.6%**

of Medicaid eligible children & teens aged 1-20 years received preventive dental services



12

**15.0%**

of adults last visited a dentist 5 or more years ago



10

**41.2%** of

Medicaid eligible children aged 1-2 years received preventive oral health services



# Adults 65+ with all permanent teeth extracted

Having missing teeth or wearing dentures can affect nutrition, because people without teeth or with dentures often prefer soft, easily chewed foods instead of foods such as fresh fruits and vegetables (CDC).

9



**13.6%** of adults aged 65+ years had all of their permanent teeth extracted

**Region 4 Data: Alexander, Cabarrus, Catawba, Cleveland, Gaston, Iredell, Lincoln, Mecklenburg, Rowan, Stanly, and Union**

# Policy Effects

---

Medicaid expansion increased adults eligible for comprehensive dental services AND there are not enough providers to meet the need as only 45% of dentists accept Medicaid (many are not accepting NEW Medicaid patients)

ACA rules in 2024 were adjusted to include dental plans in the ACA Marketplace as an "Essential Health Benefit"

In 2021, NC Dental Practice Act was amended to increase services that could be provided by a Public Health Dental Hygienist in public health settings

Medicaid Dental Rates are still set at 2008 reimbursement levels. NC House Bill 60 proposes to increase reimbursement by 30%

# Fluoride

---



Naturally occurring mineral with variable levels naturally found in water



Community Water Fluoridation safely regulates fluoride levels to reach a low therapeutic dose.

- Those who live in areas with CWF experience 25% fewer cavities over their lifetime than people who do not



CWF saves NC Citizens more than \$800 million in treatment each year.

# HPV and Oral Health

- • • ● HPV causes 70% of throat cancers:



**These cancers occur in the oropharynx, the part of the throat just behind the mouth.<sup>6</sup>**

Symptoms of oropharyngeal cancer include pain when swallowing and a long-lasting sore throat, so dental providers should consider this if a patient mentions these conditions.

70% HPV

30% other

- • • ● Poor oral health is a risk factor:

People with oral HPV are more likely to rate their oral health as fair or poor.

**Researchers found that poor oral health is a risk factor of oral HPV infection.<sup>7</sup>**



- • • ● The HPV vaccine saves lives:



**Receiving both doses\* of the HPV vaccine can prevent more than 90% of the six types of cancers that this virus can cause.** Health experts recommend

HPV vaccination for girls and boys ages 11–12 years to protect against these cancers.

Vaccination is also recommended for everyone through age 26, if they aren't already vaccinated.<sup>4</sup>

# BEHAVIORAL HEALTH AND SUBSTANCE USE

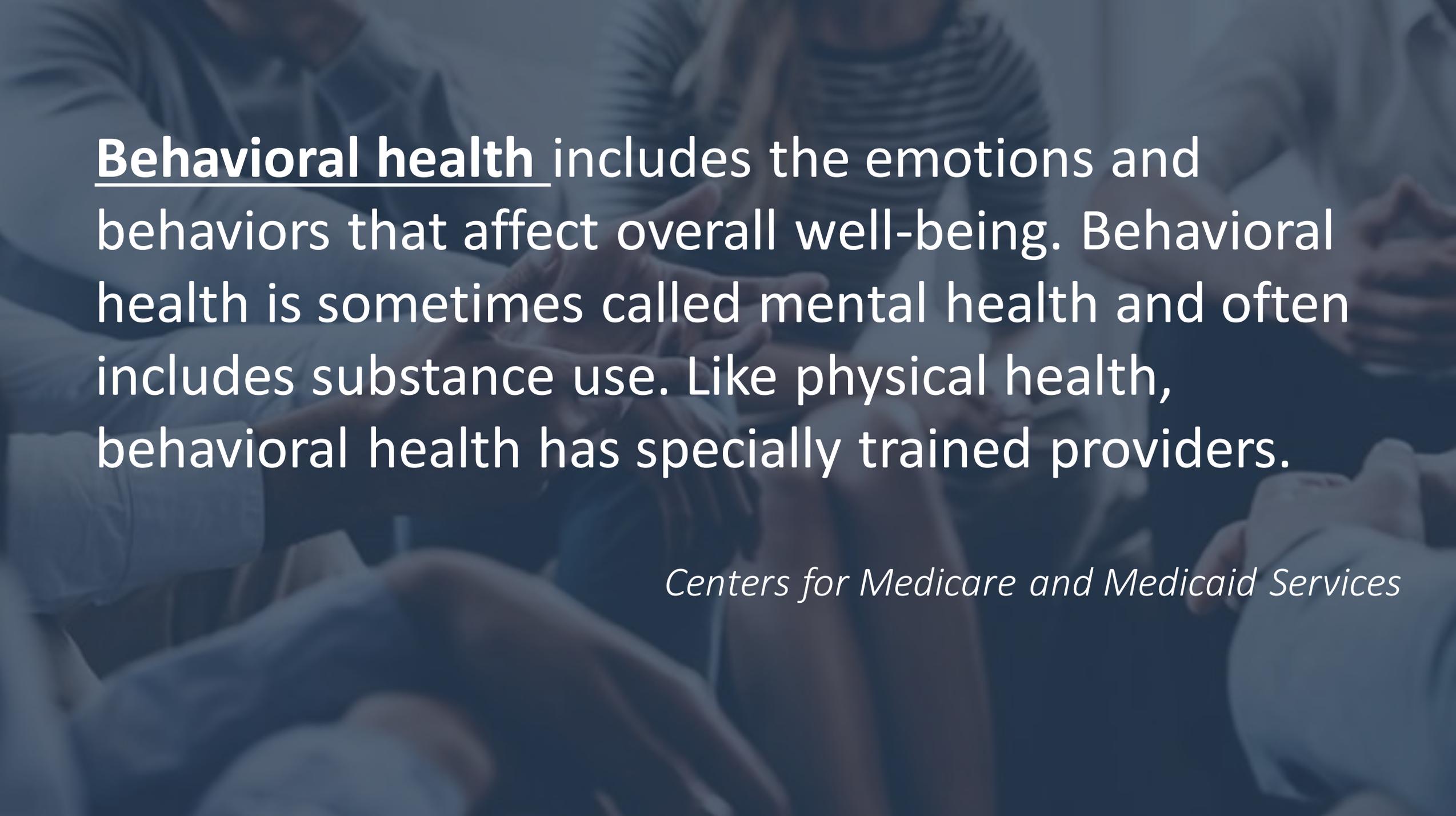
---



**Sonja Bohannon-Thacker**  
**Behavioral Health Program Director**  
Cabarrus Health Alliance



**Kamilah McKissick, Psy.D.**  
**Behavioral Health Director**  
Cabarrus County Department of Health and Human Services

A group of people sitting in a circle, holding hands, symbolizing support and community. The image is overlaid with a semi-transparent blue filter.

**Behavioral health** includes the emotions and behaviors that affect overall well-being. Behavioral health is sometimes called mental health and often includes substance use. Like physical health, behavioral health has specially trained providers.

*Centers for Medicare and Medicaid Services*

# The RIPPLE EFFECT of Mental Illness

Having a mental illness can make it challenging to live everyday life and maintain recovery. Let's look at some of the ways mental illness can impact lives — and how the impact can ripple out.



People with serious mental illness have an increased risk for chronic disease, like diabetes or cancer

## PERSON



Rates of cardiometabolic disease are twice as high in adults with serious mental illness



19% of U.S. adults with mental illness also have a substance use disorder



At least **8.4 million** Americans provide care to an adult with an emotional or mental illness

## FAMILY

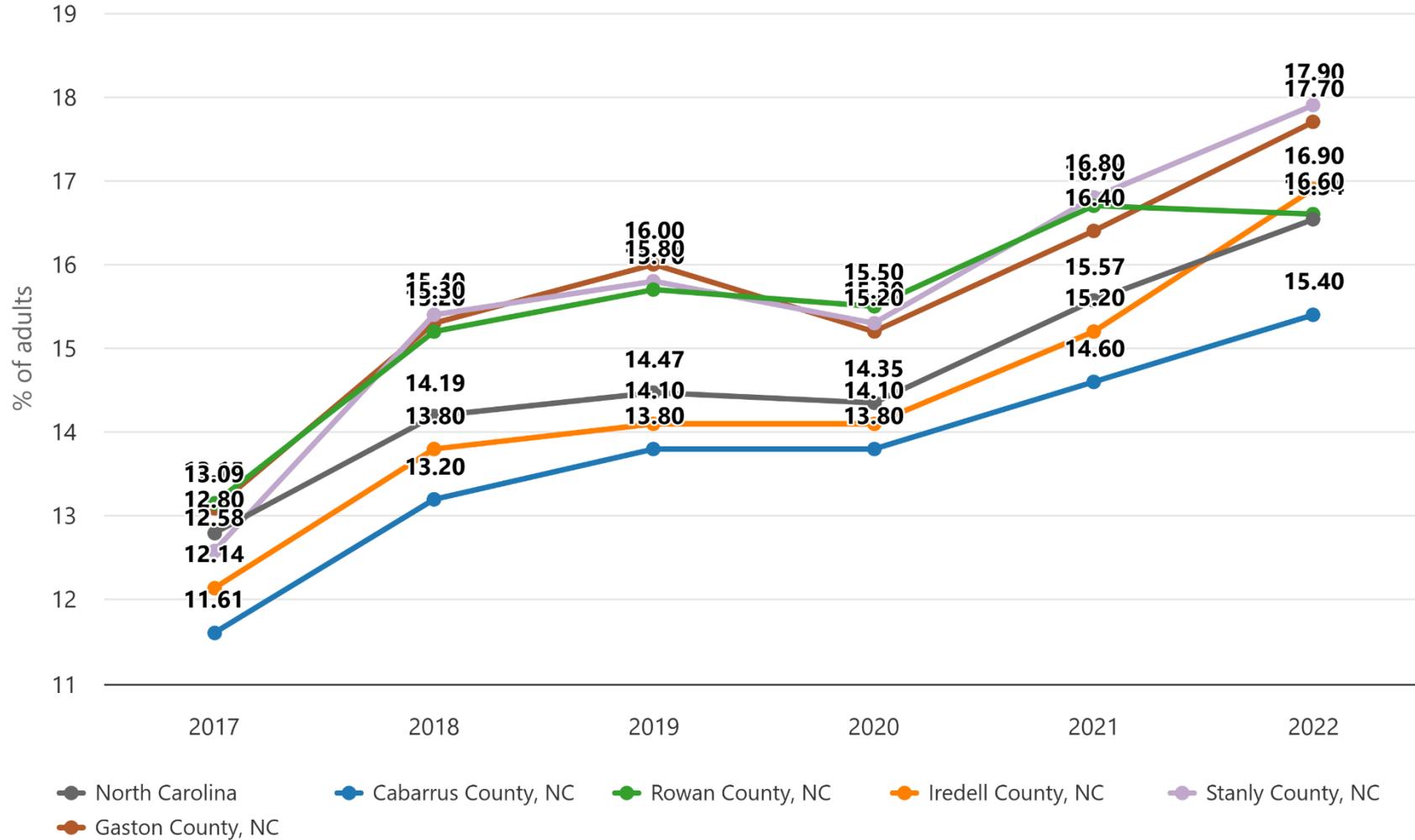


Caregivers spend an average of **32 hours** per week providing unpaid care



# Poor self-reported mental health

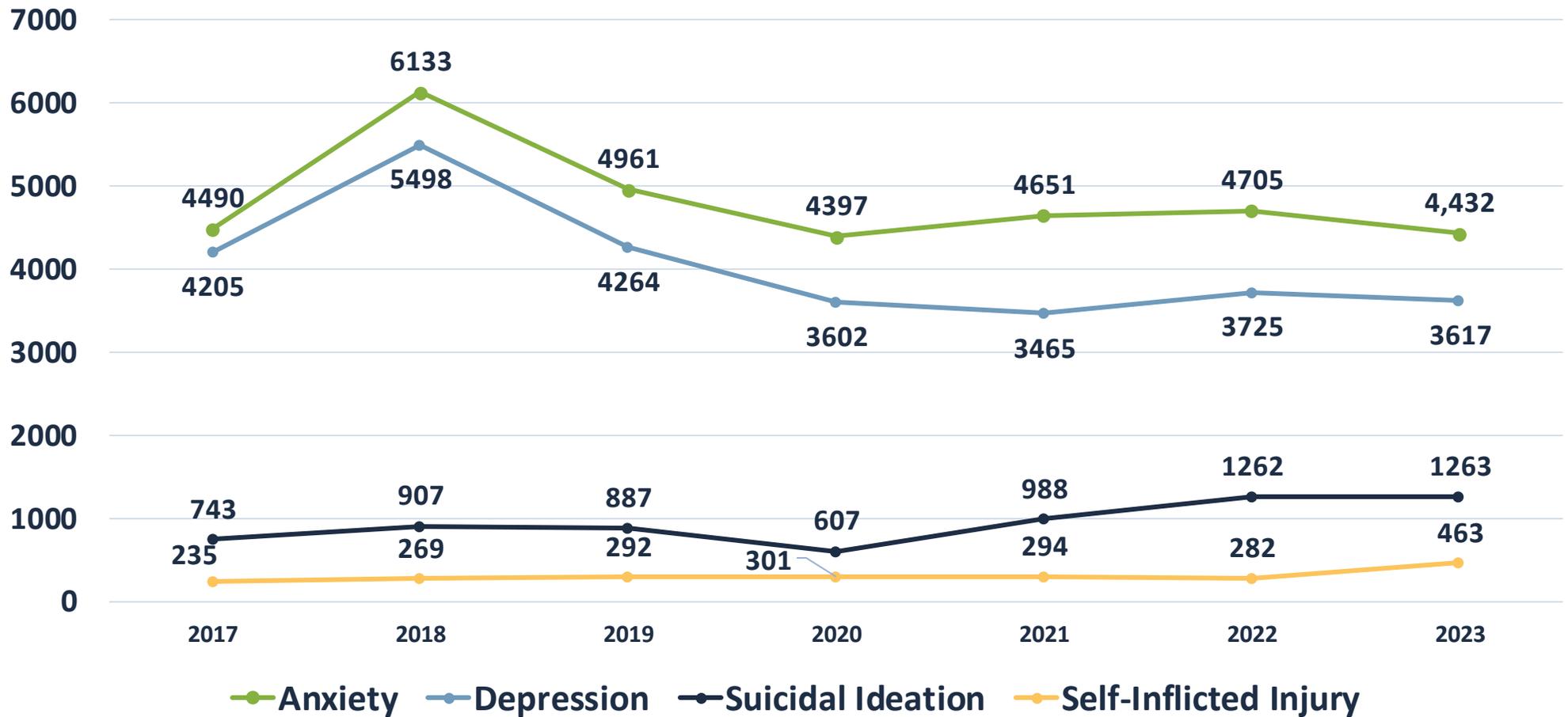
North Carolina and comparison



Created on Metopio | metop.io | Data source: Centers for Disease Control and Prevention (CDC); PLACES

**Poor self-reported mental health:** Percent of resident adults aged 18 and older who report 14 or more days during the past 30 days during which their mental health was not good.

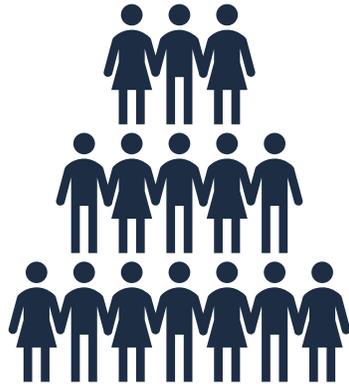
# Emergency Department Visits for Mental Health Conditions



# Daymark Services

January 1, 2024-December 31, 2024

## Mobile Engagement



**Service Encounters:**  
Adults 645  
Children 991



**Total Average  
Response Time  
35 minutes**

## Outpatient Services

Adult MH

1,517

Child MH

379

Adult SU

1,227

Child SU

94

Adult Other

1931

Child Other

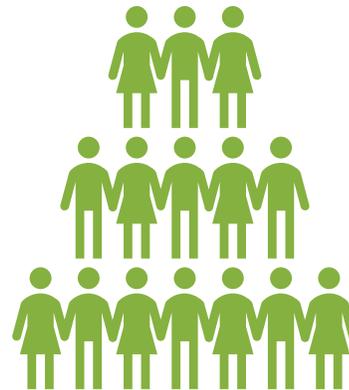
367

# January 1, 2024 - December 31, 2024

## Facility-Based Crisis

---

Unduplicated Cabarrus  
County residents served in  
any location  
**819**

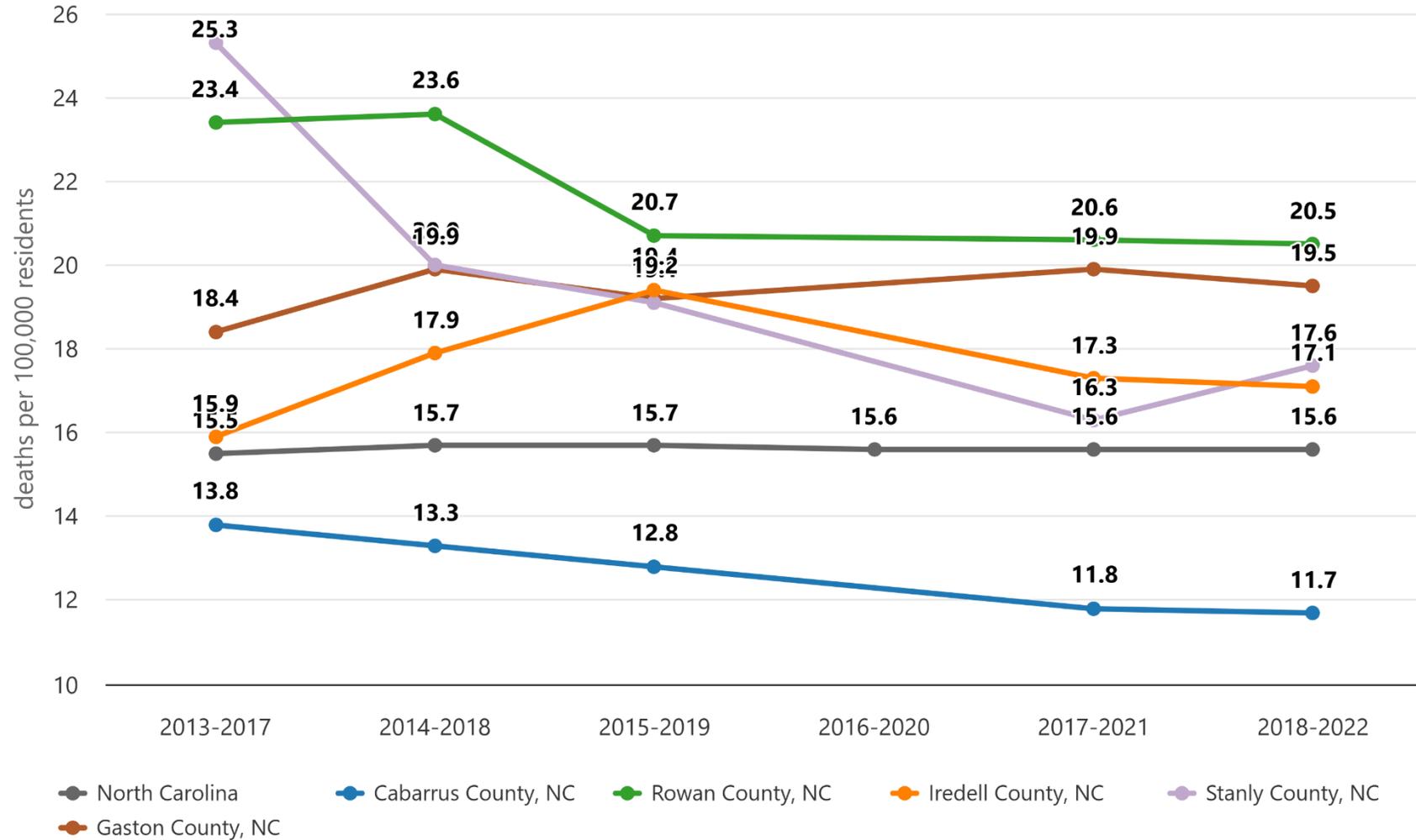


Number of service encounters for  
Cabarrus County residents  
**6,361**

Number of hospital Diversions  
**1,458**

# Suicide mortality (rate, NC)

North Carolina and comparison

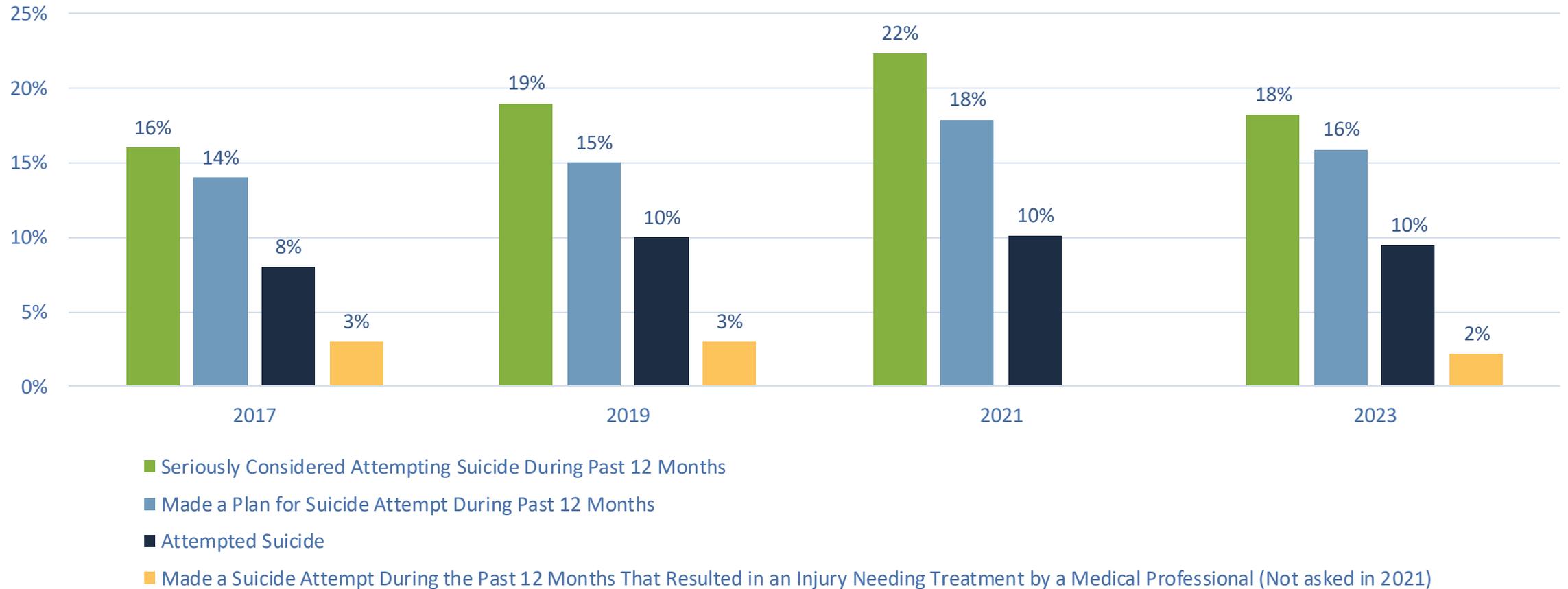


Created on Metopio | metop.io

**Suicide mortality (rate, NC):** Suicide is defined as violent death caused by the intentional use of physical force or power onto oneself, resulting in death.

# Suicidal Behaviors

## 2017-2023 NC High School Students



# School Based Mental Health Services - CCS

---

## Sept. 2022 – May 2023

- 12,202 unique students served
- 20,538 individual sessions
- 5,727 group sessions
- 612 parent education sessions

## Aug. 2023 – May 2024

- 12,204 unique students served
- 18,661 individual sessions
- 5,513 group sessions
- 1,692 referrals/students actively engaged with school-based therapy – Services provided by approved community partners

## Aug. 2024 – Feb. 2025\*

- 16,532 unique students served
- 19,950 individual sessions
- 6,406 group sessions
- 1,754 referrals/students actively engaged with school-based therapy – Services provided by approved community partners

*\*tracking significantly higher*

# Carceral Services in Cabarrus County

July 1, 2023-June 30, 2024

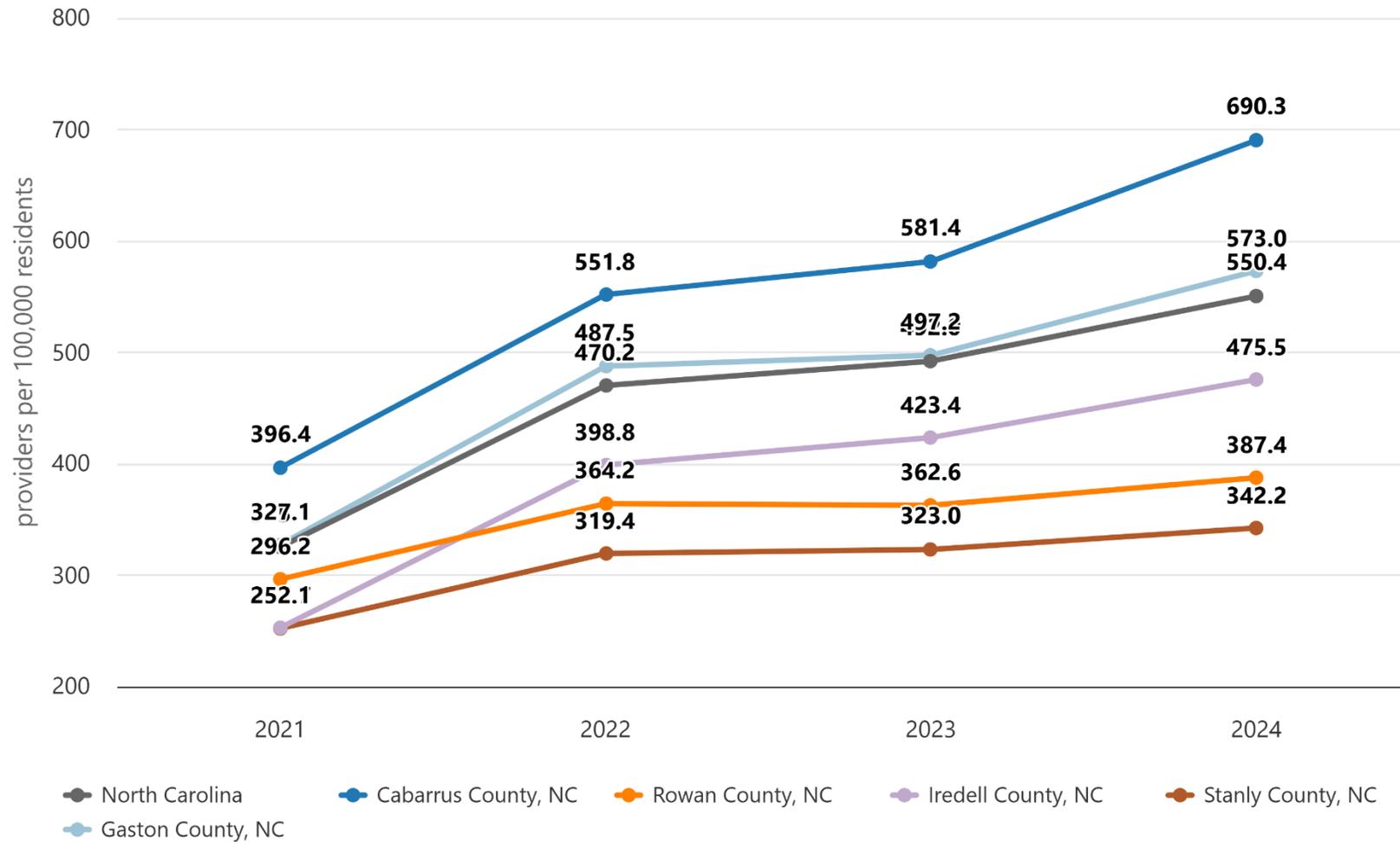
- **1192** BH Assessments Completed
- **117** individuals received individual therapy services
- **202** individuals received case management services

July 1, 2024- February 28, 2025

- **885** BH Assessments Completed
- **330** individuals received individual therapy services
- **271** individuals received case management services

# Mental health providers per capita

North Carolina and comparison



Created on Metopio | metop.io | Data source: Centers for Medicare & Medicaid Services (CMS): National Provider Identifier Files (NPI)

**Mental health providers per capita:** Number of mental health providers per 100,000 residents, such as psychiatrists, psychologists, and specialists in addiction medicine, counseling, therapy, and behavioral health. Includes advanced practice nurses and nurse practitioners.

# Evidence Based Practices

Treatment Model	Acronym	Client Ages	# of Clinicians 2023	# of Clinicians 2024
Attachment & Bio- Behavioral Catch-Up	ABC	0-2	1	0
Child and Parent Psychotherapy	CPP	0-5	0	0
Parent-Child Interaction Therapy	PCIT	2.5-6.5	3	1
Trauma-Focused Cognitive-Behavioral Therapy	TF-CBT	3-18	29 <i>6 Spanish speaking</i>	22
Structured Psychotherapy for Adolescents Responding to Chronic Stress	SPARCS <i>All levels/types</i>	12-21	5	6
Eye Movement Desensitization and Reprocessing	EMD-R	All ages		4
Cognitive Processing Therapy	CPT	18 and up		2

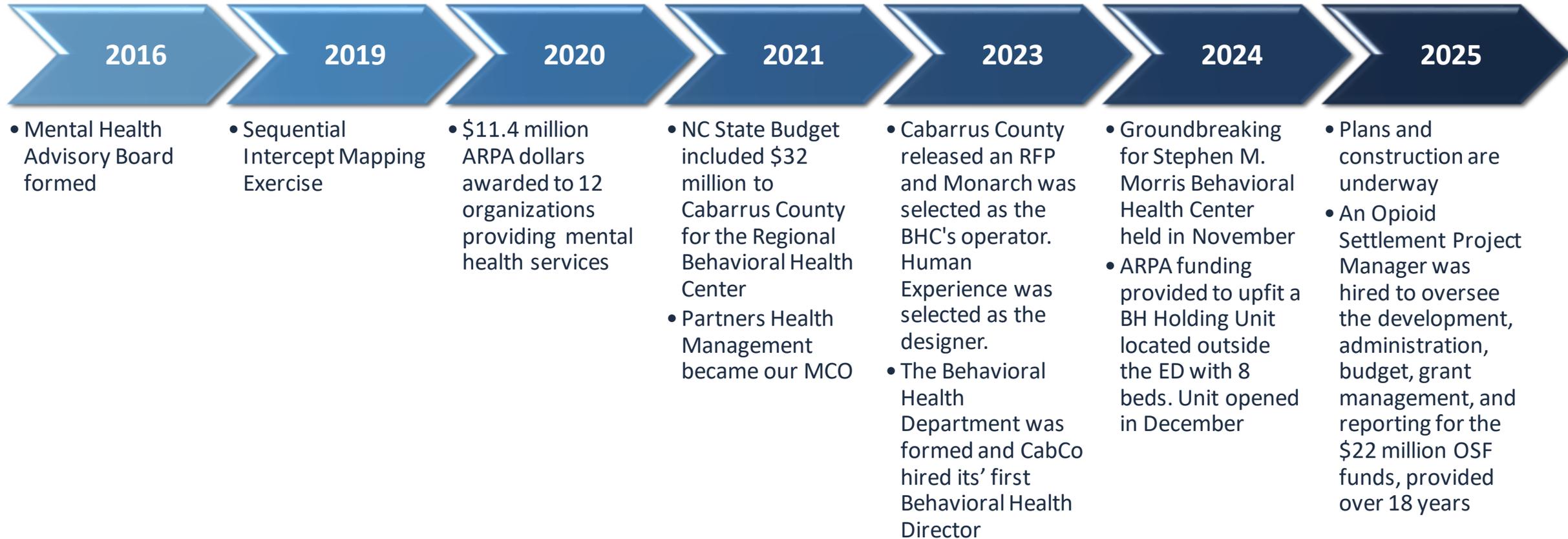
# Behavioral Health *Efforts and Strategies (CHA)*

---



# Behavioral Health *Efforts and Strategies (Cabarrus County)*

---



# Cabarrus County American Rescue Plan Act

\$42 million awarded to CabCo, \$11.4 awarded to 12 organizations providing mental health services

<p><b>Amazing Grace Advocacy:</b> Provides services to children in Cabarrus County with complex disabilities of the brain</p>	<p><b>Cabarrus Healthcare Foundation:</b> Created an 8 bed behavioral health holding unit at Atrium Cabarrus</p>	<p><b>Cabarrus Public Health Interest:</b> Provided services to at least 675 uninsured or underinsured residents</p>	 <p>Year One <span style="float: right;">11/21-10/22</span> 6,081 individuals served, average of 507 per month</p>
<p><b>Clarkinetics &amp; Associates:</b> Provided services on an individual or group basis</p>	<p><b>Camino Health Center:</b> Launched a bilingual behavioral health services program at Concord location</p>	<p><b>Cano Family Services:</b> Provided services to individuals and families</p>	 <p>Year Two <span style="float: right;">11/22-10/23</span> 7,002 individuals served, average of 584 per month</p>
<p><b>Genesis A New Beginning:</b> Provided services for those 18 and over; Provide on-site therapy in CCS and KCS</p>	<p><b>Kannapolis Head Start:</b> Determined mental health needs within the Head Start program</p>	<p><b>Mental Health America:</b> Emotional Toolboxes for Building Resilient Communities</p>	 <p>Year Three <span style="float: right;">11/23-10/24</span> 6,601 individuals served, average of 550 per month</p>
<p><b>Rise 2 Thrive Family Resource Center:</b> Provided services through 8-week, group facilitated program</p>	<p><b>Silver Linings For Seniors:</b> Provided mental health first aid training; Provided services to Cabarrus County residents</p>	<p><b>Vida Wellness Center:</b> Provided services through individual sessions, family sessions, and group counseling</p>	 <p>Year Four <span style="float: right;">11/24-12/24</span> 189 individuals served, average of 16 per month</p>

# One Cabarrus

## ARPA Legacy Project

[cabarruscounty.us/onecabarrus](http://cabarruscounty.us/onecabarrus)

The screenshot displays the OneCabarrus web application interface. At the top, there is a blue navigation bar with the OneCabarrus logo on the left and 'Services' and 'Legend' links on the right. Below the navigation bar, a search bar contains the text 'mental health'. A search results dropdown menu is open, listing several organizations and services under the heading 'Organizations & Services'. The map in the background shows various locations in Cabarrus County, including Kannapolis, Concord, and Mt. Pleasant, with colored dots indicating service locations. A legend on the right side of the map lists the following services: Food Assistance (red dot), Education Support (blue dot), Healthcare (green dot), Mental Health (purple dot), Financial Assistance (orange dot), Housing (yellow dot), Childcare (pink dot), Energy Assistance (brown dot), Daycare Subsidy (teal dot), Senior Services (dark blue dot), and Other (grey dot).

**Search result**

**Organizations & Services**

- Amazing Grace Advocacy, St. James Lutheran Church
- LiveWell Counseling, Counseling
- Cano Family Services
- Camino Health Center
- Families First - NC Inc
- Genesis A New Beginning
- Kannapolis Head Start - Kannapolis City Schools

**Legend**

**OneCabarrus Services**

- Food Assistance
- Education Support
- Healthcare
- Mental Health
- Financial Assistance
- Housing
- Childcare
- Energy Assistance
- Daycare Subsidy
- Senior Services
- Other



Find food, housing, medical, mental health, wellness, financial, crisis, veteran, education and childcare help in Cabarrus County.

# Cabarrus County Regional Behavioral Health Center

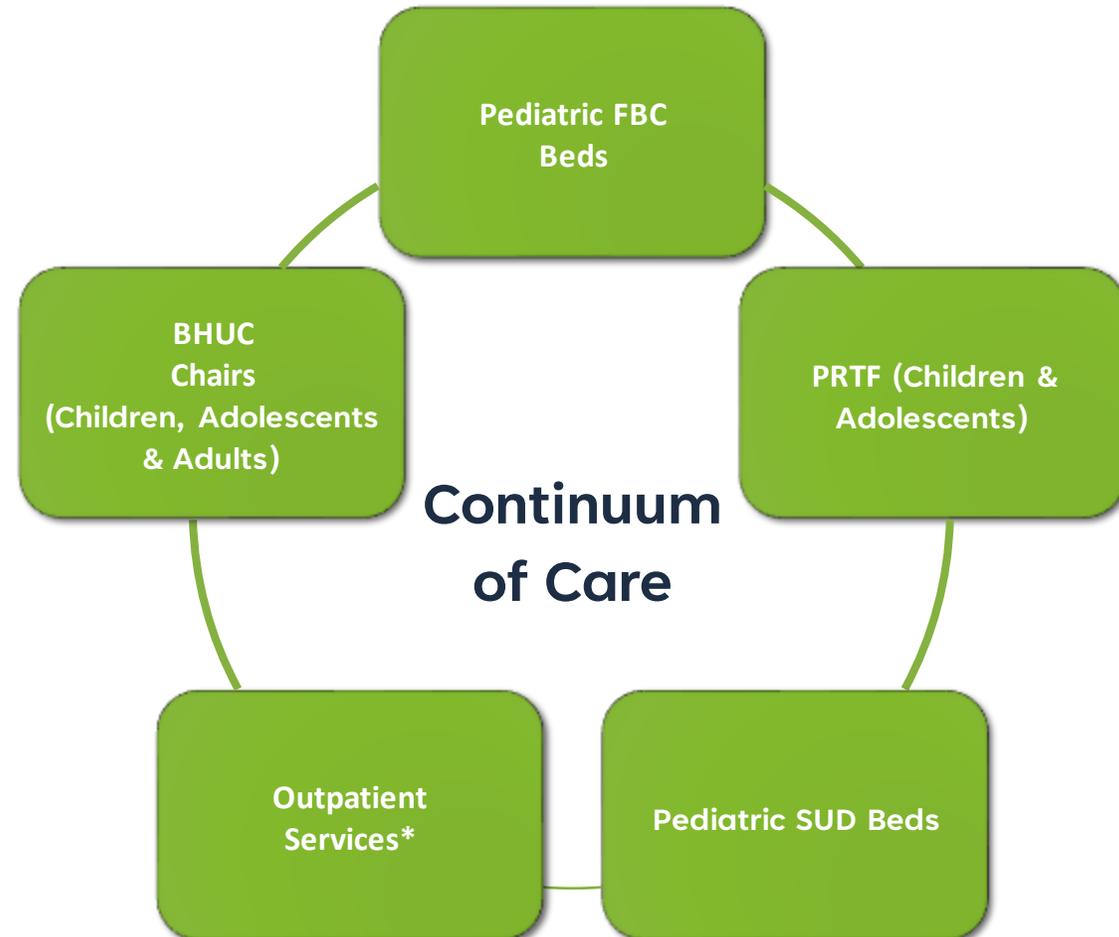
## **ABBREVIATIONS:**

**BHUC:** Behavioral Health Urgent Care

**FBC:** Facility-Based Crisis

**PRTF:** Psychiatric Residential Treatment Facility

**SUD:** Substance Use Disorder









EXIT

EXIT

IMPACT

KINDNESS

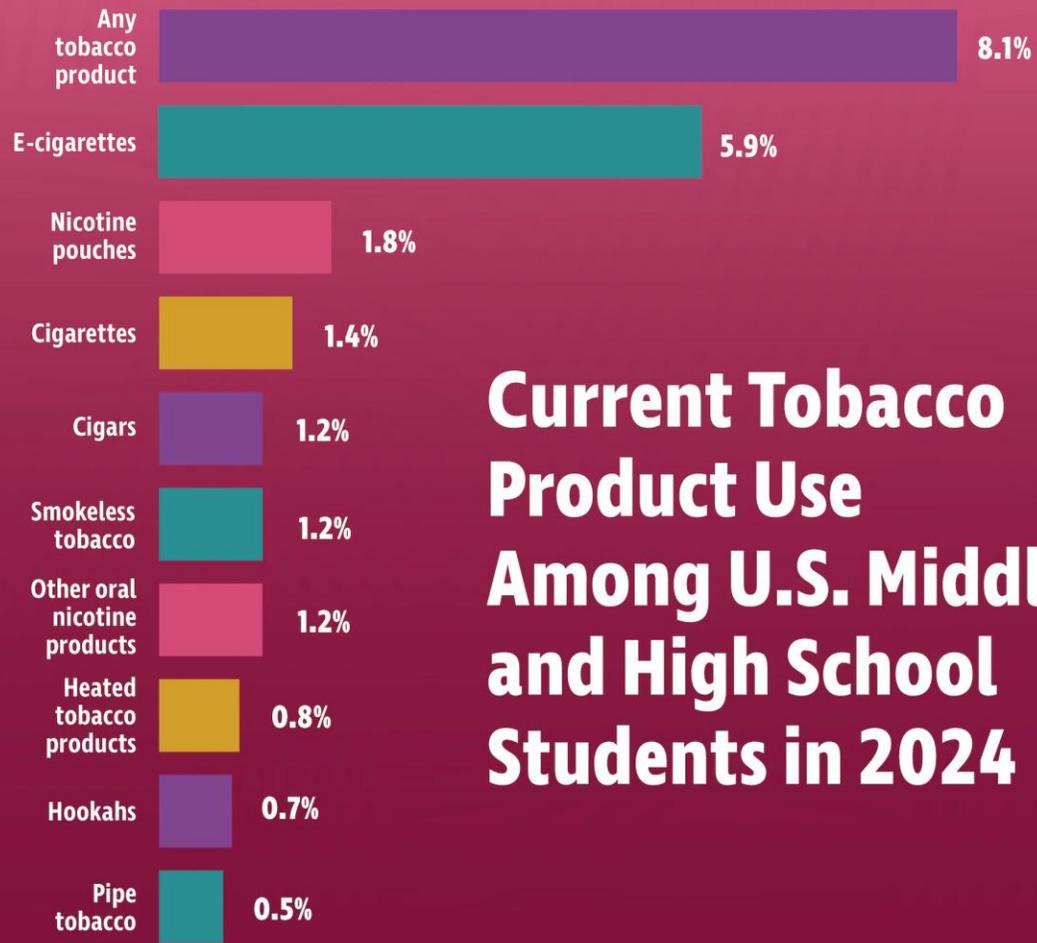


INSPIRE

KIND

HOPE

EMPOWERMENT

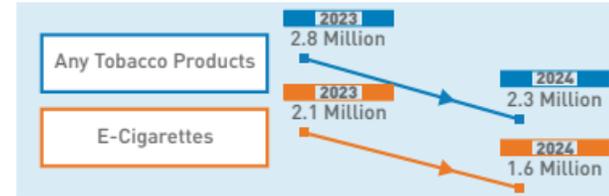


# Current Tobacco Product Use Among U.S. Middle and High School Students in 2024



Source: National Youth Tobacco Survey, 2024

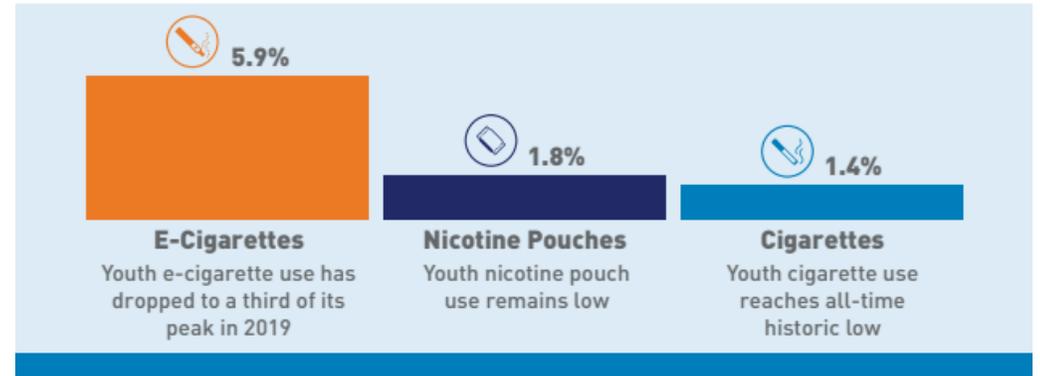
## Half a Million Fewer Students Used Tobacco Products in 2024



The decline in use of all tobacco products is largely attributable to the drop in students who used e-cigarettes.



## Most commonly used products among middle and high school students:



## Among those who reported current e-cigarette use:

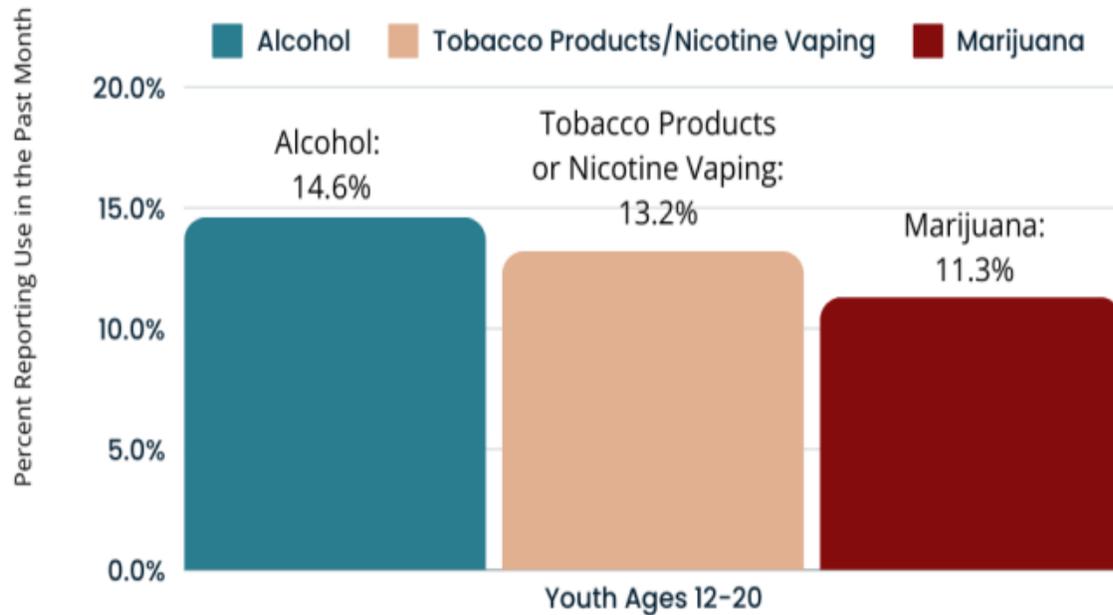


Majority (87.6%) used **flavored e-cigarettes**



with fruit flavors being the most popular, followed by candy and mint

## More adolescents use alcohol than tobacco products, nicotine vaping, or marijuana



- In 2023, according to the National Survey on Drug Use and Health (NSDUH), about 19.9% of youth ages 14 to 15 reported having at least one drink in their lifetime.

- More high school girls drink alcohol and binge drink, compared to high school boys

- About 16% of high school students reported riding in the past month with a driver who had been drinking alcohol.

- About 5% of high school students who had driven in the past month said they drove after drinking alcohol.

# Key Findings, Youth Substance Use *Cabarrus County Schools , 2022*

Most youth (grades 6-12) in Cabarrus County (86.6%) are living drug-free.

Overall, use trends for alcohol, marijuana, and combustible/traditional cigarettes have been trending down over the past six years.

The leading substance chosen by youth was alcohol (8.0%)

Cabarrus County HS students have relatively lower rates of substance use.

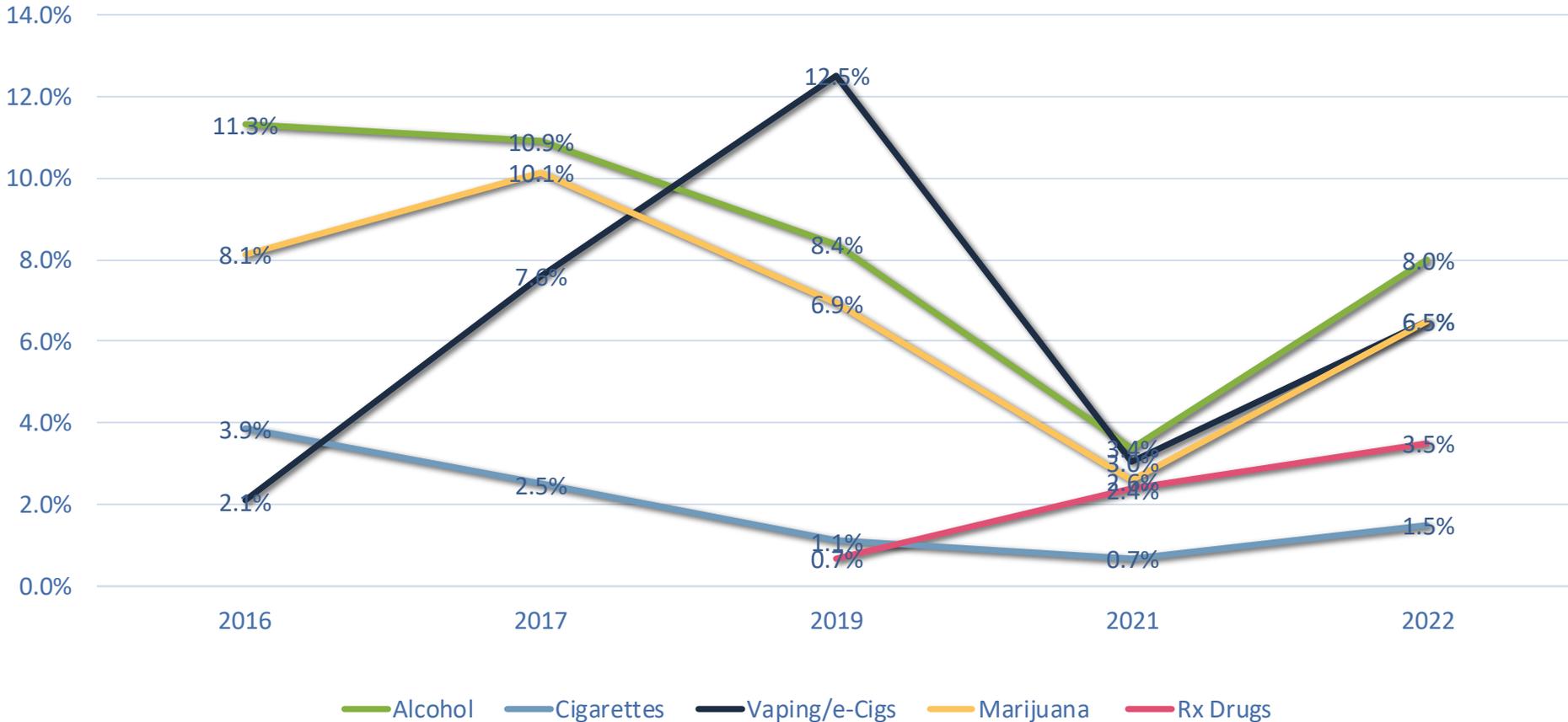
If reporting use of a vape, most students vaped nicotine (72.2%) followed by THC (44.6%).

Key protective factors for substance use include parent disapproval, peer disapproval, perception of risk, and limits to access. Youth were considerably less likely to use when these protective factors were present.

If reporting use of prescription drugs without a prescription, most youth used pain medications (43.6%), followed by ADD/ADHD medications (29.4%).

Living drug-free is associated with school success, including higher grades and attendance

# 30-Day Use Trends Over Time



# Key Findings, Adult Substance Use

---

Cigarette smoking has decreased significantly in Cabarrus over the past decade (21.4% to 12.2%).

E-Cigarette use and vaping continue to rise in NC, with 8.4% of adults reporting use daily or some days (ranking 34<sup>th</sup> in the U.S.)

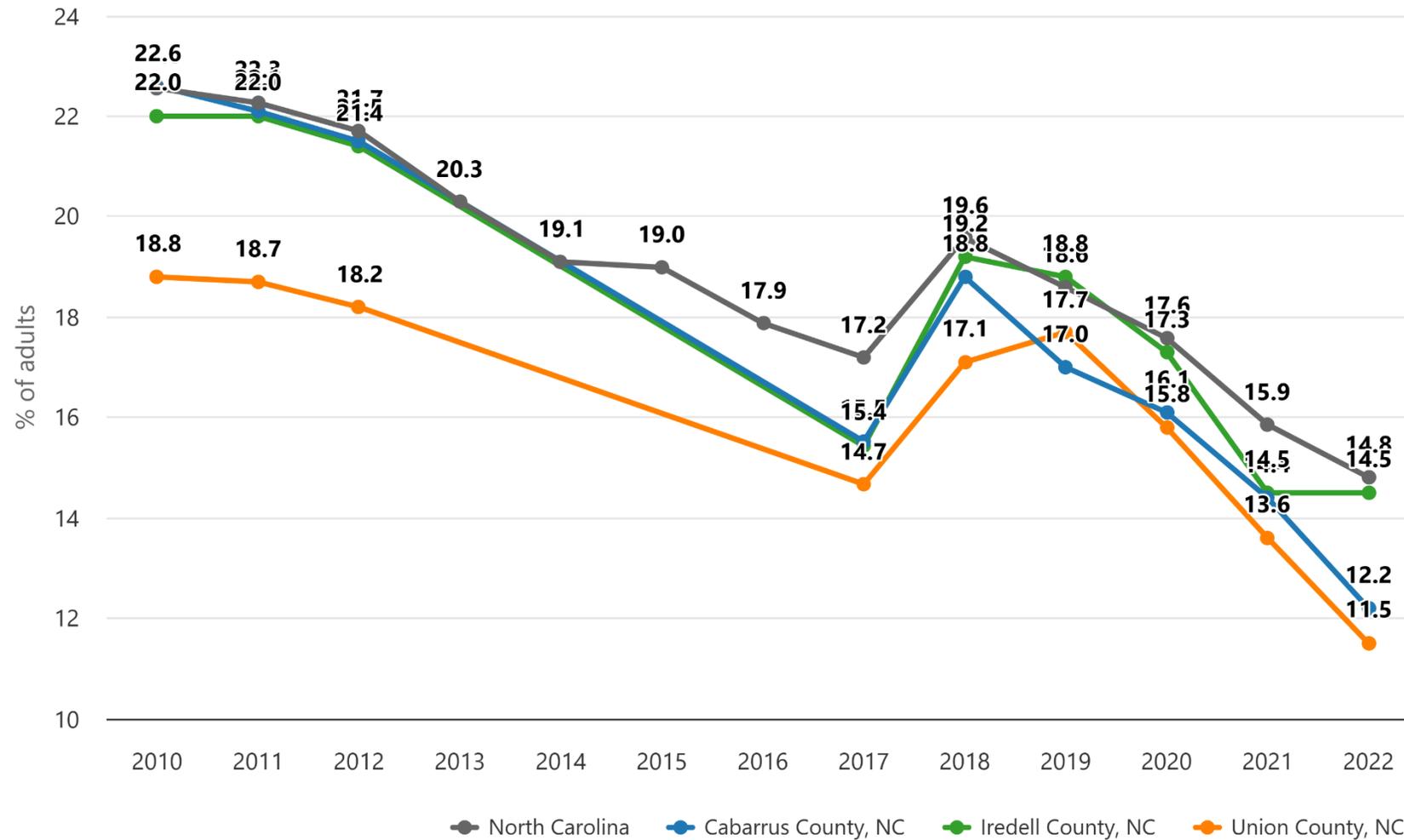
While below the state average, binge drinking has risen since 2020.

Excessive alcohol use is estimated to cost Cabarrus County \$189M (2022).

Opioid overdoses and ED visits are on the decline in Cabarrus County.

# Cigarette smoking rate

North Carolina and comparison



Created on Metopio | metop.io | Data sources: Centers for Disease Control and Prevention (CDC): PLACES (Sub-county data (zip codes, tracts) for 2014 - present), Dwyer-Lindgren, Mokdad, et al. (Population Health Metrics, 2014) (Data modeled from BRFSS for years 1996-2012), Cigarette smoking rate: Percent of resident adults aged 18 and older who report having smoked at least 100 cigarettes in their lifetime and currently smoke every day or some days. Age-standardized.

# E-Cigarette/Vaping Status

## NC

### North Carolina Value:

**8.4%**

Percentage of adults who reported using e-cigarettes or other electronic vaping products at least once in their lifetime and now use daily or some days

*Value and rank based on data from 2023*

### North Carolina Rank:

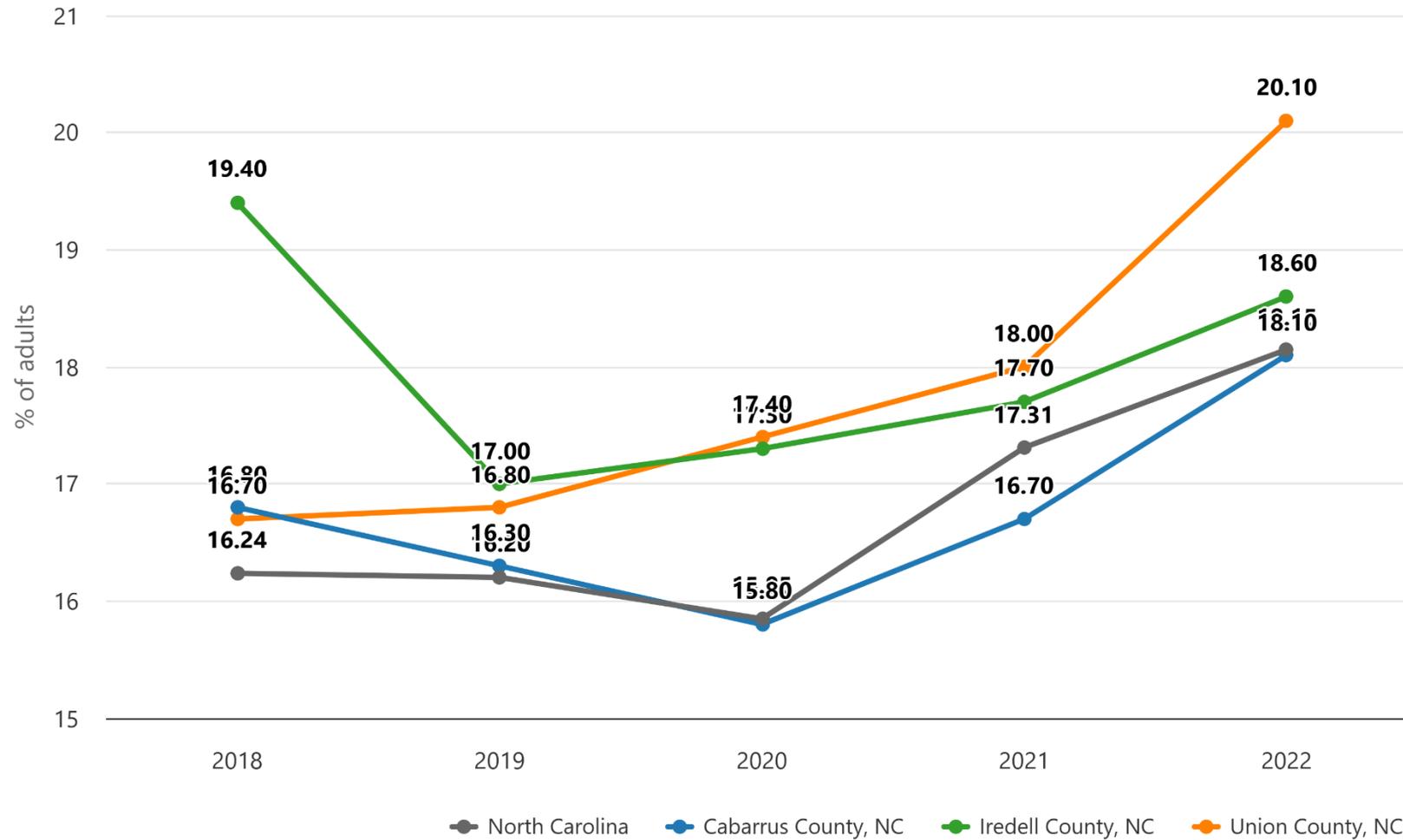
**34**

### Use Some Days/Every Day



# Binge drinking

North Carolina and comparison



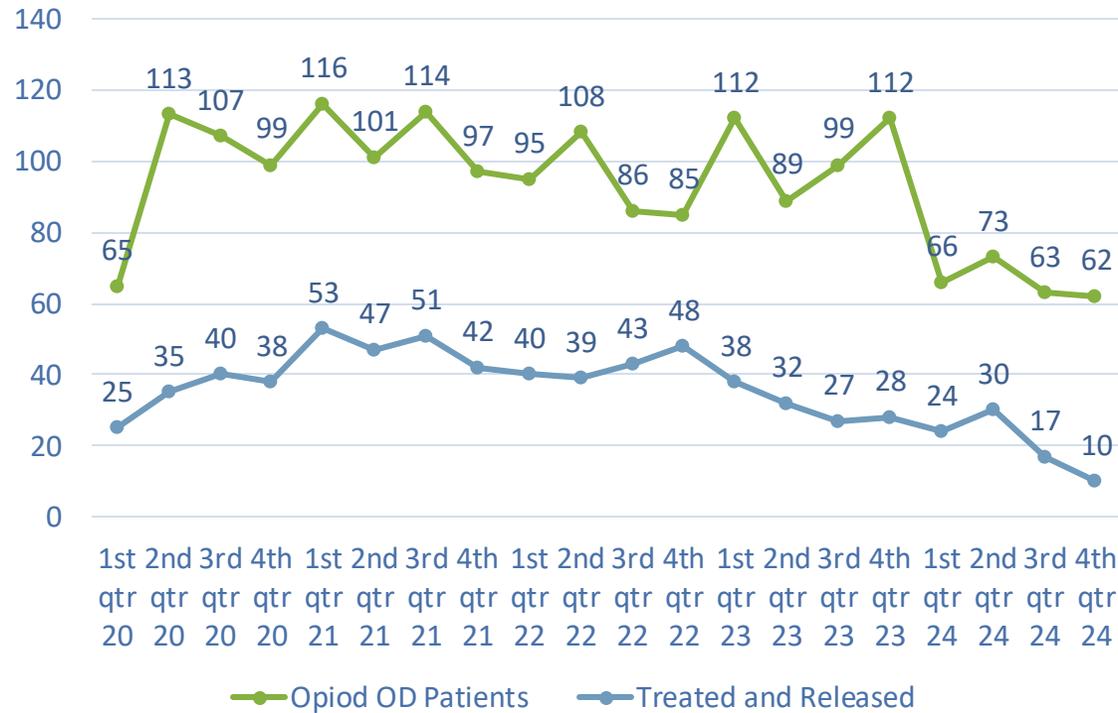
Created on Metopio | metop.io | Data sources: Centers for Disease Control and Prevention (CDC): PLACES (Sub-county data (zip codes, tracts)), Behavioral Risk Factor Surveillance System (BRFSS) (County and state level data)

**Binge drinking:** Percent of adults aged 18 and older who report having five or more drinks (men) or four or more drinks (women) on an occasion in the past 30 days. Alcohol use is likely seriously underreported, so these estimates are an extreme lower bound on actual binge drinking prevalence.

# Opioid Overdoses

## Cabarrus County

Cabarrus County Opioid Overdoses

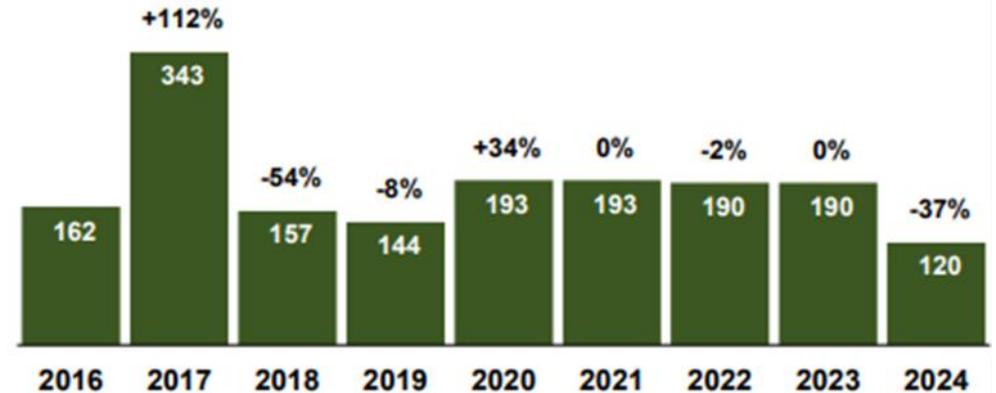


Cab.Co EMS

**120** Opioid overdose ED visits in Cabarrus County for 2024 compared to in 2023.

**190**

Cabarrus County opioid overdose ED visits by year: 2016-2024\*



Note: Percent change is YTD total compared to YTD total of previous year;  
 \*There are known data quality gaps for May-June 2021 impacting the shown trends.

# CabCo NC Opioid Settlement Funds

- Statewide, funds were allocated proportionally based on where opioid crisis was most severe (based on # of pills dispensed, # of opioid overdose deaths, and # of people suffering from opioid use disorder)
- **Cabarrus County** to receive \* **\$22,715,253** over 18 years (2022 to 2038)
  - *Includes City of Concord's allocation*
- HMA Consulting Group presented Cabarrus County Strategic Priority plan June 2025

## Currently funded programs include:

- Peer Support Services to promote Harm Reduction
- MAT services through the Community Paramedicine program & expansion of SUN/RISE Programs at Cabarrus Health Alliance
- MAT within the Cabarrus County Detention Center
- Recovery Support Services & Recovery Housing Services:
  - Southeastern Recovery Center
  - Bridge to Recovery
  - Adult & Teen Challenge
- Prevention & Early Intervention through CabCo Schools' PASS & Recovery High School

# 2021-2024 Narcan Data

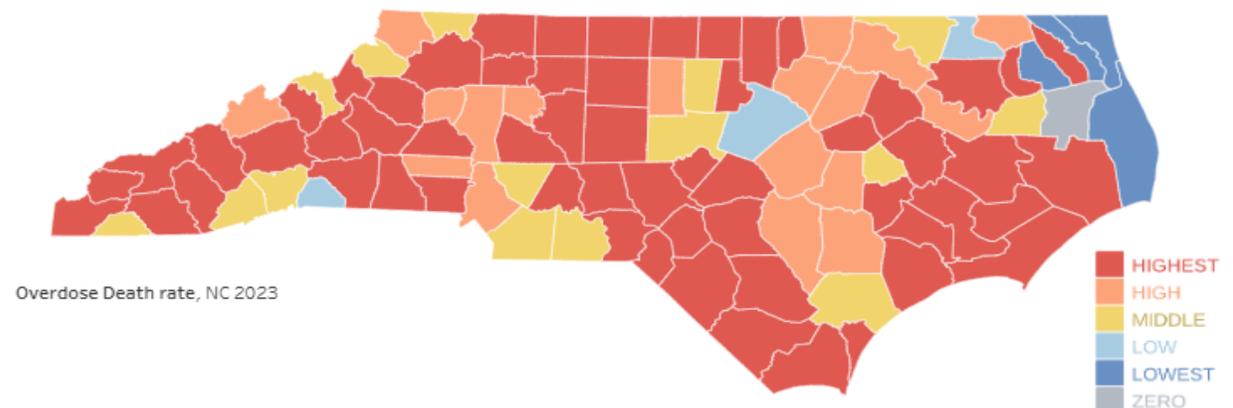
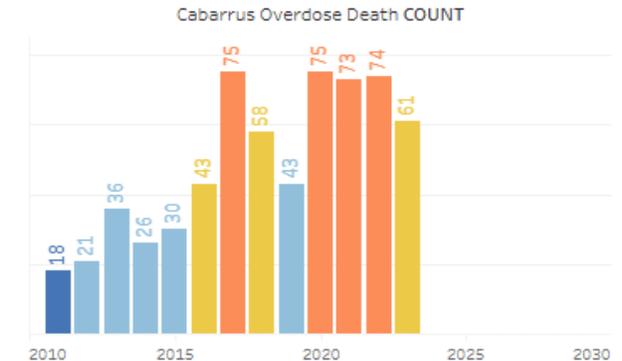
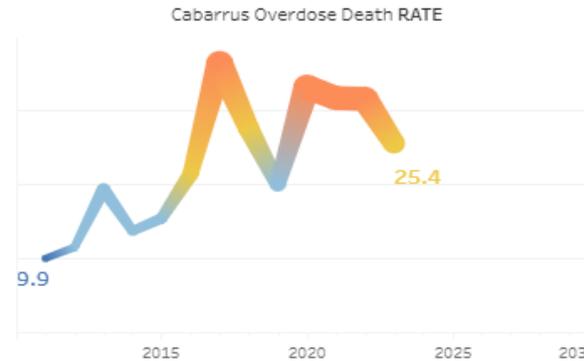
Year	Narcan Distributed in SSP	Narcan Reversals Reported  (some reported more than 3 or an unknown number)	Reversals reported to 911  (self-reported by participants- some reported unknown)
2021 (August to December)	681	371	75
2022	775	554	63
2023	1872	159	82
2024 (through June 1 <sup>st</sup> )	612	131	22

CHA currently distributes Narcan/Naloxone to our SSP, vending machine inside of the jail, RISE clinic, and community partners such as EMS, pharmacies, and community events.

# Drug Overdose Deaths

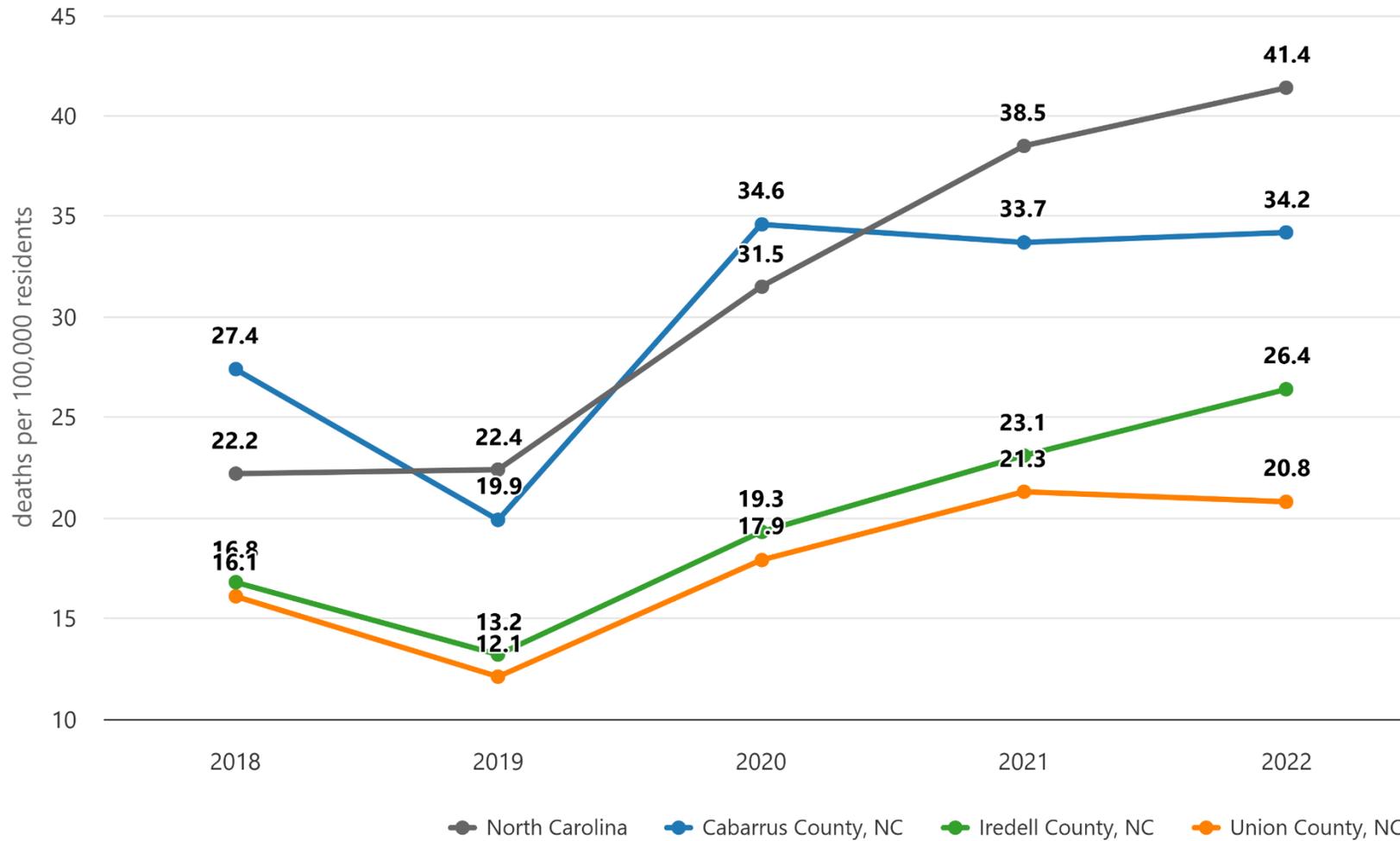
## *Cabarrus*

- The **Overdose Death** rate in **Cabarrus** was **25.4** out of 100,000 residents in **2023**, representing **61.00** people who died of an overdose.
- This rate is among the **MIDDLE** rates seen in **NC**.
- This rate is a **-19% change** over the prior **Year**.



# Rate of drug overdose deaths, North Carolina

North Carolina and comparison



Created on Metopio | metop.io | Data source: North Carolina Department of Health and Human Services (NCDHHS): Opioid and Substance Use Dashboard

Rate of drug overdose deaths, North Carolina: Drug overdose deaths among NC Residents

# Opportunities for Cabarrus County



More behavioral health specialists in primary care offices



Enhance services for individuals with intellectual and developmental disabilities



Increase options for Substance use Disorder Prevention & Treatment for Youth



Recruit specialized service providers, Spanish-speaking clinicians and psychiatrists



Consider & plan for the needs of aging population with mental health and substance use disorders and chronic illness



Increase awareness and advocacy around mental health needs and resources

A person is sitting on a wooden dock, looking out over a calm lake. The lake is surrounded by lush green mountains and dense forests. The scene is peaceful and scenic, with the water reflecting the surrounding landscape. The person is seen from behind, sitting on the end of the dock, looking towards the mountains.

3-2-1

# Rapid Reflection

*Pair Up, Reflect, and  
Share Insights*

- 3 minutes
- 2 things you found surprising or interesting from the data presented
- 1 thing you'd like to learn more about

**SOME REASONS TO  
CALL, TEXT,  
AND CHAT  
988**

**Trauma**

**Thoughts  
of suicide**

**Feeling  
depressed  
or anxious**

**Drinking too  
much or drug use**



**WE WANT  
TO HEAR  
FROM YOU!**

<https://forms.office.com/r/6dL6D0kF16>

Community Planning Council  
Meeting Feedback - Session 4





# Next Meeting...

**April 17<sup>th</sup>**

# Healthy Cabarrus

**THANK  
YOU!**

## Jessica Grant

Healthy Cabarrus Executive Director  
Cabarrus Health Alliance

704-920-1282

[jessica.grant@cabarrushealth.org](mailto:jessica.grant@cabarrushealth.org)

## Sandra Torres

Healthy Cabarrus Coordinator  
Cabarrus Health Alliance

704-920-1339

[sandra.torres@cabarrushealth.org](mailto:sandra.torres@cabarrushealth.org)



**Healthy Cabarrus**  
*Partnerships for Life*