



The Scotland Health Care System Community Health Needs Assessment and Improvement Plan 2022



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ACKNOWLEDGEMENTS

Dear Community Member:

The Community Health Needs Assessment process is fundamental to understanding the health needs of the community. The strategic identification of significant health priorities, barriers to health care, health care disparities, as well as resource availability and key partnerships for improvement, result from this process. Every three years, in accordance with The Affordable Care Act, all not-for-profit hospitals are required to conduct a Community Health Needs Assessment (CHNA) and adopt an implementation strategy to meet the identified health needs. CHNAs dating back to 2013 can be found on our website.

In 2019, with input from the community and our partners, we published a strategic plan for the advancement of the health and well-being of our community. By March of 2020, however, the COVID-19 pandemic presented an unprecedented global health challenge that forced a shift in our priorities. Life-saving health and safety measures were established and implemented, in the form of workplace safety, screenings, testing and treatment of COVID-19. Although efforts to adapt to and manage the challenges of COVID-19 are ongoing, we acknowledge that we must also simultaneously be able to achieve well-being in other identified areas of physical and mental health.

Together, Scotland Health Care team, our partnering agencies and organizations and a committed and supportive community, can refocus some of our resources toward the non-COVID related health priorities that have been recently identified. As a system, we continue to concentrate on improving the health and well-being of the broader community. We are committed to providing access to better health care right here at home. It is our mission to provide safe, high quality, compassionate, and sustainable care. Working together, in collaborative partnerships with the community, local groups and organizations within our region, we can build a better, healthier community. That's *the Scotland Way*.

Scotland Health Care System is pleased to present the 2022 Community Health Needs Assessment (CHNA). I encourage your feedback and responses to this report. Thank you for your commitment to the health and well-being of the community.

Thank you,

Gregory Wood
President and CEO
Scotland Health Care System

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Executive Summary

The Scotland Way:

The Scotland Way defines the Culture of Scotland Health. It is the ideal we aspire to and the way we currently act.

We strive to be Better: Better than yesterday, Better than our peers, Better than expected, so our patients can get Better.

SAFE

We commit to Zero harm. We work collaboratively as a Team to create a climate of trust and safety where each team member is respected for their role. We communicate candidly, transparently, consistently, and professionally.

- We speak up for patient and teammate safety by stopping the line.
- We follow standard work because it keeps our patients and teammates safe.
- We use LEAN thinking to find innovative and adaptive solutions.

HIGH QUALITY

We strive for the top decile in the nation for health care quality. We believe standardization of care will drive value. We are accountable for our actions and performance. We recognize and celebrate excellence.

- We put patients first.
- We commit to best practices as the standard of care.
- We openly admit our mistakes to learn from them.

COMPASSIONATE

We are friendly and caring. We treat patients, visitors, and each other with dignity and respect.

- We treat our patients, visitors, and staff as our own family.
- We recognize and appreciate the diverse backgrounds of our patients and staff.
- We put patients and their experience before our personal convenience.

SUSTAINABLE

We are good stewards of what has been entrusted to us. We invest in and are accountable to our community. We demonstrate integrity in the way we do our work and conduct ourselves

- We follow the rules and ethical standards which govern the work we do.
- We spend Scotland Health's money as if it was our own.
- We communicate transparently to our community about the decisions we make.

Mission:

The Mission of Scotland Health Care System is to work with our health care partners to create and operate a patient centered, integrated system to provide *Safe, High Quality, Compassionate, and Sustainable* health care to the people we serve.

Vision:

Scotland Health Care System will be recognized and chosen by patients and their families throughout our region for the quality and value of services we provide. This value will be demonstrated through the highest level of quality and service, along with the safest environment. We will lead efforts to improve the health and well-being of the citizens in our region.

Values:

We accept and are proud of our role as the safety net provider of essential services for our region.

- As a community-owned health care system, we believe in transparency and accountability to our community for the decisions we make. These decisions will be made collaboratively and with the utmost integrity.
- Our associates, physicians, other providers, and volunteers are our most important assets. We treat each other, along with our patients and families, with care, compassion, dignity, and respect at all times.
- We carry out all these principles in a financially prudent and sustainable manner to ensure we stay focused on our Mission.

Background and Purpose

Community Health Needs Assessment:

A Community Health Needs Assessment (CHNA) is performed every three years to establish a broad view of the health needs and welfare of Scotland County, as well as to determine barriers to care, gaps in service, local resources, and trends regarding health and healthy lifestyles. The needs assessment process also provides a way to identify and prioritize significant health needs and will serve as a guide for Scotland Health Care System, Scotland County Health Department, and other community agencies and organizations to better align resources as they partner to improve and promote the well-being of Scotland County residents.

This document was developed by Scotland Health Care System (SHCS) in response to a community health needs assessment survey that was constructed in partnership with the Scotland County Health Department. The Community Health Advisory Board (CHAB) assembled for the first meeting regarding the Community Health Needs Assessment on

June 15, 2022. During the first community group meeting, members were introduced to the needs assessment process, reviewed secondary data information about the community, and provided input, including information about Scotland Community assets and resources, challenges, and the general health needs of the community. The community group met again on July 21, 2022. During the second meeting, the community group was presented with survey results, findings from the focus group interviews, and some comparisons and contrasts to the secondary data, relating to the general health and well-being of Scotland County residents. The Community Health Advisory Board (CHAB) reviewed and analyzed the data. The group was then tasked with identifying and prioritizing the community's health needs.

CHAB advocates for programs, services, and project development that address a variety of community health needs. Issues may include, but are not limited to, promoting healthy initiatives within the community and matters of healthy community design. Additionally, the CHAB advocates for collaboration and resource integration for the development or enhancement of programs that focus on improving the community's health and well-being. Current members represent the broad interests of the community and include various community sectors such as business, education, faith-based groups, health care, non-profit groups, community members/health care consumers, tribal leadership, and local government. Not all community board members were present for the two meetings.

Regulatory Requirements

Federal regulations require non-profit hospitals to conduct a community health needs assessment at least once every three years, prioritize the needs and develop an implementation strategy, which is submitted in accordance with the Internal Revenue Code 501(r)(3).

Each hospital must:

- (1) define the community it serves
- (2) conduct a community health needs assessment in the applicable taxable year
- (3) adopt an implementation strategy for meeting the community health needs identified in the assessment and
- (4) create transparency by making the information widely available.

The regulations require that each hospital take into account input from persons who represent the broad interests of the community, including those with "special knowledge of or expertise in public health". Scotland Health Care System has collaboratively developed strategic initiatives to enhance access to health care, access to primary care, and health literacy while focusing on identified needs. Based on the data that was collected and analyzed, the priority needs identified include:

- I. Obesity related hypertension, heart disease, and diabetes**
- II. Mental health including substance misuse**
- III. Lack of positive youth engagement and healthy behaviors**

Summary of Action Plans:

Strategies to address community needs focus on increasing health literacy and facilitating access to health care. Strategies and action plans build on the work from previous CHNAs and improvement plans.

OBESITY RELATED HYPERTENSION, HEART DISEASE, AND DIABETES

The action plan includes programs that address risk factors such as obesity, smoking, hyperlipidemia, and elevated glucose levels. These programs incorporate a variety of communication and education methods as well as resource integration. Specific programs are: Tobacco Cessation, Blood Pressure Management and Diabetes Management.

MENTAL HEALTH INCLUDING SUBSTANCE MISUSE

The action plan includes decreasing the negative stigmatism related to mental health, a prime factor that prohibits treatment, by increasing the overall awareness of mental health wellness. Substance use/misuse is embedded in this priority; therefore, smoking cessation is a key program noted in this plan. Additional strategies include establishing and strengthening relationships with key partners who provide behavioral health services.

LACK OF POSITIVE YOUTH ENGAGEMENT AND HEALTHY BEHAVIORS

The action plan targets adolescents and their caregivers to promote engagement and healthy behaviors. Programs target awareness of resources available to parents, education, and professional development. Activities will also address foundational needs that enhance future health outcomes.

Community Health Needs Assessment Process

The Community Health Needs Assessment model was adopted from the American Hospital Association: Association for Community Health Improvement.



Step 1: Reflect and Strategize

Communication and planning, regarding the Community Health Needs Assessment process and Survey was initiated between Scotland Health Care System and the Scotland County Health Department in December of 2021. The Community Health Needs Assessment Team, comprised of Scotland Health Care System Community Health, Scotland County Health Department, various organizations, and community members, worked together to reflect on the previous assessment, partner with key stakeholders, define the community, and determine a strategy for data collection.

Step 2: Community Engagement

Community engagement allows individuals and stakeholders from the community to partner with health care organizations and more accurately reflect the needs of the community, enhance communication, and develop sustainable strategic initiatives that can lead to a healthier community. Key stakeholders are listed in Appendix A.

Step 3: Identify the Community

The identified community for this CHNA is Scotland County, NC. Cities, towns, or townships included in this community are Gibson, Laurel Hill, Laurinburg, Wagram, and part of Maxton.

Step 4: Collect and Analyze Data

Primary data was collected through surveys, focus group assessments, and key stakeholder input. Secondary data was collected from respected sources (listed in Appendix D). Assessments included both quantitative and qualitative data to capture demographics, disparities, and inequalities. Data analysis was completed by the CHAB, including community members.

Step 5: Prioritize Community Health Issues

Prioritization of community health issues was based on primary and secondary data analysis and community input to identify three priorities related to health care access, primary care access, and health literacy. These priorities were identified based on the perceived and noted severity of the problem, need within vulnerable populations identified, trending health concerns, and available resources within the health care system, partnering organizations, and the community.

Step 6: Document and Communicate Results

Results from this survey are available for public view and are easily accessible on the Scotland Health Care website. Publication allows the community and partners to become engaged and/or foster continuous commitment to the improvement plan.

Step 7: Plan Implementation Strategies

Internal and external resources planned strategies in a collaborative effort based on issue identification, prioritization of both the need and impact, and resource allocation. Internal resources include various SHCS departments: Community Health, Business and Industry, Occupational Health, Scotland Memorial Foundation, Scotland Physicians Network, and Population Health. External resources include a variety of organizations throughout the community representing faith-based organizations, health care partners, parks and recreation, local schools and universities, town officials, the Lumbee Tribe of North Carolina, CORE response organization, local youth development agencies, housing services, and childcare agencies.

Step 8: Implement Strategies

Action plans will be developed to identify strategies, objectives, interventions, setting, time frame, partnering agencies, evaluation measures, process, outcomes, and references.

Step 9: Evaluate Progress

Identified metrics will be tracked utilizing Scotland Health Care Systems electronic medical records, the Clear Impact tool, tracking reports within the organization and from partnering agencies, and secondary data reports. The CHAB will receive a quarterly update which can be shared with our partners and the public as needed. The report will be presented in a variety of forums including meetings, social media, and through the SHCS website. Feedback regarding the report will be solicited.

Healthy North Carolina 2030: A Path Toward Health is a document that includes 21 health indicators with 10-year targets that identify measures to improve the health and well-being of the residents of North Carolina. Because data can easily be collected to measure progress, we plan to select the indicators which closely align to some of the indicators used in the County Health Rankings, and pair them with the priority health indicators for Scotland County to measure progress over the next three to five years.

Healthy North Carolina 2030 and the NC State Health Improvement Plan

Led by the North Carolina Institute of Medicine (NCIOM) and Department of Health and Human Services (DHHS), the process of identifying health indicators to improve the health and well-being of residents, resulted in Healthy North Carolina 2030 (HNC 2030). In addition, HNC 2030 serves as the foundation for the North Carolina State Health Improvement Plan (NC SHIP).

HEALTH INDICATORS AND DATA				
(TOTAL NC POPULATION, 2030 TARGET, AND DATA RACE/ETHNICITY, SEX, POVERTY LEVEL)				
	HEALTH INDICATOR	DESIRED RESULT	CURRENT (YEAR)	2030 TARGET
1	INDIVIDUALS BELOW 200% FPL	Decrease the number of people living in poverty	36.8% (2013-2017)	27.0%
2	UNEMPLOYMENT	Increase economic security	7.2% (2013-2017)	Reduce unemployment disparity ratio between white and other populations to 1.7 or lower
3	SHORT-TERM SUSPENSIONS (PER 10 STUDENTS)	Dismantle structural racism	1.39 (2017-2018)	0.8
4	INCARCERATION RATE (PER 100,000 POPULATION)	Dismantle structural racism	341 (2017)	150
5	ADVERSE CHILDHOOD EXPERIENCES	Improve child well-being	23.6% (2016-2017)	18.0%
6	THIRD GRADE READING PROFICIENCY	Improve third grade reading proficiency	56.8% (2018-2019)	80.0%
7	ACCESS TO EXERCISE OPPORTUNITIES	Increase physical activity	73% (2010/18)	92.0%
8	LIMITED ACCESS TO HEALTHY FOOD	Improve access to healthy food	7.0% (2015)	5.0%
9	SEVERE HOUSING PROBLEMS	Improve housing quality	16.1% (2011-2015)	14.0%
10	DRUG OVERDOSE DEATHS (PER 100,000 POPULATION)	Decrease drug overdose deaths	20.4 (2018)	18
11	TOBACCO USE	Decrease tobacco use	Youth 19.8% (2017) Adult 23.8% (2018)	9.0% 15.0%
12	EXCESSIVE DRINKING	Decrease excessive drinking	16.0% (2018)	12.0%
13	SUGAR-SWEETENED BEVERAGE CONSUMPTION	Reduce overweight and obesity	Youth 33.6% (2017) Adult 34.2% (2017)	17.0% 20.0%
14	HIV DIAGNOSIS (PER 100,000 POPULATION)	Improve sexual health	13.9 (2018)	6
15	TEEN BIRTH RATE (PER 1,000 POPULATION)	Improve sexual health	18.7 (2018)	10
16	UNINSURED	Decrease the uninsured population	13.0% (2017)	8.0%
17	PRIMARY CARE CLINICIANS (COUNTIES AT OR BELOW 1:1,500 PROVIDERS TO POPULATION)	Increase the primary care workforce	62 (2017)	25% decrease for counties above 1:1,500 providers to population
18	EARLY PRENATAL CARE	Improve birth outcomes	68.0% (2018)	80.0%
19	SUICIDE RATE (PER 100,000 POPULATION)	Improve access and treatment for mental health needs	13.8 (2018)	11.1
20	INFANT MORTALITY (PER 1,000 BIRTHS)	Decrease infant mortality	6.8 (2018) Black/white disparity ratio = 2.4	6.0 Black/white disparity ratio = 1.5
21	LIFE EXPECTANCY (YEARS)	Increase life expectancy	77.6 (2018)	82

Source: See full Healthy North Carolina 2030 report for information on data sources at www.nciom.org.

Community Description and Demographics

SCOTLAND COUNTY OVERVIEW

History

Scotland County was formed in 1899 out of portions of Richmond County. As suggested by its name, it was termed after the heritage and history of Scottish settlers. Even earlier inhabitants included Saura (Cheraw) Indians, which were followed by English settlers and Quakers. Laurinburg is a micropolitan statistical area that was named after the McLaurin Scottish family, and currently serves as the county seat. Much of the county's historical aspects draw on its Scottish lineage which can be reflected by St. Andrews Presbyterian College and the Scotland County Highland Games.

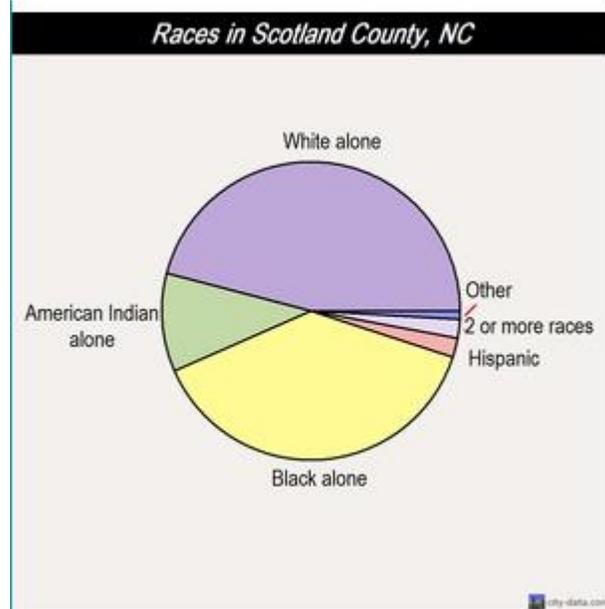
Geographic Features

Scotland County borders the Piedmont and Coastal Plain regions of North Carolina as well as the South Carolina border. The county has a total area of 320 square miles (830 km²), of which 319 square miles is land and 1.5 square miles is water. Scotland County is surrounded by other counties which include Hoke, Robeson, Marlboro, Richmond, and Moore. Notable geographic features in the county are the Lumber River, Big Muddy Lake, and Juniper Swamp.



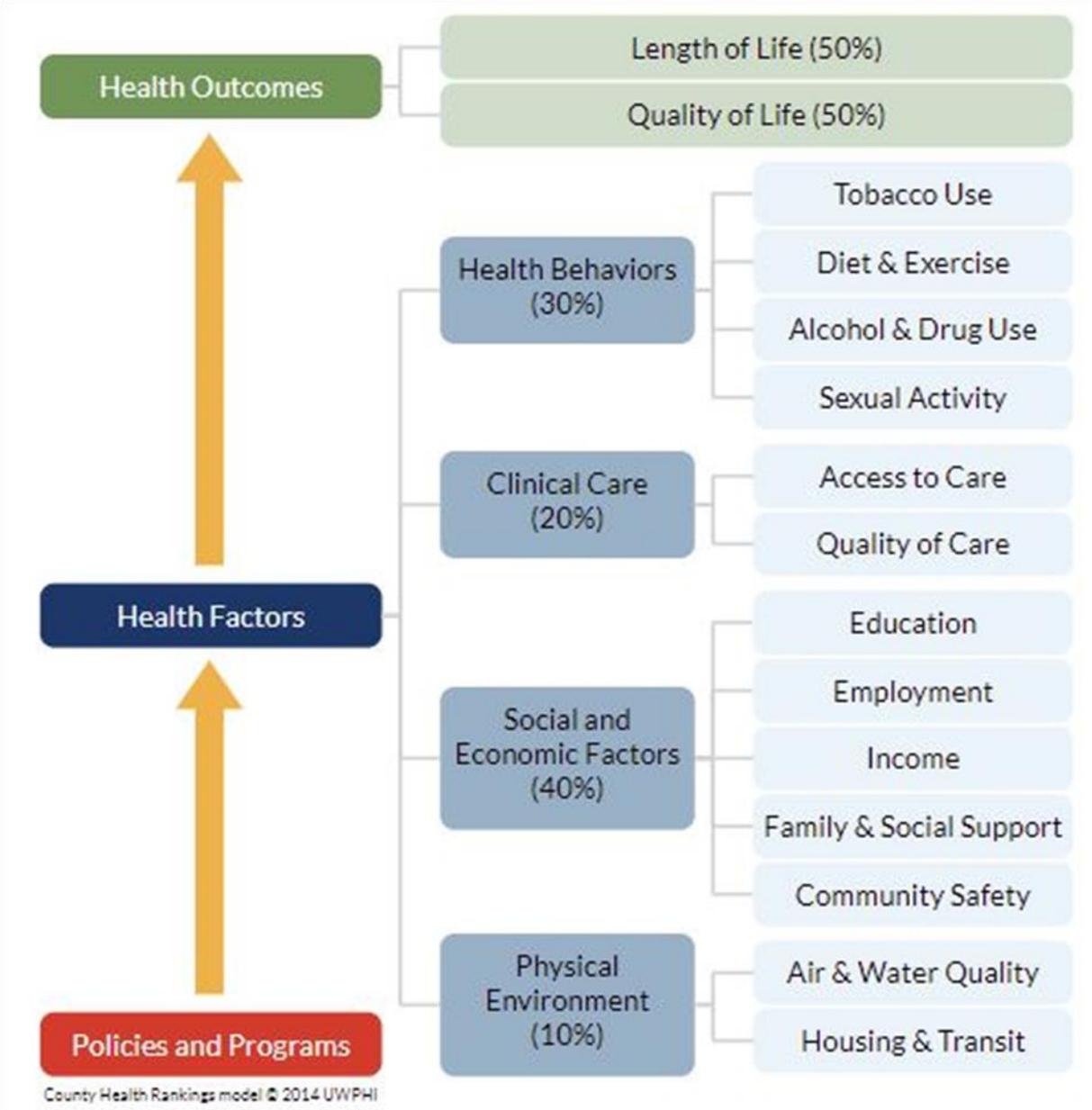
Demographics

Based on data from USA Facts, Scotland County population was 34, 637, which represents a (-)4% population change since 2010. The racial makeup of the county was 42.2% Caucasian, 38.6% African American or Black, 12.1% American Indian and Alaska Native, 0.9% Asian, 0.1% Native Hawaiian and other Pacific Islander, 2.7% other/mixed races, and 3.5% Hispanic or Latino. According to the U.S. Census Bureau, the median age was 39.1. Within Scotland County, 4.0% of people spoke a non-English language at home. Of the Scotland County residents, 98.6% were US citizens.



Data Collection Process and Results

Primary and secondary data sources were analyzed to target the clinical and non-clinical factors that impact health as displayed in the County Health Rankings & Roadmaps Model:



Primary data was collected through several surveys including paper surveys, oral surveys, and focus group surveys. Additional primary data was solicited from stakeholders who are culturally aware and/or embedded in the community. Secondary data was collected utilizing respected resources as noted in Appendix D.

About the Research

We employed a multi-method, collaborative approach to the gathering of primary and secondary data that included both qualitative community feedback and quantitative statistical data. It was determined through historical review that the use of both electronic and paper versions of the community health survey were necessary to reach broader segments of the population. Surveys were distributed throughout Scotland County in paper format, by email or accessed via Survey Monkey. Survey Monkey had been utilized in previous assessments, offering ease of design, data collection and analysis. Focus groups were also conducted to further identify and explore the needs and priorities for Scotland County. In addition, meetings with key stakeholders from the Community Health Advisory Board were utilized as a forum to collect, review, and analyze data. The priority needs identified include:

- I. **Obesity related hypertension, heart disease, and diabetes**
- II. **Mental health including substance misuse**
- III. **Lack of positive youth engagement and healthy behaviors**

Primary Data Collection Process and Results:

COMMUNITY HEALTH NEEDS ASSESSMENT: MAIN (PRIMARY) SURVEY

The main survey (Appendix B) was modified from the 2019 survey and consisted of four categories: 1) Individual, (2) Family/household, (3) Community, and (4) Demographics. Hard copies of the survey were distributed at the Scotland County Health Department, Scotland Physician Network (SPN) Practices and other locations within the Scotland Health Care System, faith-based organizations, Laurinburg and Wagram Parks and Recreation, Laurinburg Public Library, Scotland Community Free Clinic, CORE (Community Organized Relief Effort), and Lumbee Tribal outreach. Members of the Community Health Advisory Board also assisted with distribution of the main survey throughout Scotland County. The electronic version was emailed to the Scotland County Health Department and distributed to various community agencies. The link to the survey was published on the Scotland Health Care System (SHCS) Facebook page, SHCS website and through email communications. In addition, the link was distributed in a flyer/handout at Community events, Scotland County Ministerial Alliance, and to consumers at various community organizations. The CHNA survey was also featured and advertised in a radio segment in June 2022, in question-and-answer format. The survey was open for responses from April 19, 2022, through July 7, 2022. A total of 618 surveys were collected. Most of the survey responses collected were written and entered manually into a program by Community Health Staff members for data collection purposes.

COMMUNITY HEALTH NEEDS ASSESSMENT: SECONDARY SURVEY

Primary survey data was reviewed, compared to secondary data, and analyzed by the Community Health Advisory Board (CHAB). It was determined that a 1-question survey would be opened to the CHAB and to the Community for one week, to further define and prioritize 12 identified health care concerns (Appendix C).

A secondary survey, consisting of one question was developed. The 12 health concerns/issues were identified from focus group data, the responses on the main survey, as well as secondary data that had been collected and analyzed. These top significant health issues were also identified in relation to the scope and severity of the need and available resources within the health care system, partnering organizations, and the community to establish and deliver effective interventions. The Survey opened on 07/21/2022 and closed on 07/28/2022. A total of 309 survey responses were obtained.

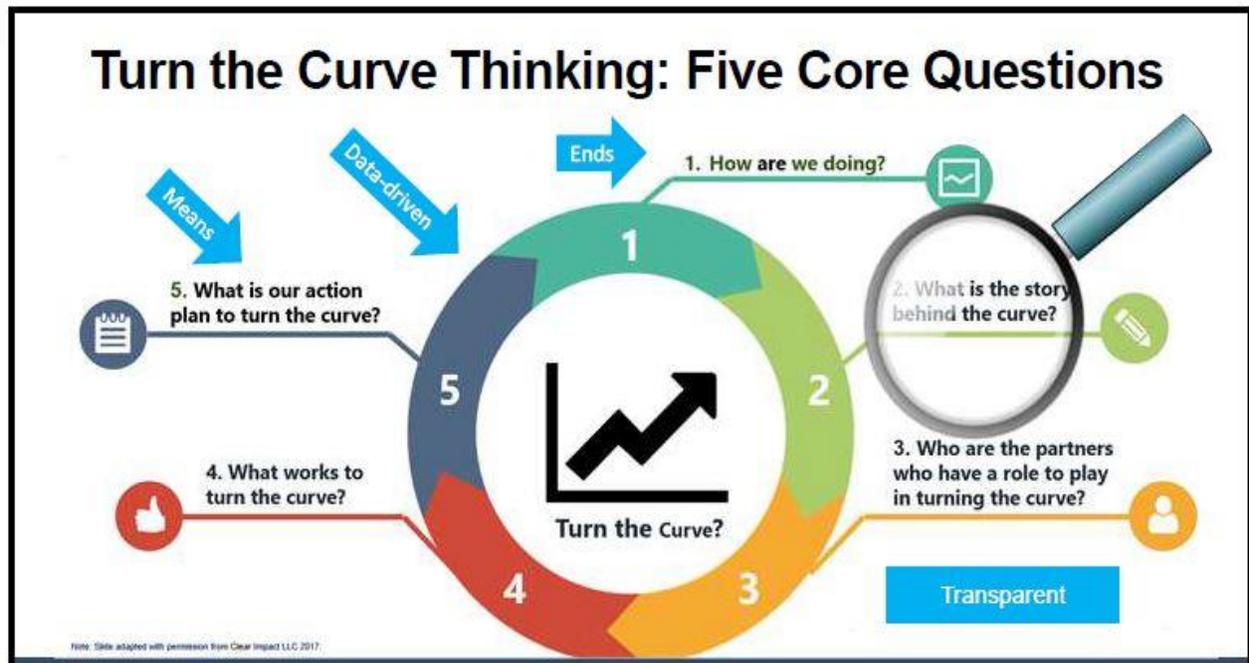
The staff at Scotland Health Care System (Community Health Department) constructed this survey in partnership with the Scotland County Health Department, following input from the CHAB. The link to the survey was sent to the Community Health Advisory Board (CHAB) and the health department for completion and distribution. In addition, the link was published on the Scotland Health Care System (SHCS) Facebook page and distributed through email communications. Survey Monkey was the chosen electronic survey tool.

COMMUNITY HEALTH NEEDS ASSESSMENT: FOCUS GROUP

The Scotland Community Health team conducted a focus group with the Scotland County Public School system and two additional focus groups at the Laurinburg Housing Authority Center (LHA). Questions regarding individual, family/household, and community well-being were discussed. A total of 19 respondents participated in the survey, 10 were residents of the LHA and 3 were employed with LHA. The remaining 6 respondents were employed with the public school system of Scotland County. The groups consisted of 18 females and 1 male. The participants' ages ranged from the early 20s to late 50s. The racial background of this group included: 12 African American, 3 Caucasian, and 4 American Indian.

An activity, based on the "turn the curve" model was used as a catalyst during the focus groups to collect data on experiences and perspectives of the participants. The participants answered five core questions and identified partners who they felt would be key in developing strategies that would have the greatest impact on the health and well-being of the Scotland Community.

TURN THE CURVE



Used with permission from Clear Impact

5 CORE QUESTIONS to “TURN THE CURVE” thinking

1: How are we doing?

Data (both the history and forecast) tells us how we are doing. Secondary data, collected from national or state data bases, is more readily accessible than local data. Data for this Community Health Needs Assessment survey was collected using respected resources, as referenced in the data sources. As a supplement to national and state data, primary data was collected through paper and electronic surveys, as well as focus group assessments to better understand how residents experience Scotland County.

2: What’s the story behind the curve?

Telling the “story behind the curve” allowed each partner to explain his or her perspective, whether negative or positive, that has led to the current conditions of the Community. In addition, this process helped us to take a “deep dive” and identify and analyze the root causes of the conditions. Diverse opinions promote a healthier, more comprehensive process. Focus groups allowed a forum for group interview, with community members, for more in-depth exploration of unfiltered responses on the topic of the well-being of Scotland County. The Community Health Advisory Board (CHAB) meetings also provided a forum for group discussion, review, and analysis of the secondary data as well as the data that was collected from the surveys and focus groups.

3: Who are the partners who have a role to play in turning the curve?

According to Mark Friedman, the author of *Trying Hard is Not Good Enough*, “The work needed to improve the conditions of well-being for a Community, City, County, State or even the Nation, requires the contribution from many partners, both public and private. The work of including new partners is an ongoing process. The concept is to think broadly and to continuously re-evaluate who needs to be at the table.” During each focus group, a list of partners for a better Scotland County were identified.

The Community Health Advisory Board, who are also key stakeholders with broad community representation, were invited to attend a presentation of the findings from the CHNA survey. Robust discussion included the review and analysis of survey items, partnerships, resources available and gaps in service. Some partners were identified but it was determined that the partners needed, for each outcome measure or goal that was prioritized, would continue to be updated on an ongoing basis, as appropriate.

4: What works to turn the curve?

Reviewing the research and examining best practices are important when trying to determine what works to improve conditions and well-being. However, research can tell only part of the story. For a more comprehensive picture of what works, we needed to include life experience and knowledge from our own communities. All ideas were considered, including the low-cost to no-cost ideas. Some of these ideas were examined in the focus groups and in meetings that included both Advisory board and Community members.

5: What is our action plan to turn the curve?

Prioritization of community health issues was based on primary and secondary data analysis. Access to both physical health care and mental health care have been identified as significant priorities for the improvement of quality of life and well-being for all people in Scotland County. Action plans will be developed to effectively utilize existing programs and partnerships, as well as to develop and promote new initiatives to enhance health literacy, offer health screenings, support groups and sponsor or partner to provide community events.

Acknowledgement

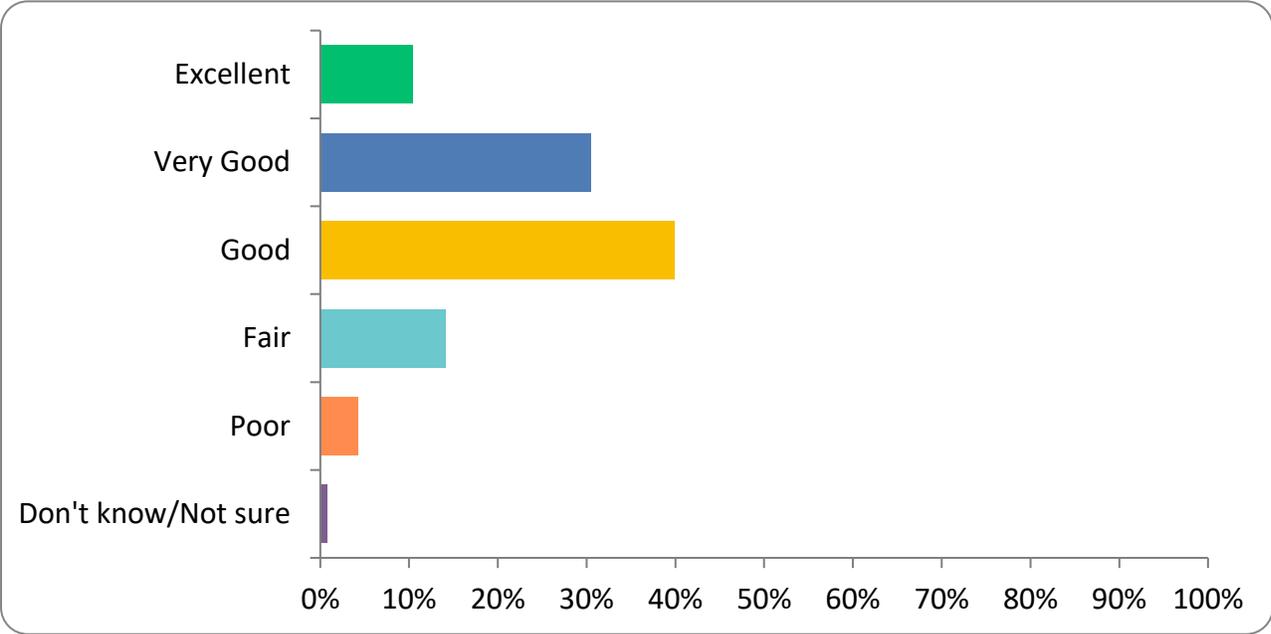
Scotland Health Care acknowledges the use of graphics that have been shared by Clear Impact.

Additional Reference: *Trying Hard Is Not Good Enough- How to Produce Measurable Improvements for Customers and Communities*: 10th Anniversary edition, by Mark Friedman (2005, 2009, 2015)

**COMMUNITY HEALTH NEEDS ASSESSMENT:
MAIN SURVEY RESULTS**

Q1: How do you feel about your physical health? (Check one)

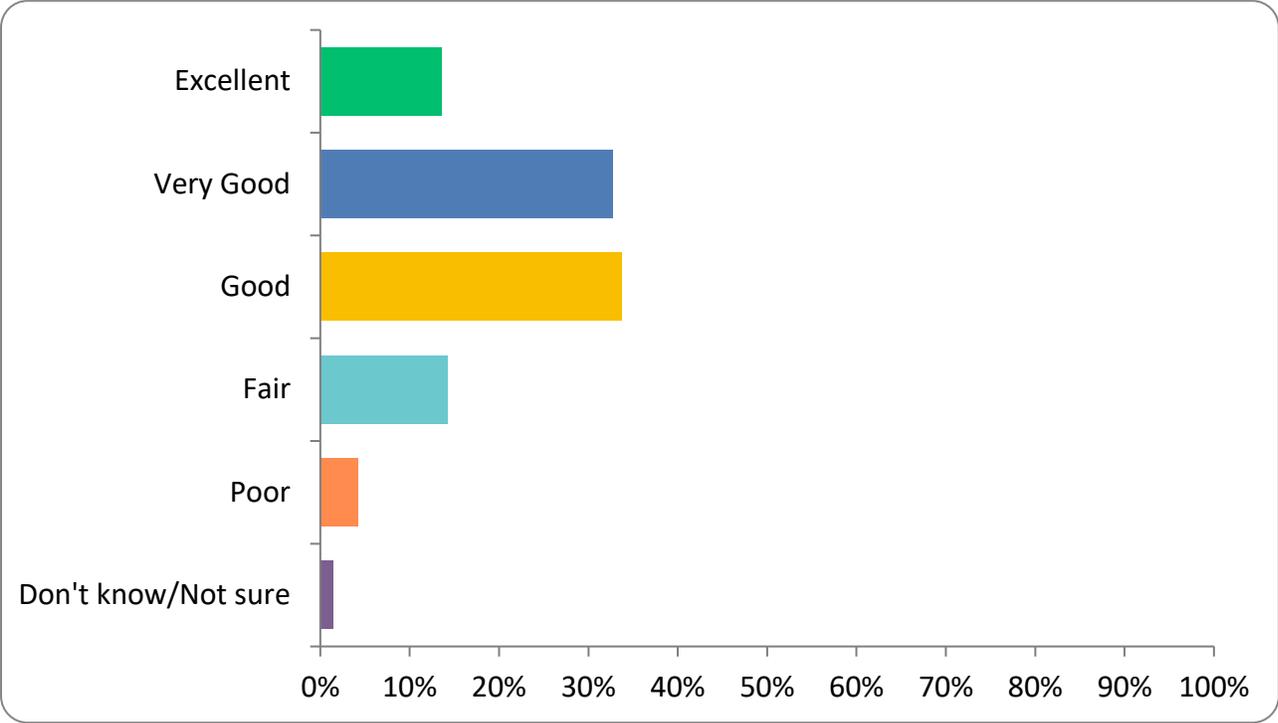
Answered: 616 Skipped: 2



ANSWER CHOICES	RESPONSES	
Excellent	10.39%	64
Very Good	30.52%	188
Good	39.94%	246
Fair	14.12%	87
Poor	4.22%	26
Don't know/Not sure	0.81%	5
TOTAL		616

**Q2: How do you feel about your mental health (includes stress, depression, and problems with emotions)?
(Check one)**

Answered: 617 Skipped: 1



ANSWER CHOICES	RESPONSES	
Excellent	13.61%	84
Very Good	32.74%	202
Good	33.71%	208
Fair	14.26%	88
Poor	4.21%	26
Don't know/Not sure	1.46%	9
TOTAL		617

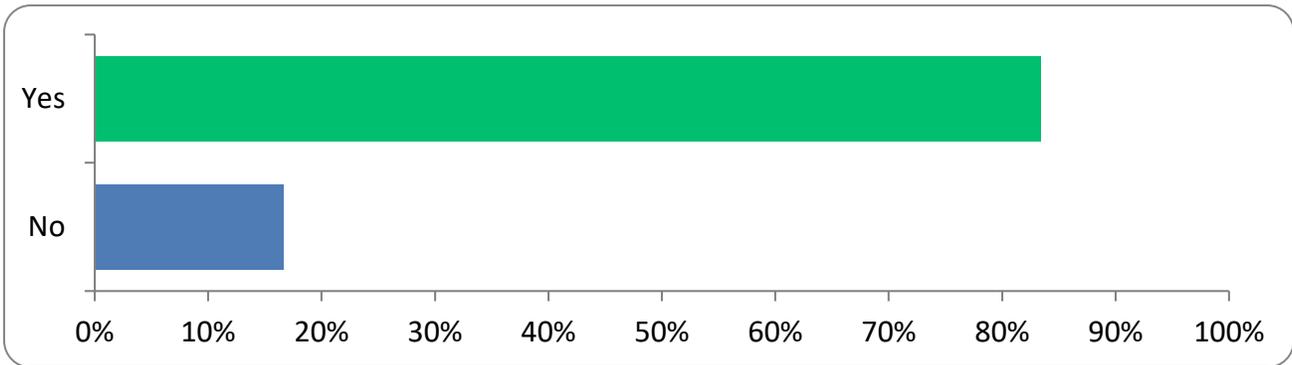
Q3: In the past 30 days, how often has your mental health (includes stress, depression, and problems with emotions) NOT been good? Enter a number between (0) and thirty (30). Please specify_____

Answered: 596 Skipped: 22

Average: 6.77 days

Q4: Do you know that there are Resources available for Mental Health needs? (Check one)

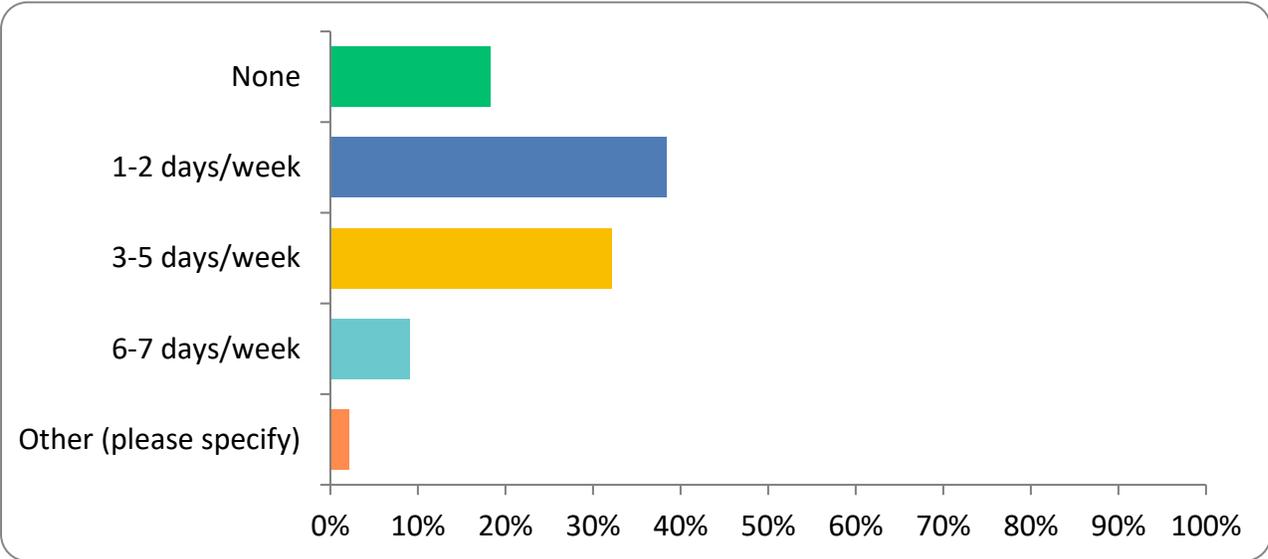
Answered: 613 Skipped: 5



ANSWER CHOICES	RESPONSES	
Yes	83.36%	511
No	16.64%	102
TOTAL		613

Q5: 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)

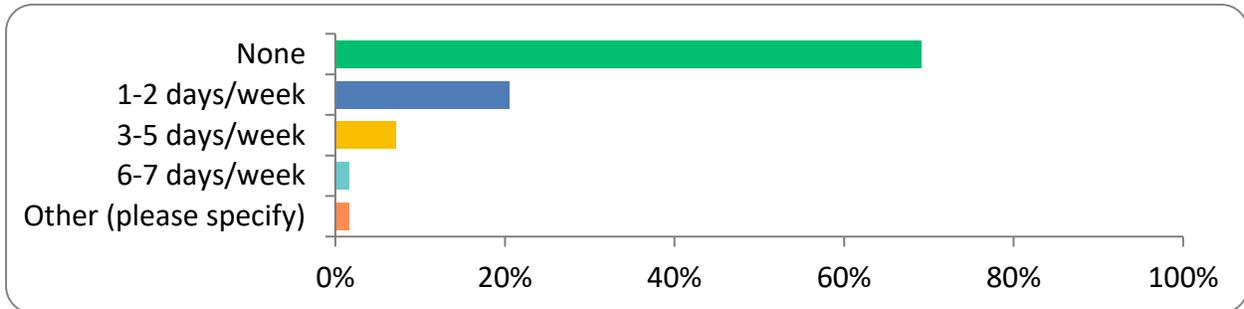
Answered: 617 Skipped: 1



ANSWER CHOICES	RESPONSES	
None	18.31%	113
1-2 days/week	38.41%	237
3-5 days/week	32.09%	198
6-7 days/week	9.08%	56
Other (please specify)	2.11%	13
TOTAL		617

Q6: In the past 3 months, how often have you used Parks/trails in Scotland County for any physical activities/exercises such as running, sports, or walking for exercise? (Check one)

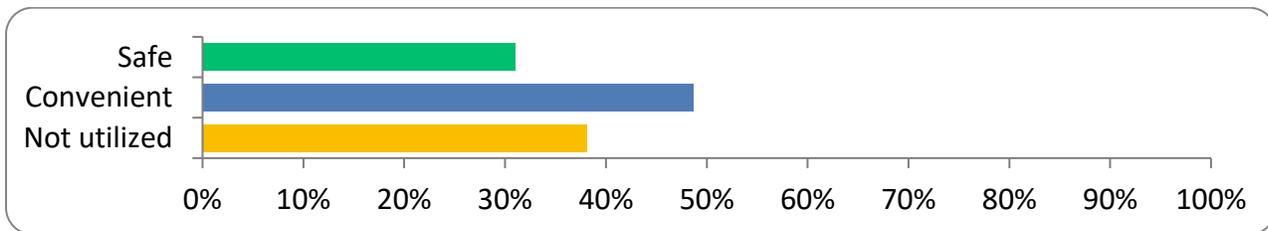
Answered: 618 Skipped: 0



ANSWER CHOICES	RESPONSES	
None	69.09%	427
1-2 days/week	20.55%	127
3-5 days/week	7.12%	44
6-7 days/week	1.62%	10
Other (please specify)	1.62%	10
TOTAL		618

Q7: I feel that the Parks in Scotland County are (choose all that apply):

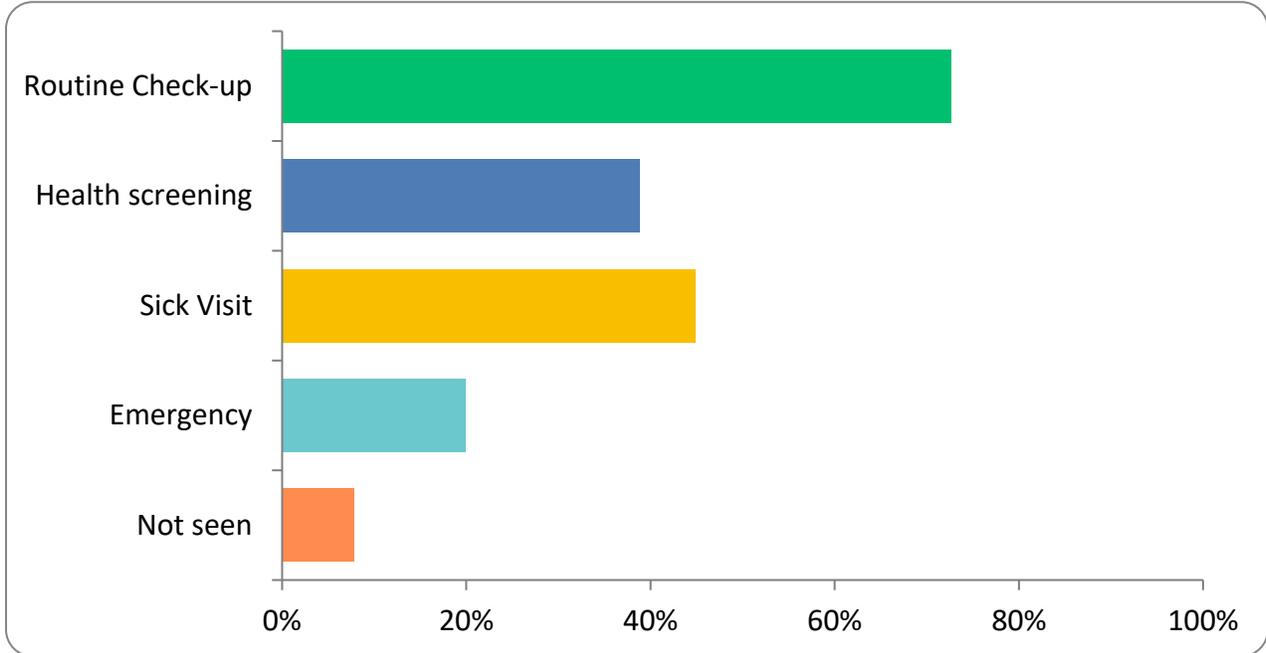
Answered: 593 Skipped: 25



ANSWER CHOICES	RESPONSES	
Safe	31.03%	184
Convenient	48.74%	289
Not utilized	38.11%	226
TOTAL RESPONDENTS:		593

Q8: In the past year, have you seen a medical provider for any of the following? (Check all that apply)

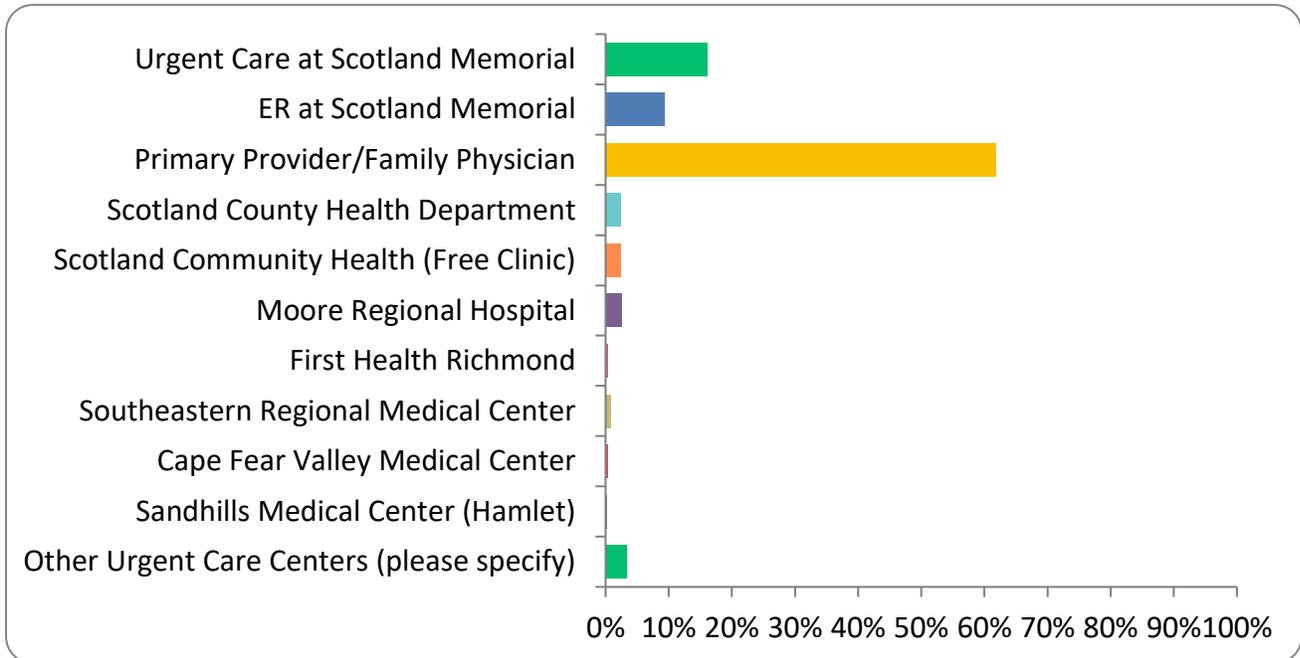
Answered: 612 Skipped: 6



ANSWER CHOICES	RESPONSES	
Routine Check-up	72.71%	445
Health screening	38.89%	238
Sick Visit	44.93%	275
Emergency	19.93%	122
Not seen	7.84%	48
TOTAL RESPONDENTS: 612		

Q9: When seeking medical care, where do you go first? (Check one)

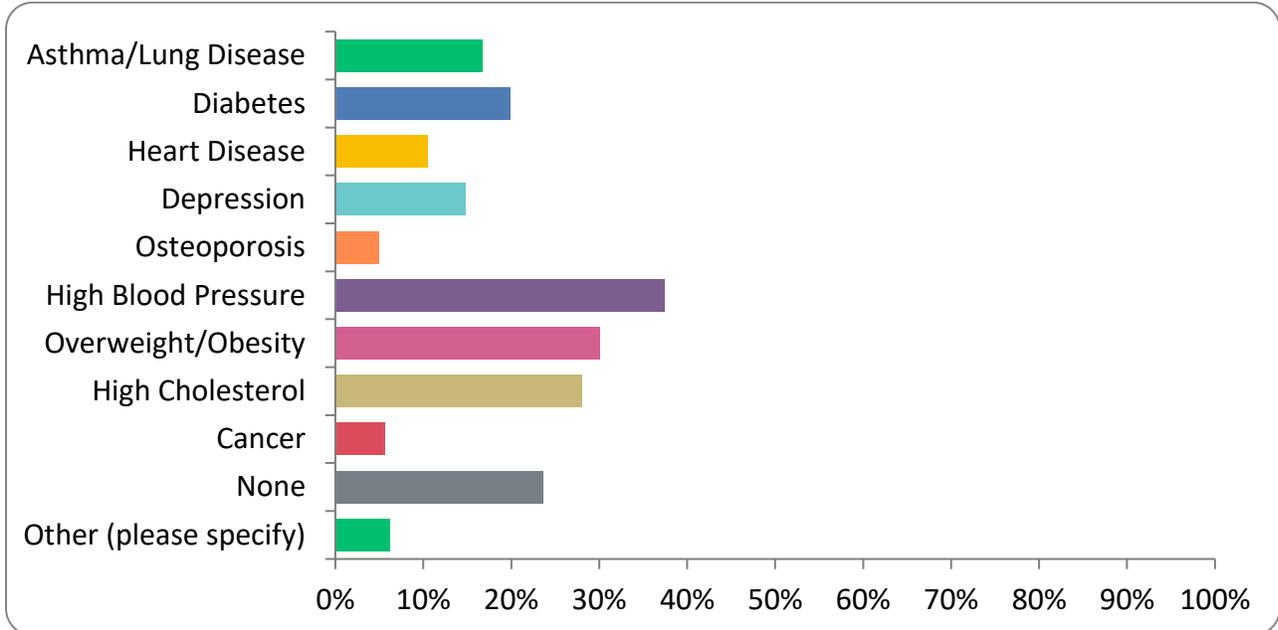
Answered: 616 Skipped: 2



ANSWER CHOICES	RESPONSES	
Urgent Care at Scotland Memorial	16.23%	100
ER at Scotland Memorial	9.42%	58
Primary Provider/Family Physician	61.85%	381
Scotland County Health Department	2.44%	15
Scotland Community Health (Free Clinic)	2.44%	15
Moore Regional Hospital	2.60%	16
First Health Richmond	0.32%	2
Southeastern Regional Medical Center	0.81%	5
Cape Fear Valley Medical Center	0.32%	2
Sandhills Medical Center (Hamlet)	0.16%	1
Other Urgent Care Centers (please specify)	3.41%	21
TOTAL		616

**Q10: Have you been told by a doctor, nurse, or health professional that you have any of the following?
(Check all that apply)**

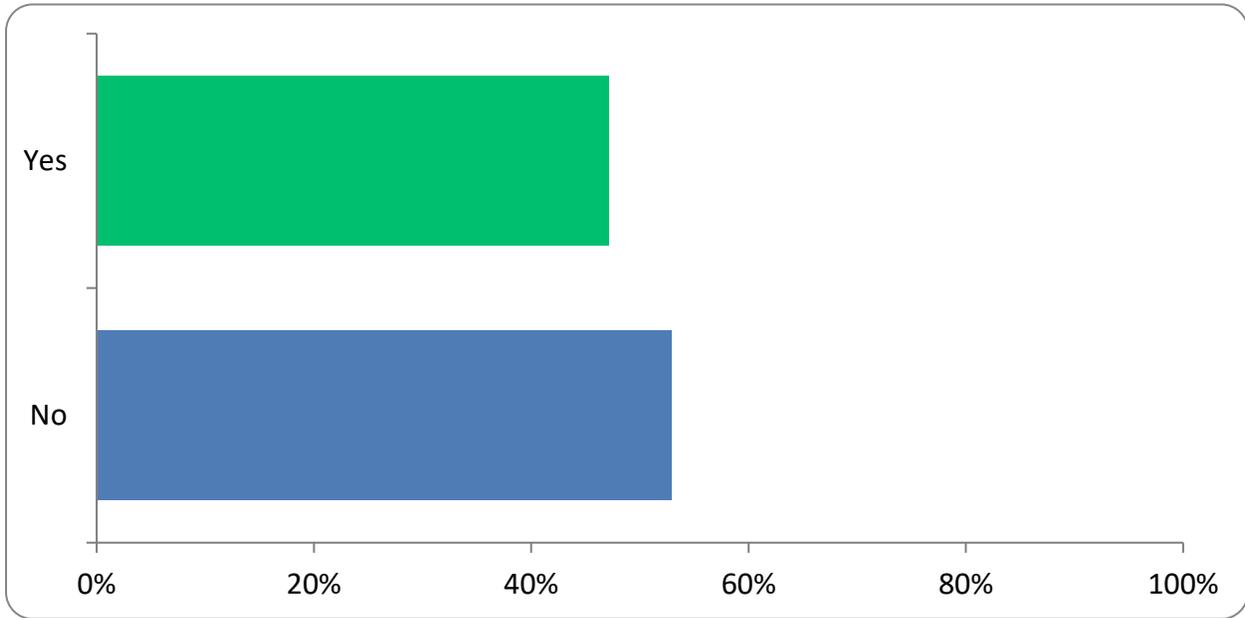
Answered: 610 Skipped: 8



ANSWER CHOICES	RESPONSES	
Asthma/Lung Disease	16.72%	102
Diabetes	19.84%	121
Heart Disease	10.49%	64
Depression	14.75%	90
Osteoporosis	4.92%	30
High Blood Pressure	37.38%	228
Overweight/Obesity	30.0%	183
High Cholesterol	28.03%	171
Cancer	5.57%	34
None	23.61%	144
Other (please specify)	6.23%	38
TOTAL RESPONDENTS: 610		

Q11: In the past year, have you attended any free community health events or screenings in Scotland County for any of the following? (COVID booster or vaccine, Blood pressure, Cholesterol, Diabetes, Mammogram, PSA, other)

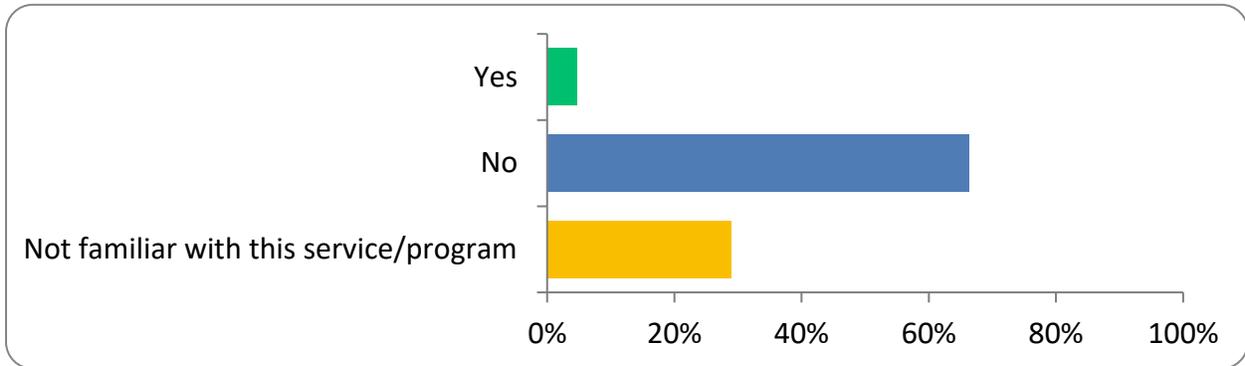
Answered: 615 Skipped: 3



ANSWER CHOICES	RESPONSES	
Yes	47.15%	290
No	52.85%	325
TOTAL		615

Q12: In the past year, have you participated in “Operation Medicine Drop” in Scotland County? (Check one)

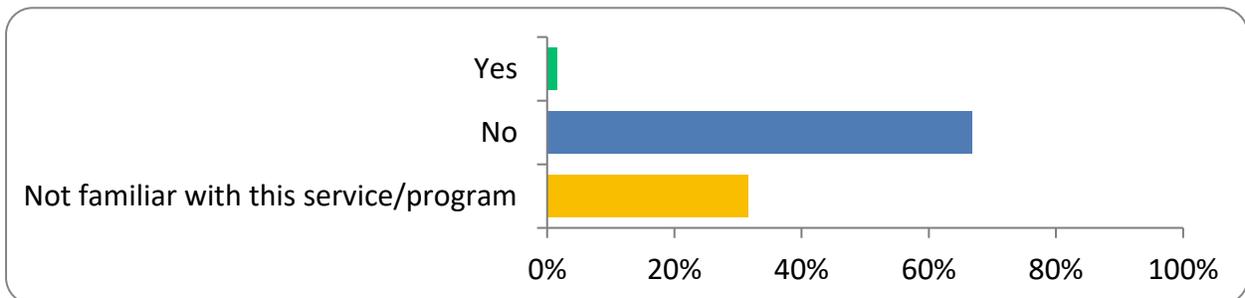
Answered: 617 Skipped: 1



ANSWER CHOICES	RESPONSES	
Yes	4.70%	29
No	66.29%	409
Not familiar with this service/program	29.01%	179
TOTAL		617

Q13: In the past year have you use/needed a Naloxone kit? (Check one)

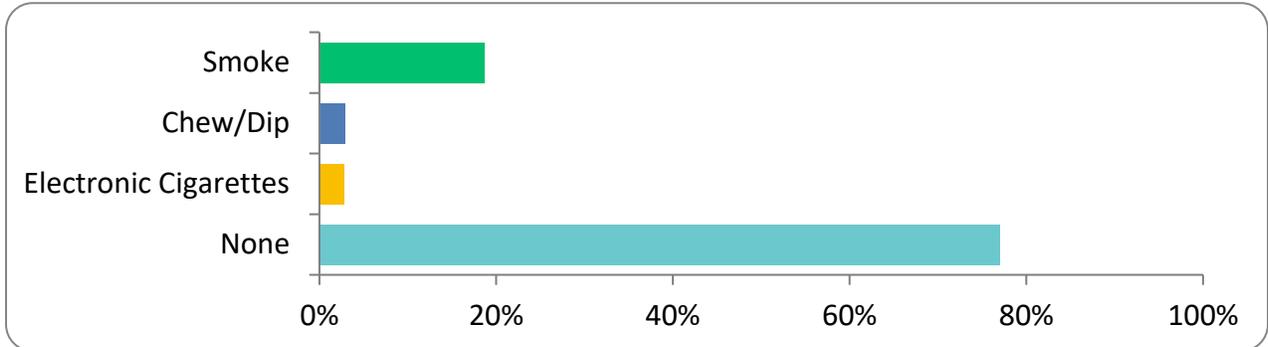
Answered: 617 Skipped: 1



ANSWER CHOICES	RESPONSES	
Yes	1.62%	10
No	66.77%	412
Not familiar with this service/program	31.60%	195
TOTAL		617

Q14: Do you use any kind of tobacco, smokeless products, or e-cigarettes (vaping)? (Check all that apply)

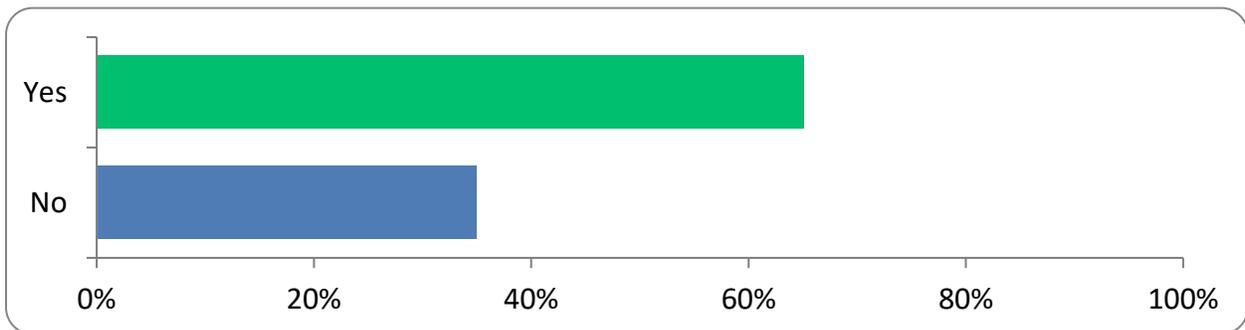
Answered: 617 Skipped: 1



ANSWER CHOICES	RESPONSES	
Smoke	18.64%	115
Chew/Dip	2.92%	18
Electronic Cigarettes	2.76%	17
None	76.99%	475
TOTAL RESPONDENTS: 617		

Q15: Do you support tobacco/smoke and vape-free public Places/Buildings/Grounds/Parks in Scotland County?

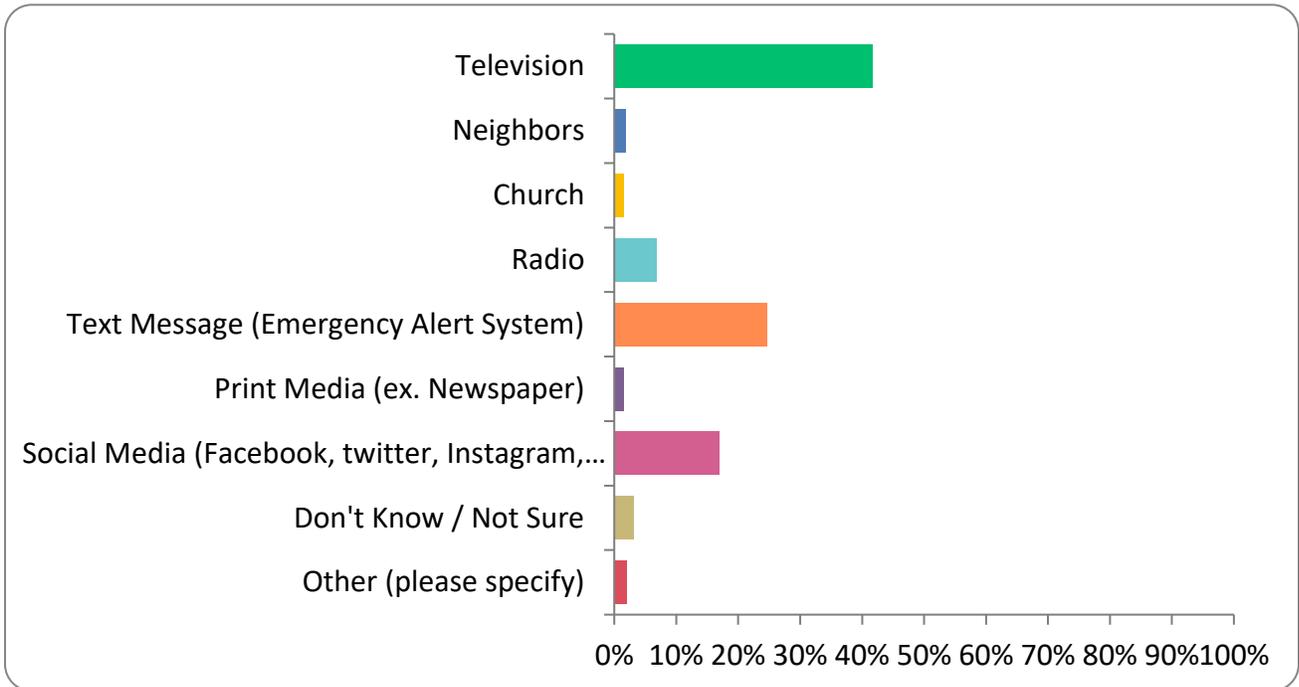
Answered: 612 Skipped: 6



ANSWER CHOICES	RESPONSES	
Yes	65.03%	398
No	34.97%	214
TOTAL		612

Q16: What would be your main way of getting information from authorities in a disaster or emergency (tornado, flood, hurricane, etc.)? (Check one)

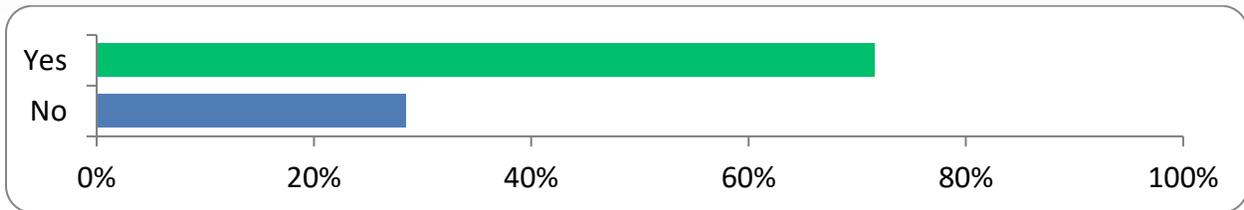
Answered: 609 Skipped: 9



ANSWER CHOICES	RESPONSES	
Television	41.71%	254
Neighbors	1.81%	11
Church	1.48%	9
Radio	6.90%	42
Text Message (Emergency Alert System)	24.63%	150
Print Media (ex. Newspaper)	1.48%	9
Social Media (Facebook, twitter, Instagram, etc.)	16.91%	103
Don't Know / Not Sure	3.12%	19
Other (please specify)	1.97%	12
TOTAL		609

Q17: Would you be likely to evacuate due to a disaster or emergency?

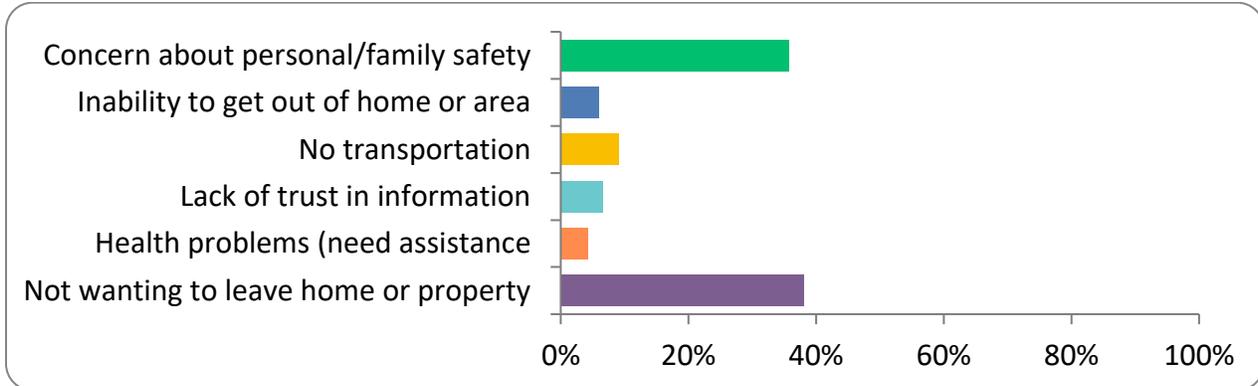
Answered: 598 Skipped: 20



ANSWER CHOICES	RESPONSES	
Yes	71.57%	428
No	28.43%	170
TOTAL		598

Q18: If you answered "Yes" to the previous question, skip this question. If you answered "No" to the previous question, why would you NOT evacuate in case of a disaster or emergency? (Check one)

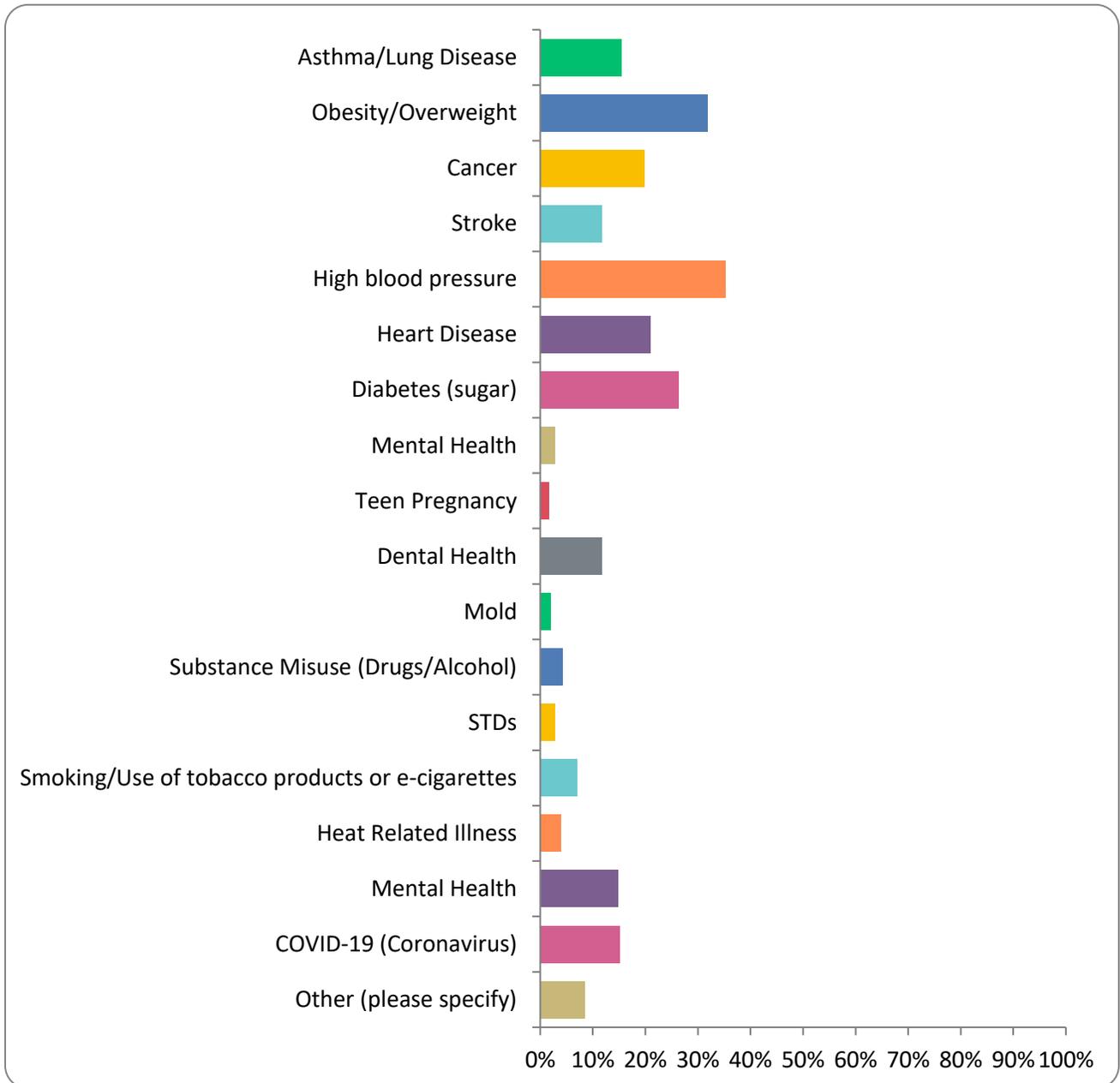
Answered: 165 Skipped: 453



ANSWER CHOICES	RESPONSES	
Concern about personal/family safety	35.76%	59
Inability to get out of home or area	6.06%	10
No transportation	9.09%	15
Lack of trust in information	6.67%	11
Health problems (need assistance)	4.24%	7
Not wanting to leave home or property	38.18%	63
TOTAL		165

Q19: What are your biggest health issues/ worries? (Check all that apply)

Answered: 579 Skipped: 39

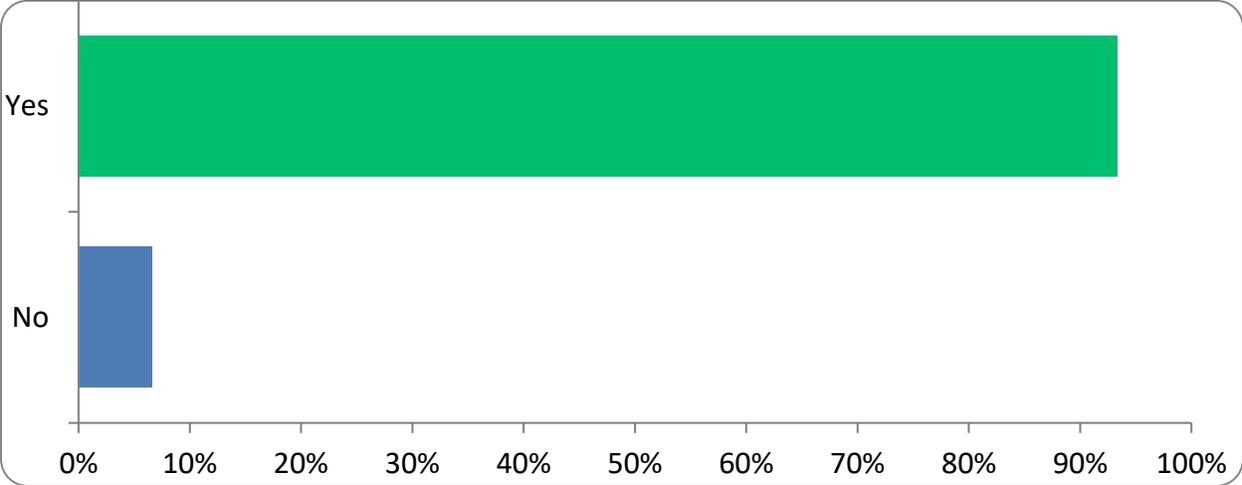


Q19: (Continued) What are your biggest health issues/worries? (Check all that apply)

ANSWER CHOICES	RESPONSES	
Asthma/Lung Disease	15.54%	90
Obesity/Overweight	31.95%	185
Cancer	19.86%	115
Stroke	11.74%	68
High blood pressure	35.23%	204
Heart Disease	21.07%	122
Diabetes (sugar)	26.42%	153
Mental Health	2.76%	16
Teen Pregnancy	1.73%	10
Dental Health	11.74%	68
Mold	2.07%	12
Substance Misuse (Drugs/Alcohol)	4.32%	25
STDs	2.76%	16
Smoking/Use of tobacco products or e-cigarettes	7.08%	41
Heat Related Illness	3.97%	23
Mental Health	14.85%	86
COVID-19 (Coronavirus)	15.20%	88
Other (please specify)	8.46%	49
TOTAL RESPONDENTS: 579		

Q20: Do you have access to healthy foods/items (i.e. fruits, vegetables, whole grains, etc.?)

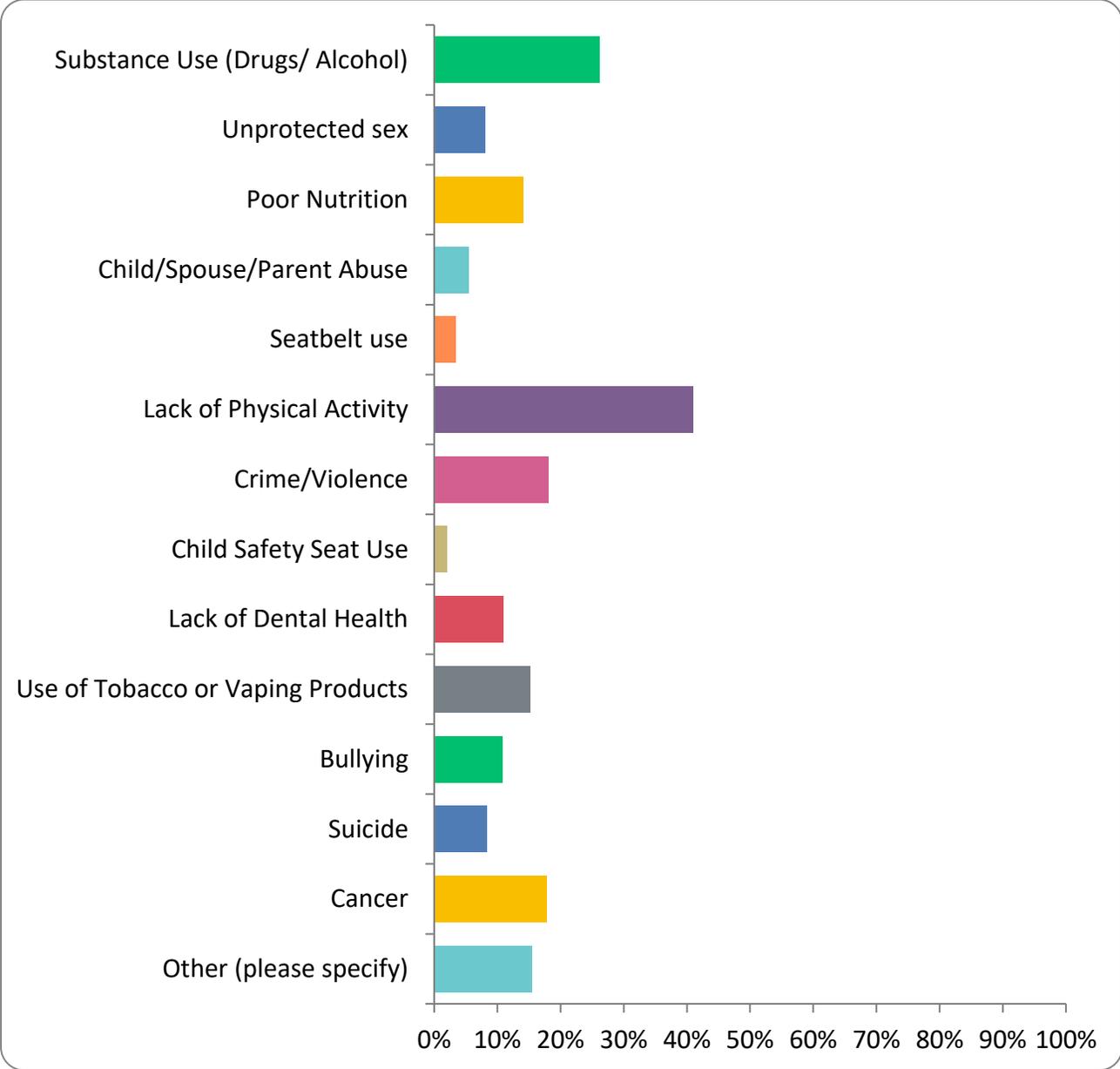
Answered: 587 Skipped: 31



ANSWER CHOICES	RESPONSES	
Yes	93.36%	548
No	6.64%	39
TOTAL		587

Q21: What are the biggest behaviors/risk factors that impact your family? (Check all that apply)

Answered: 539 Skipped: 79

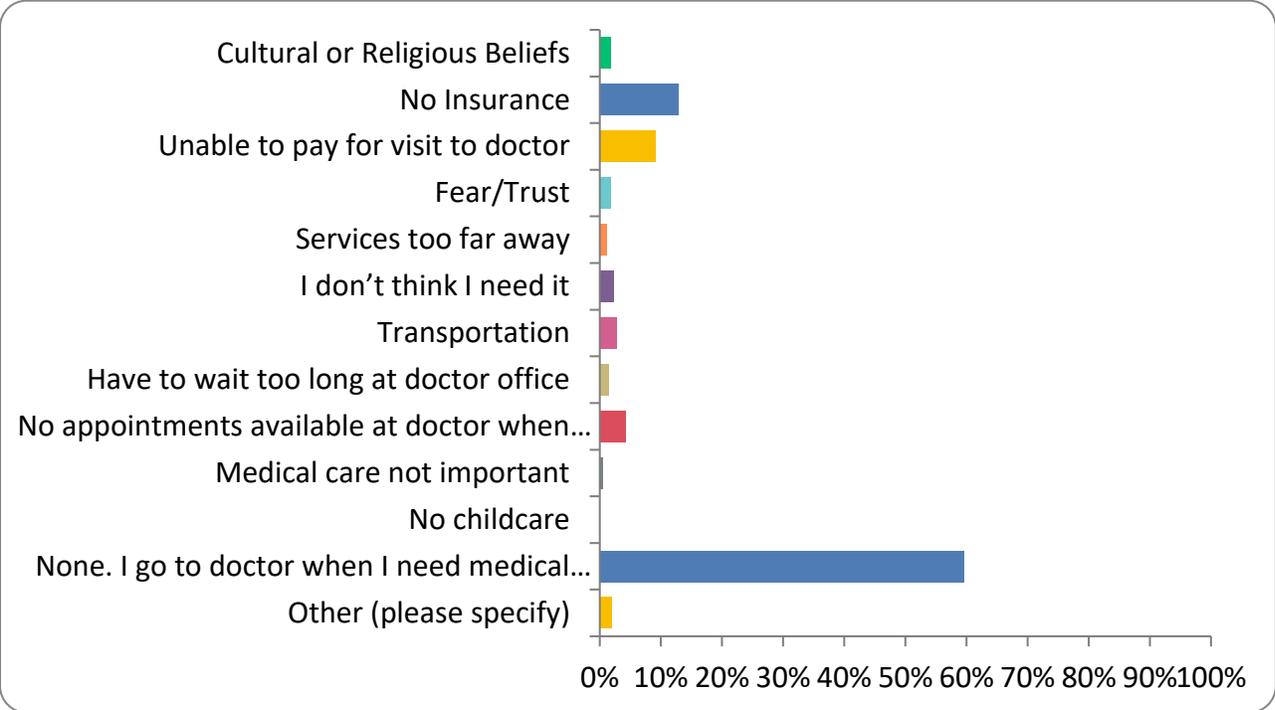


Q21: (Continued) What are the biggest behaviors/risk factors that impact your family? (Check all that apply)

ANSWER CHOICES	RESPONSES	
Substance Use (Drugs/ Alcohol)	26.16%	141
Unprotected sex	7.98%	43
Poor Nutrition	14.10%	76
Child/Spouse/Parent Abuse	5.38%	29
Seatbelt use	3.34%	18
Lack of Physical Activity	41.00%	221
Crime/Violence	18.00%	97
Child Safety Seat Use	2.04%	11
Lack of Dental Health	10.95%	59
Use of Tobacco or Vaping Products	15.21%	82
Bullying	10.76%	58
Suicide	8.35%	45
Cancer	17.81%	96
Other (please specify)	15.40%	83
TOTAL RESPONDENT: 539		

Q22: What is the main reason that keeps you or your family from getting medical care? (Check one)

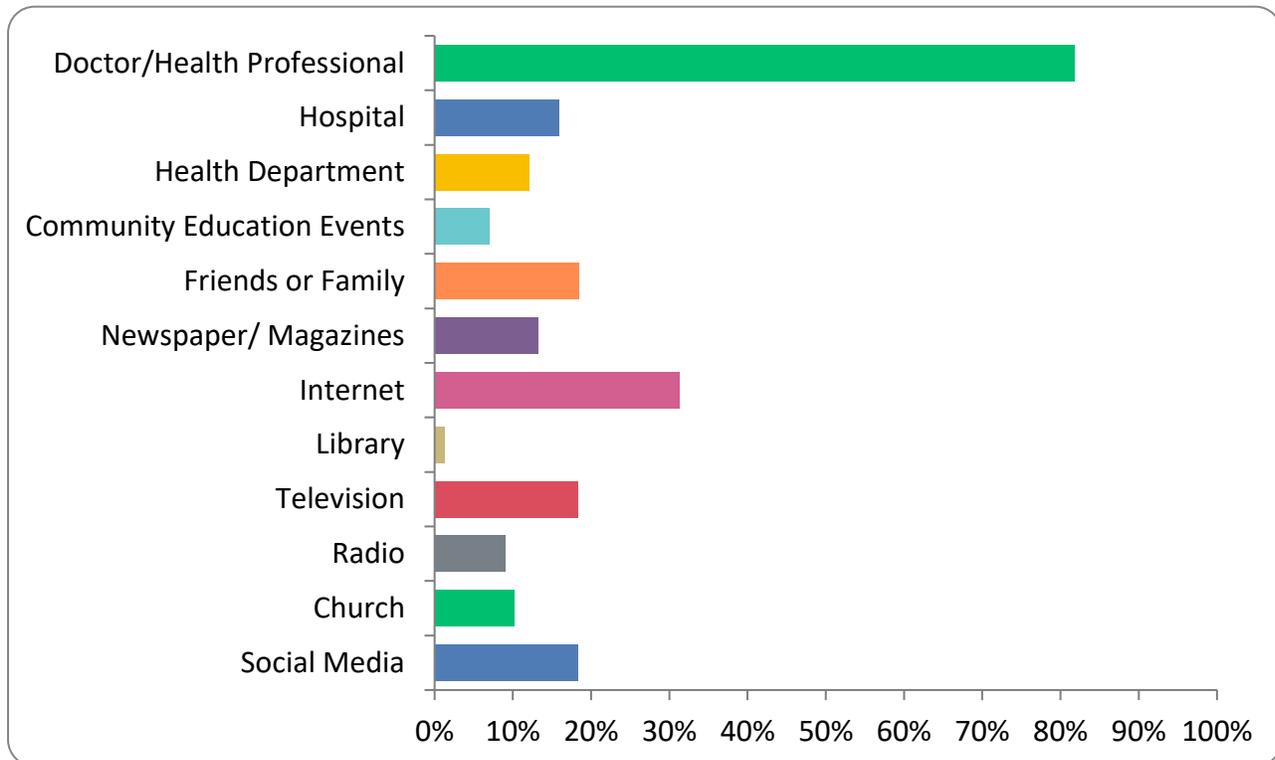
Answered: 597 Skipped: 21



ANSWER CHOICES	RESPONSES	
Cultural or Religious Beliefs	1.84%	11
No Insurance	12.90%	77
Unable to pay for visit to doctor	9.21%	55
Fear/Trust	1.84%	11
Services too far away	1.17%	7
I don't think I need it	2.35%	14
Transportation	2.85%	17
Have to wait too long at doctor office	1.51%	9
No appointments available at doctor when needed	4.19%	25
Medical care not important	0.50%	3
No childcare	0%	0
None. I go to doctor when I need medical care	59.63%	356
Other (please specify)	2.01%	12
TOTAL		597

Q23: Where do you and your family get most of your health information? (Check all that apply)

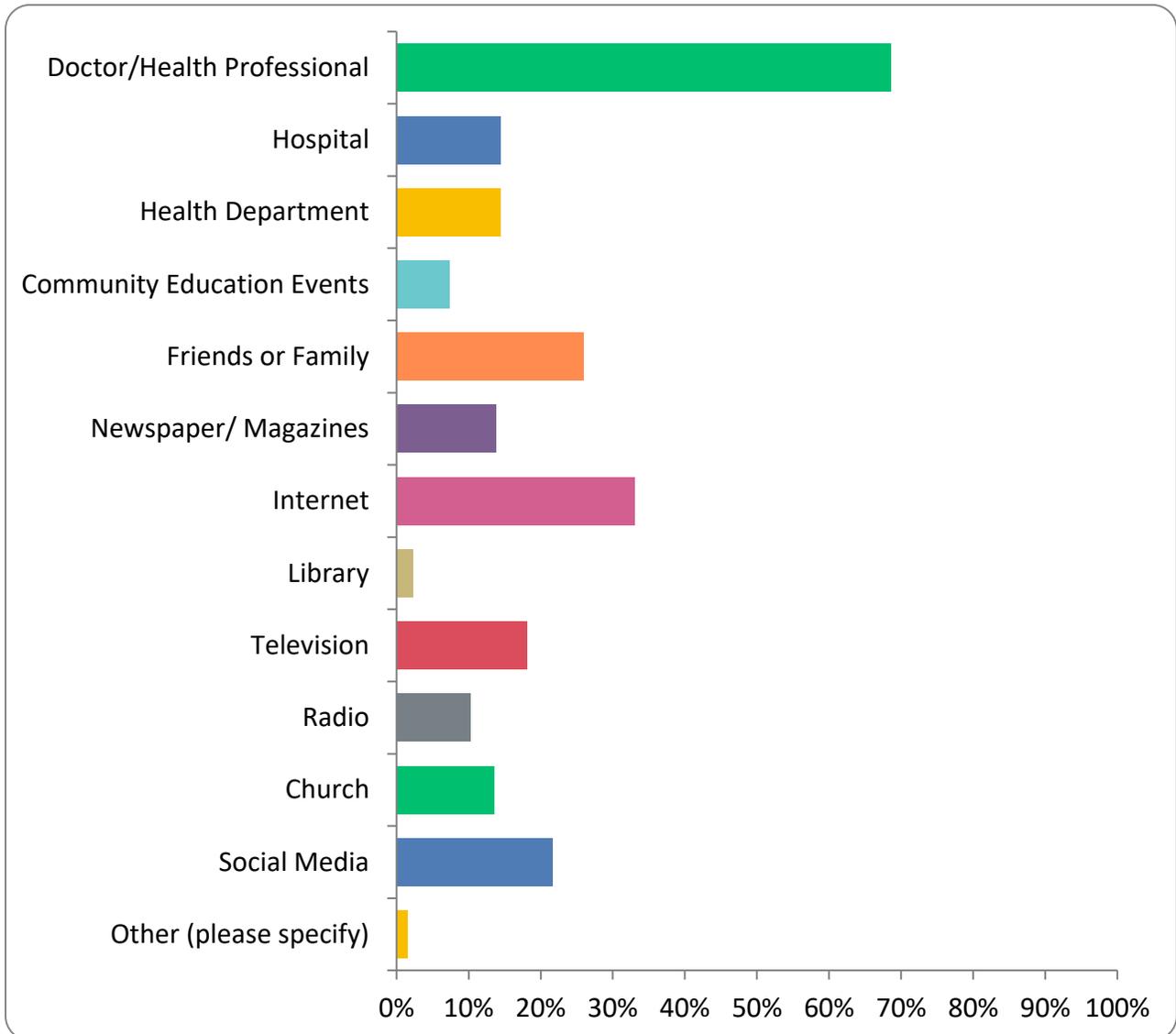
Answered: 601 Skipped: 17



ANSWER CHOICES	RESPONSES	
Doctor/Health Professional	81.86%	492
Hospital	15.97%	96
Health Department	12.15%	73
Community Education Events	6.99%	42
Friends or Family	18.47%	111
Newspaper/ Magazines	13.31%	80
Internet	31.28%	188
Library	1.33%	8
Television	18.30%	110
Radio	8.99%	54
Church	10.15%	61
Social Media	18.30%	110
TOTAL RESPONDENTS: 601		

Q24: Where do you and your family find Resources for other issues/concerns (Mental Health, Substance Misuse, quit smoking, food, shelter)? (Check all that apply)

Answered: 596 Skipped: 22

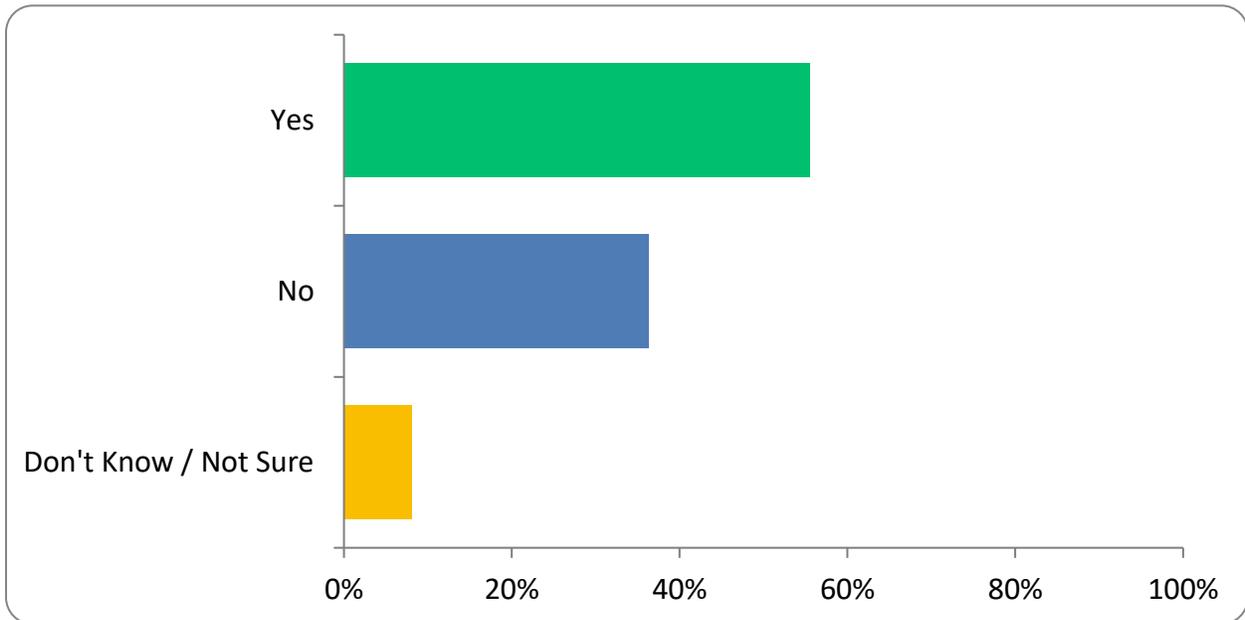


Q24: (Continued) Where do you and your family find Resources for other issues/concerns (Mental Health, Substance Misuse, quit smoking, food, shelter)? (Check all that apply)

ANSWER CHOICES	RESPONSES	
Doctor/Health Professional	68.62%	409
Hospital	14.43%	86
Health Department	14.43%	86
Community Education Events	7.38%	44
Friends or Family	26.01%	155
Newspaper/ Magazines	13.76%	82
Internet	33.05%	197
Library	2.35%	14
Television	18.12%	108
Radio	10.23%	61
Church	13.59%	81
Social Media	21.64%	129
Other (please specify)	1.51%	9
TOTAL RESPONDENTS: 596		

**Q25: Does your family have a basic emergency supply kit?
 (Kits include water, canned food, any needed medicines,
 first-aid kit, flashlights and batteries, non-electric can opener,
 blanket, etc.)**

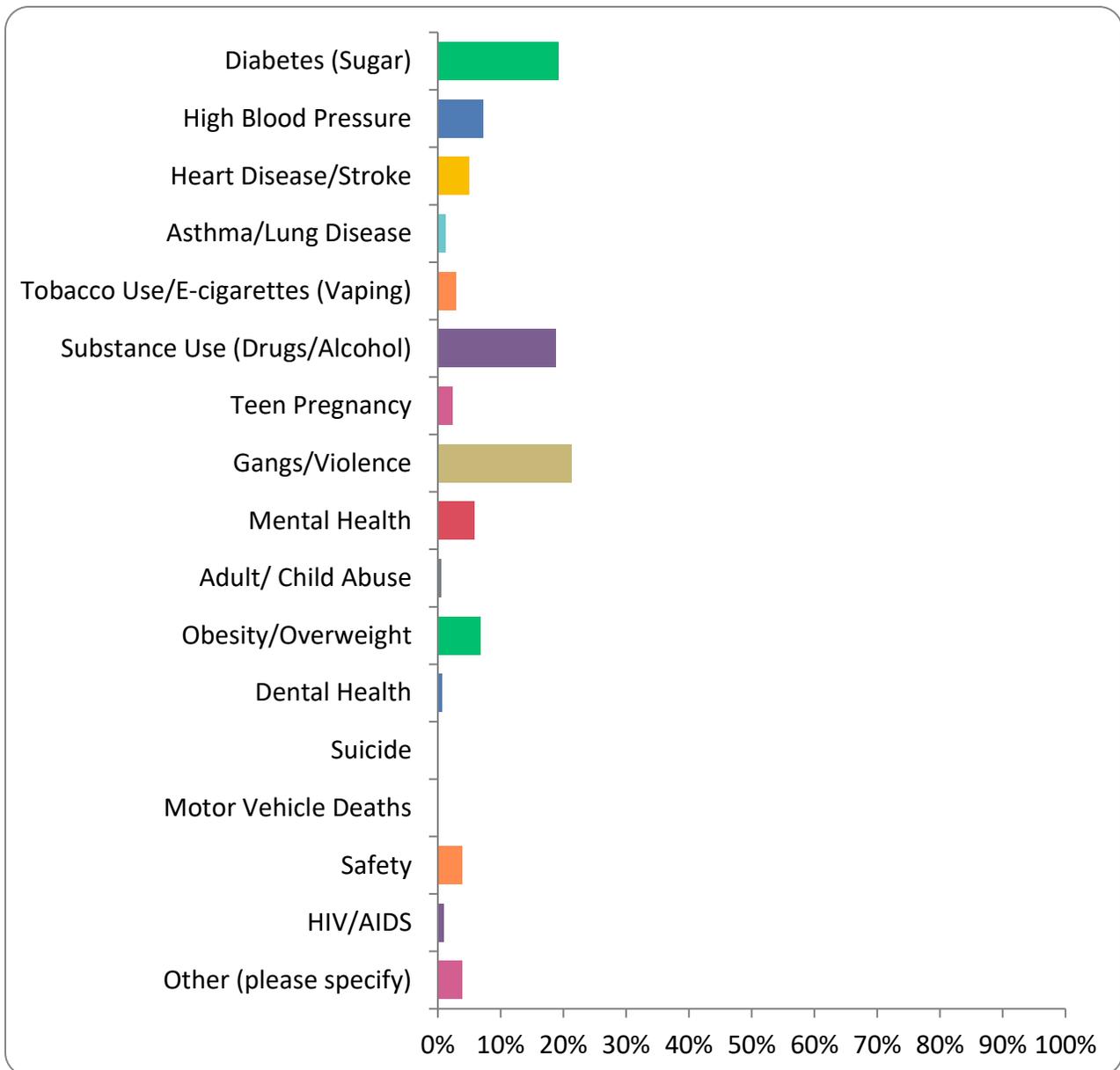
Answered: 602 Skipped: 16



ANSWER CHOICES	RESPONSES	
Yes	55.48%	334
No	36.38%	219
Don't Know / Not Sure	8.14%	49
TOTAL		602

Q26: In your opinion, what is the biggest health issue/ concern in your community? (Check one)

Answered: 593 Skipped: 25

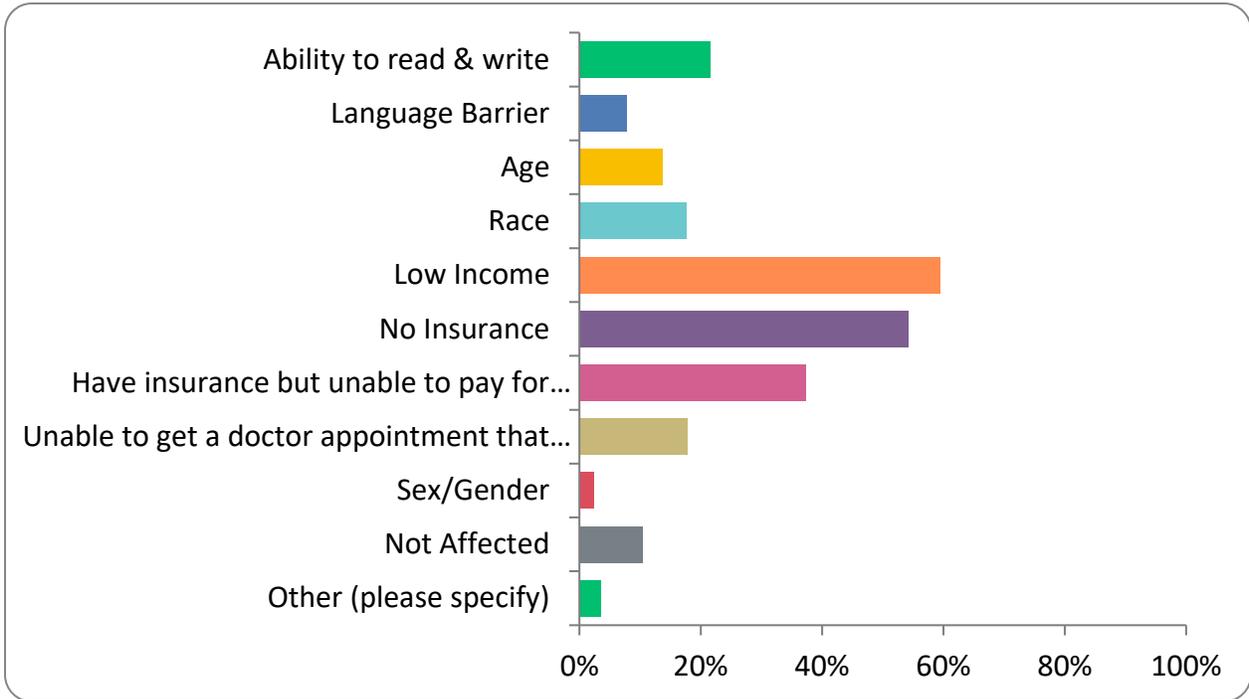


Q26: (Continued) In your opinion, what is the biggest health issue/ concern in your community? (Check one)

ANSWER CHOICES	RESPONSES	
Diabetes (Sugar)	19.22%	114
High Blood Pressure	7.25%	43
Heart Disease/Stroke	4.89%	29
Asthma/Lung Disease	1.18%	7
Tobacco Use/E-cigarettes (Vaping)	2.87%	17
Substance Use (Drugs/Alcohol)	18.72%	111
Teen Pregnancy	2.36%	14
Gangs/Violence	21.25%	126
Mental Health	5.73%	34
Adult/ Child Abuse	0.51%	3
Obesity/Overweight	6.75%	40
Dental Health	0.67%	4
Suicide	0%	0
Motor Vehicle Deaths	0%	0
Safety	3.88%	23
HIV/AIDS	0.84%	5
Other (please specify)	3.88%	23
TOTAL		593

**Q27: Which do you feel affects the quality of healthcare that you or people in your community receive?
(Check all that apply)**

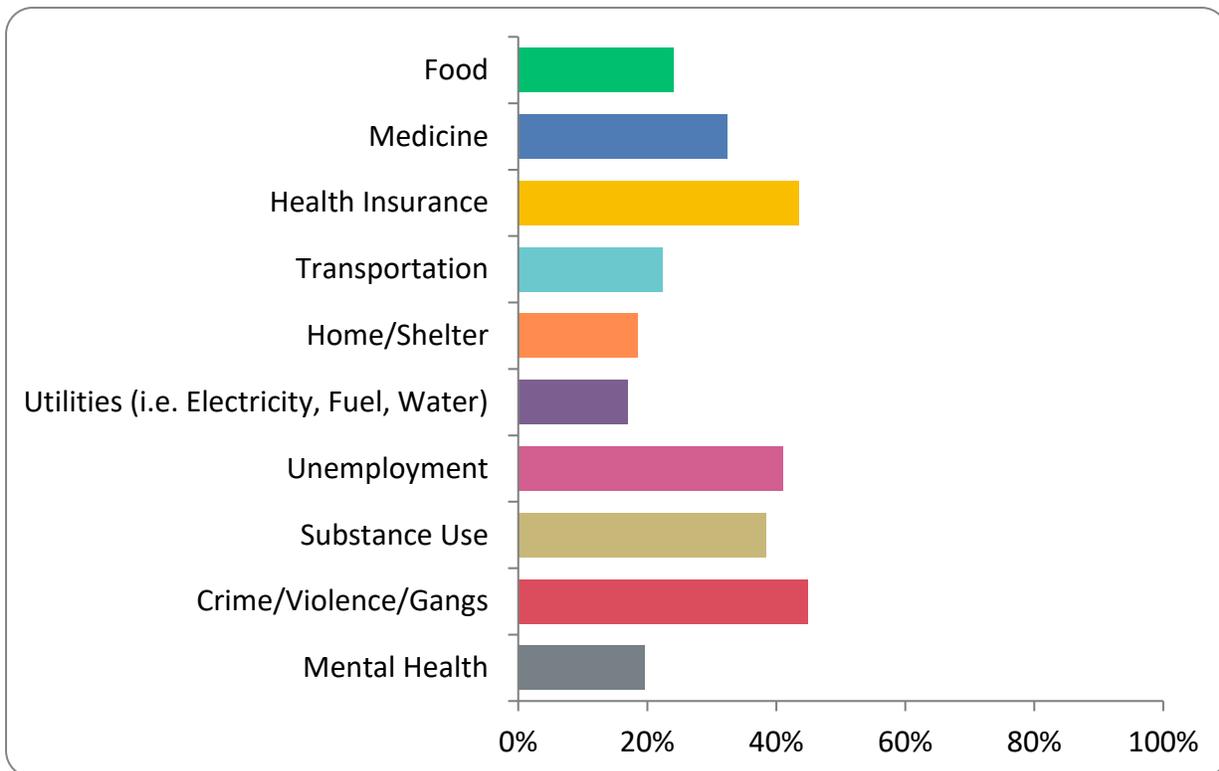
Answered: 591 Skipped: 27



ANSWER CHOICES	RESPONSES	
Ability to read & write	21.49%	127
Language Barrier	7.78%	46
Age	13.71%	81
Race	17.60%	104
Low Income	59.39%	351
No Insurance	54.15%	320
Have insurance but unable to pay for doctor visits or co-pay	37.39%	221
Unable to get a doctor appointment that is convenient for me	17.77%	105
Sex/Gender	2.37%	14
Not Affected	10.49%	62
Other (please specify)	3.55%	21
TOTAL RESPONDENTS: 591		

Q28: What do you feel are the top three issues in your community due to lack of money? (Check three)

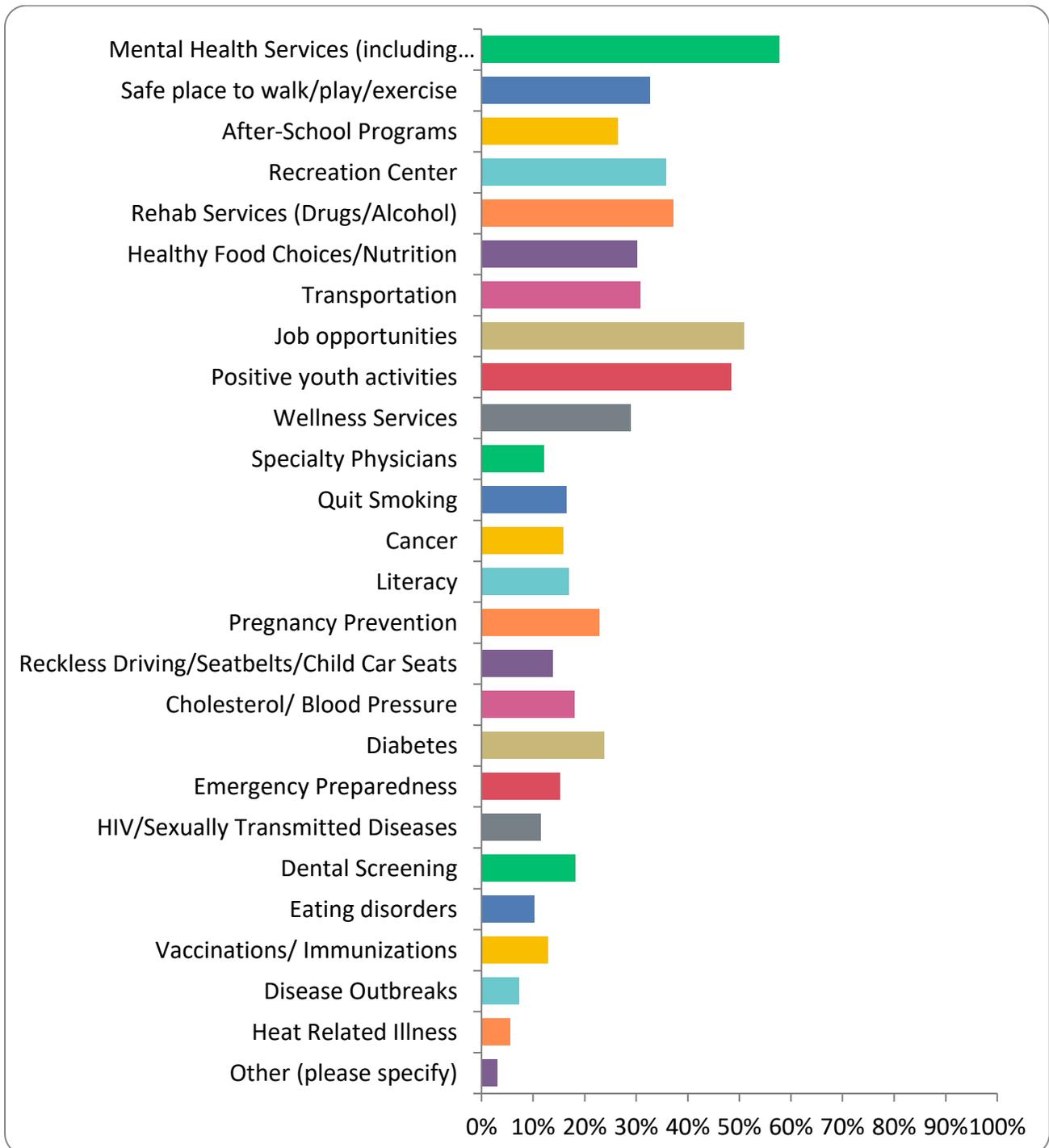
Answered: 590 Skipped: 28



ANSWER CHOICES	RESPONSES	
Food	24.07%	142
Medicine	32.37%	191
Health Insurance	43.56%	257
Transportation	22.37%	132
Home/Shelter	18.47%	109
Utilities (i.e. Electricity, Fuel, Water)	16.95%	100
Unemployment	41.02%	242
Substance Use	38.47%	227
Crime/Violence/Gangs	44.92%	265
Mental Health	19.66%	116
TOTAL RESPONDENTS: 590		

Q29: What services/screenings/education does your community need to help improve the health of your family and neighbors? (Check all that apply)

Answered: 579 Skipped: 39



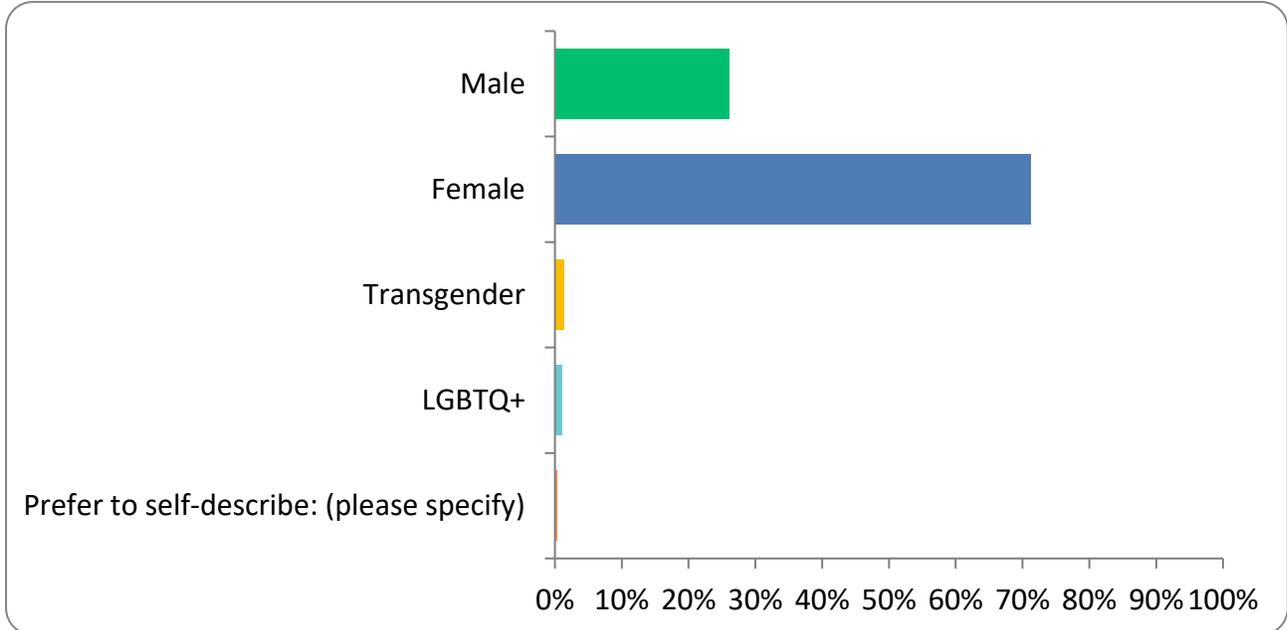
Q29: (Continued) What services/screenings/education does your community need to help improve the health of your family and neighbors? (Check all that apply)

ANSWER CHOICES	RESPONSES	
Mental Health Services (including depression/anxiety)	57.69%	334
Safe place to walk/play/exercise	32.64%	189
After-School Programs	26.42%	153
Recreation Center	35.75%	207
Rehab Services (Drugs/Alcohol)	37.13%	215
Healthy Food Choices/Nutrition	30.22%	175
Transportation	30.74%	178
Job opportunities	50.95%	295
Positive youth activities	48.36%	280
Wellness Services	28.84%	167
Specialty Physicians	12.09%	70
Quit Smoking	16.41%	95
Cancer	15.89%	92
Literacy	16.93%	98
Pregnancy Prevention	22.80%	132
Reckless Driving/Seatbelts/Child Car Seats	13.82%	80
Cholesterol/ Blood Pressure	17.96%	104
Diabetes	23.83%	138
Emergency Preparedness	15.20%	88
HIV/Sexually Transmitted Diseases	11.40%	66
Dental Screening	18.13%	105
Eating disorders	10.19%	59
Vaccinations/ Immunizations	12.78%	74
Disease Outbreaks	7.25%	42
Heat Related Illness	5.53%	32
Other (please specify)	3.11%	18
TOTAL RESPONDENTS: 579		

DEMOGRAPHICS

I am:

Answered: 591 Skipped: 27

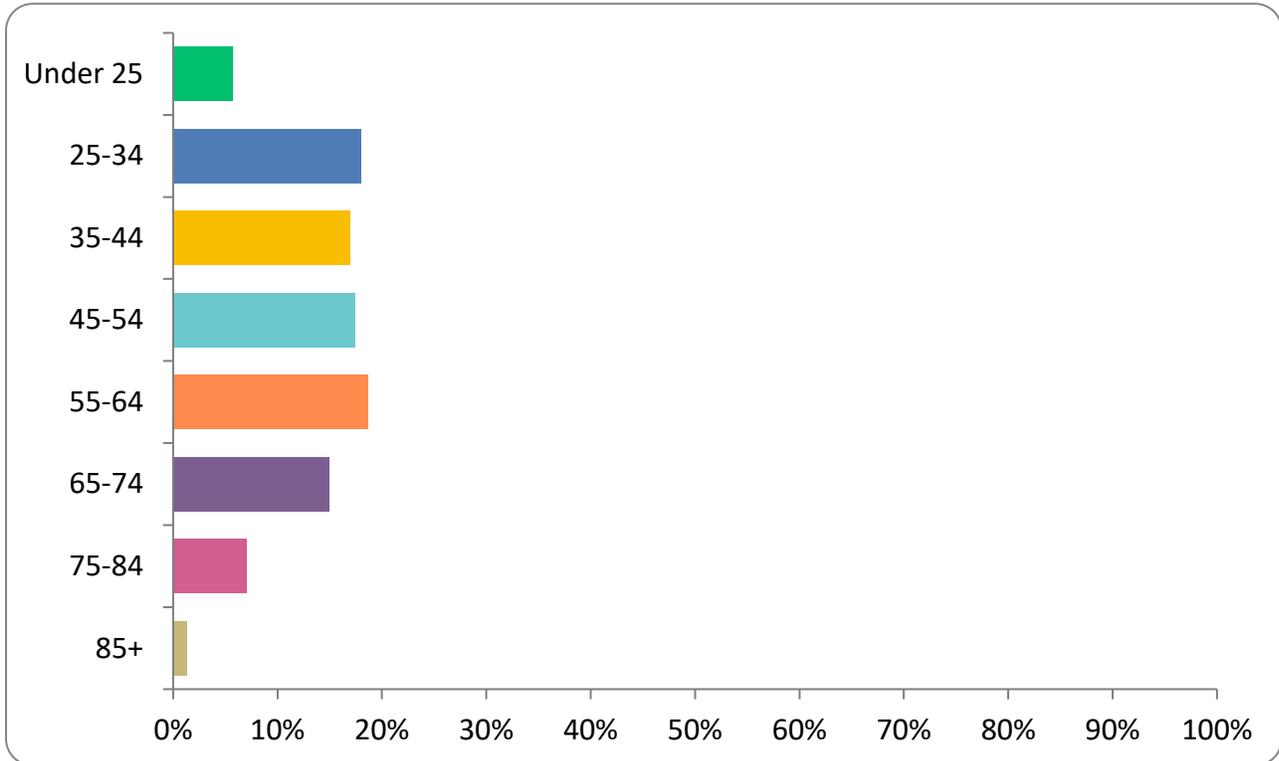


ANSWER CHOICES	RESPONSES	
Male	26.06%	154
Female	71.24%	421
Transgender	1.35%	8
LGBTQ+	1.02%	6
Prefer to self-describe: (please specify)	0.34%	2
TOTAL		591

DEMOGRAPHICS

My Age is:

Answered: 596 Skipped: 22

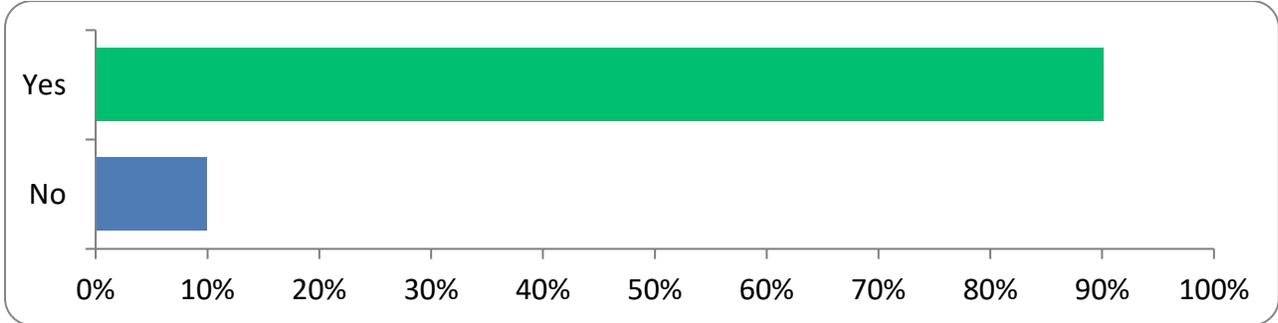


ANSWER CHOICES	RESPONSES	
Under 25	5.70%	34
25-34	17.95%	107
35-44	16.95%	101
45-54	17.45%	104
55-64	18.62%	111
65-74	14.93%	89
75-84	7.05%	42
85+	1.34%	8
TOTAL		596

DEMOGRAPHICS

Do you have health insurance?

Answered: 596 Skipped: 22

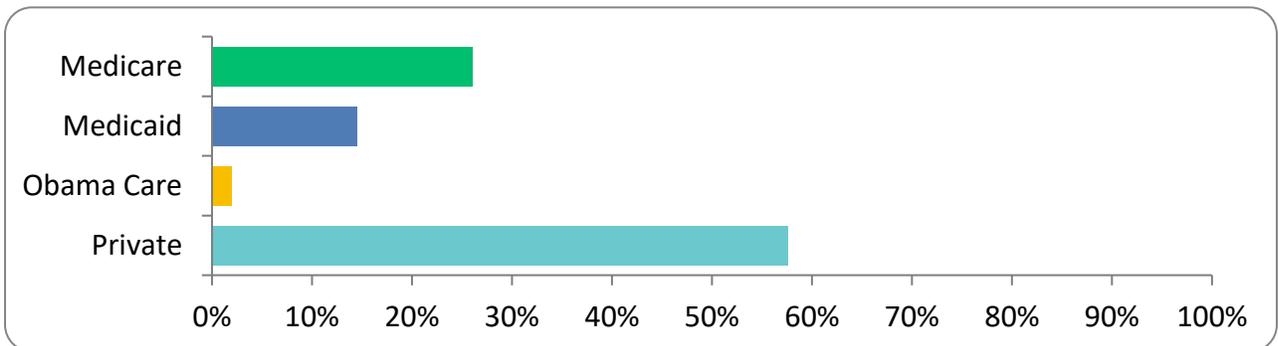


ANSWER CHOICES	RESPONSES	
Yes	90.10%	537
No	9.90%	59
TOTAL		596

DEMOGRAPHICS

If you have insurance, what type?

Answered: 526 Skipped: 92

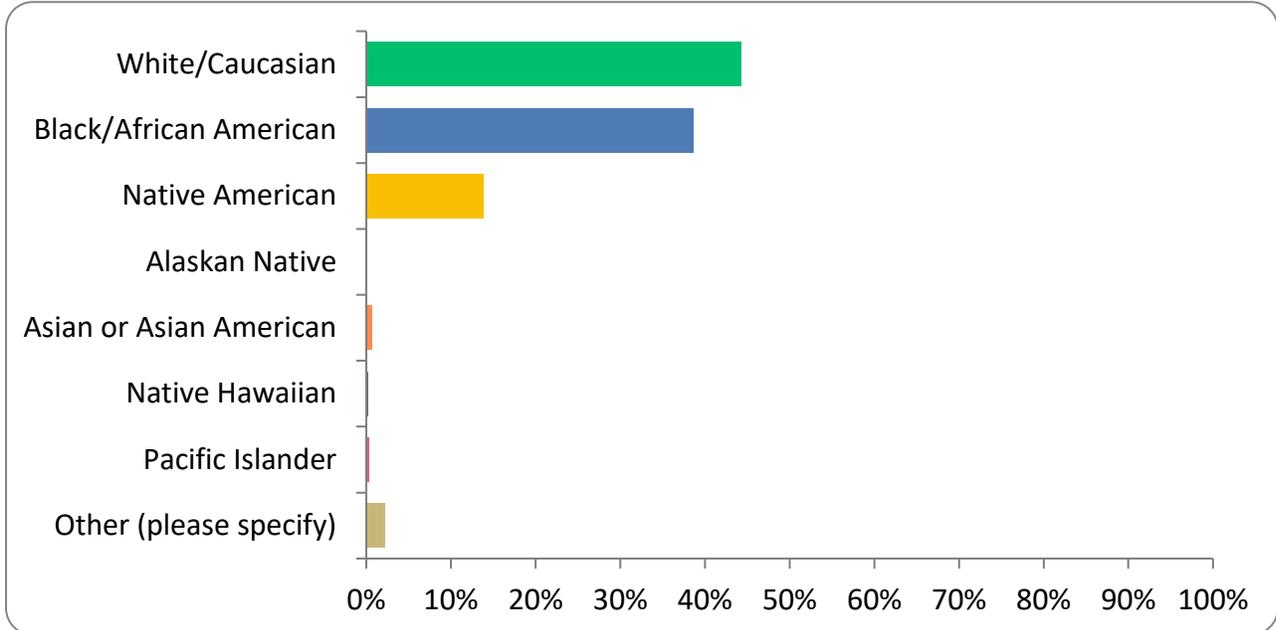


ANSWER CHOICES	RESPONSES	
Medicare	26.05%	137
Medicaid	14.45%	76
Obama Care	1.90%	10
Private	57.60%	303
TOTAL		526

DEMOGRAPHICS

My race is:

Answered: 594 Skipped: 24

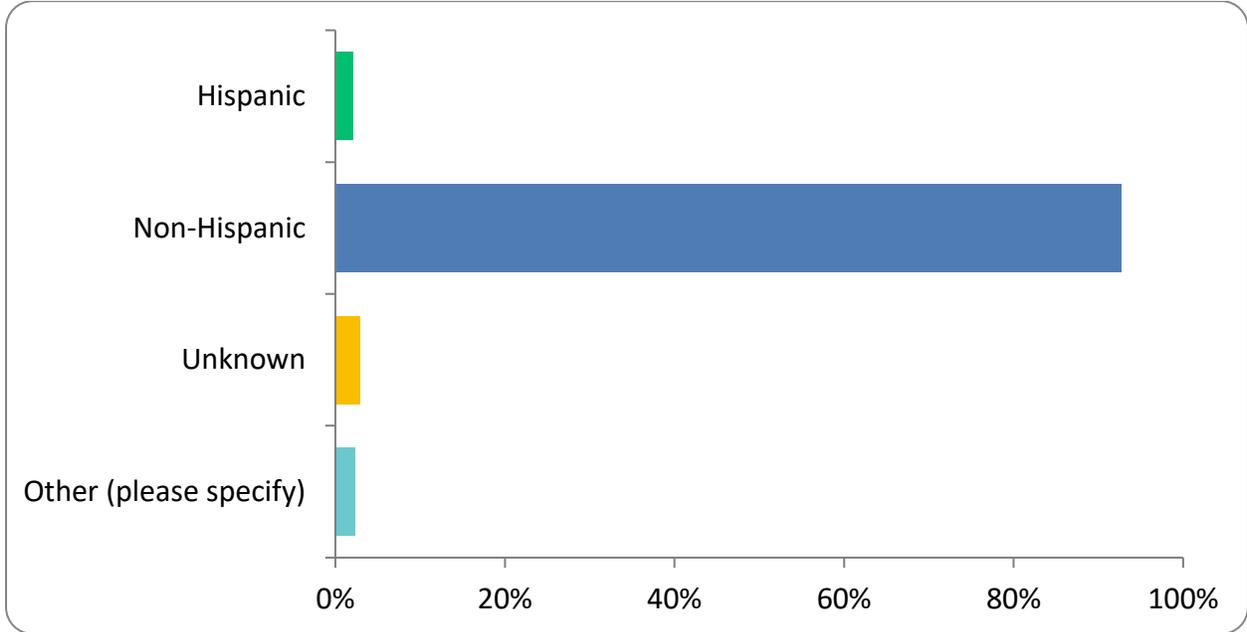


ANSWER CHOICES	RESPONSES	
White/Caucasian	44.28%	263
Black/African American	38.55%	229
Native American	13.80%	82
Alaskan Native	0%	0
Asian or Asian American	0.67%	4
Native Hawaiian	0.17%	1
Pacific Islander	0.34%	2
Other (please specify)	2.19%	13
TOTAL		594

DEMOGRAPHICS

What is your ethnicity?

Answered: 578 Skipped: 40

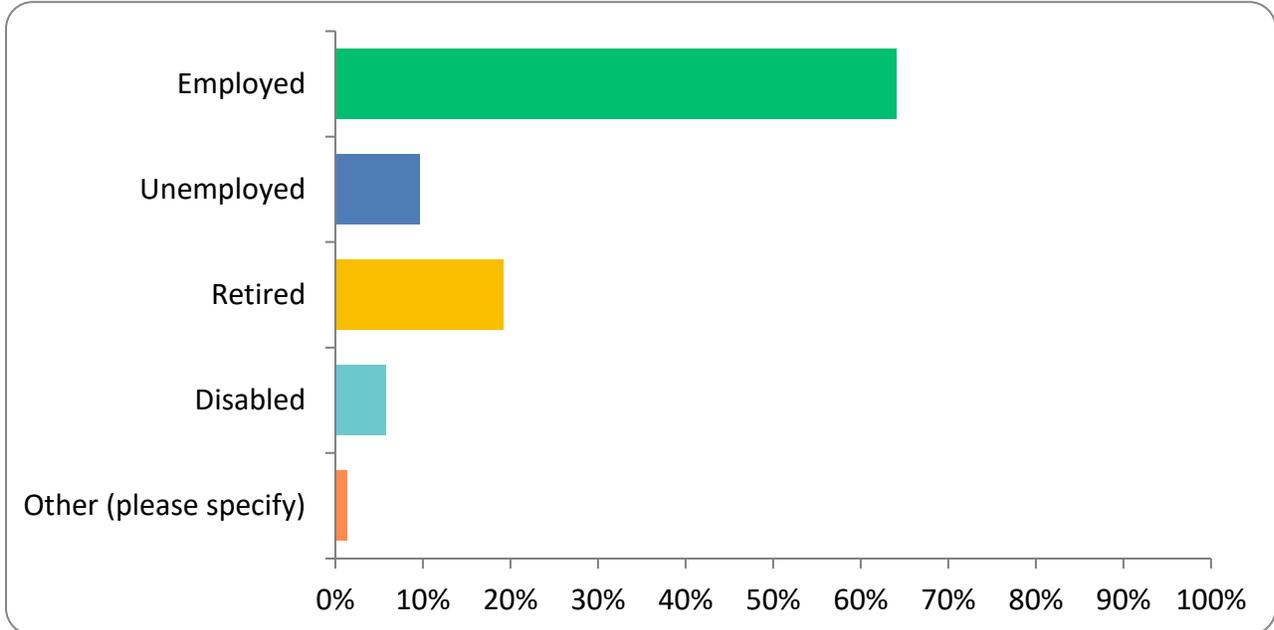


ANSWER CHOICES	RESPONSES	
Hispanic	2.08%	12
Non-Hispanic	92.73%	536
Unknown	2.94%	17
Other (please specify)	2.25%	13
TOTAL		578

DEMOGRAPHICS

I am:

Answered: 593 Skipped: 25

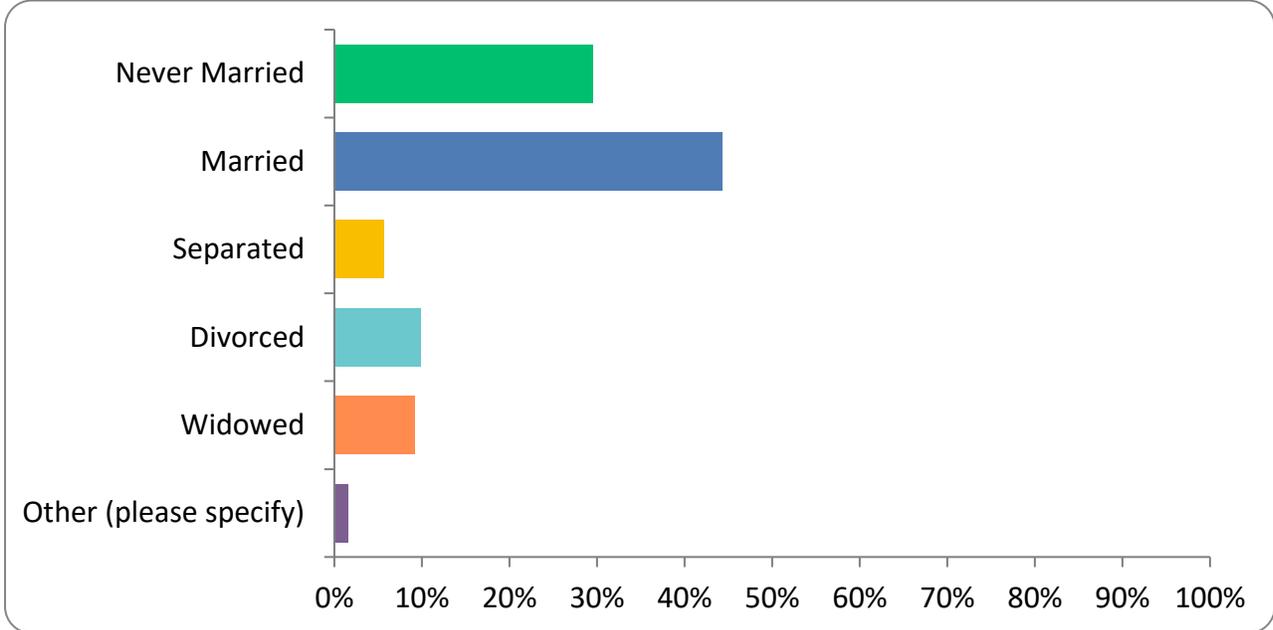


ANSWER CHOICES	RESPONSES	
Employed	64.08%	380
Unemployed	9.61%	57
Retired	19.22%	114
Disabled	5.73%	34
Other (please specify)	1.35%	8
TOTAL		593

DEMOGRAPHICS

What is your marital status?

Answered: 599 Skipped: 19

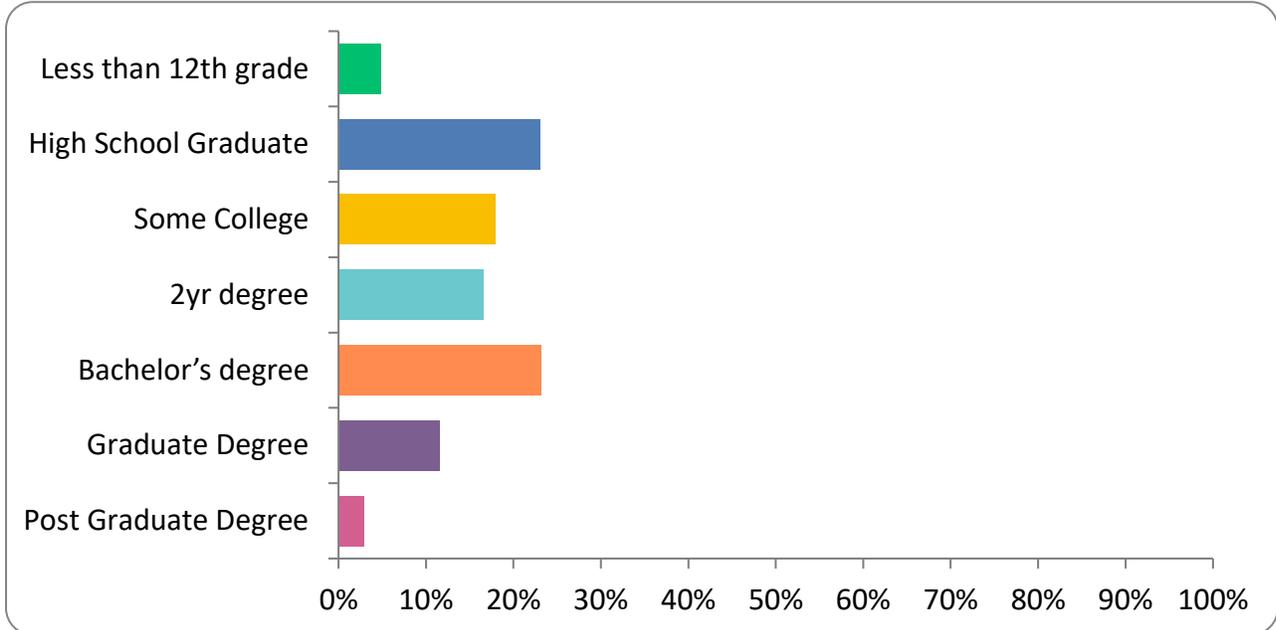


ANSWER CHOICES	RESPONSES	
Never Married	29.55%	177
Married	44.24%	265
Separated	5.68%	34
Divorced	9.85%	59
Widowed	9.18%	55
Other (please specify)	1.50%	9
TOTAL		599

DEMOGRAPHICS

My highest level of education completed:

Answered: 596 Skipped: 22

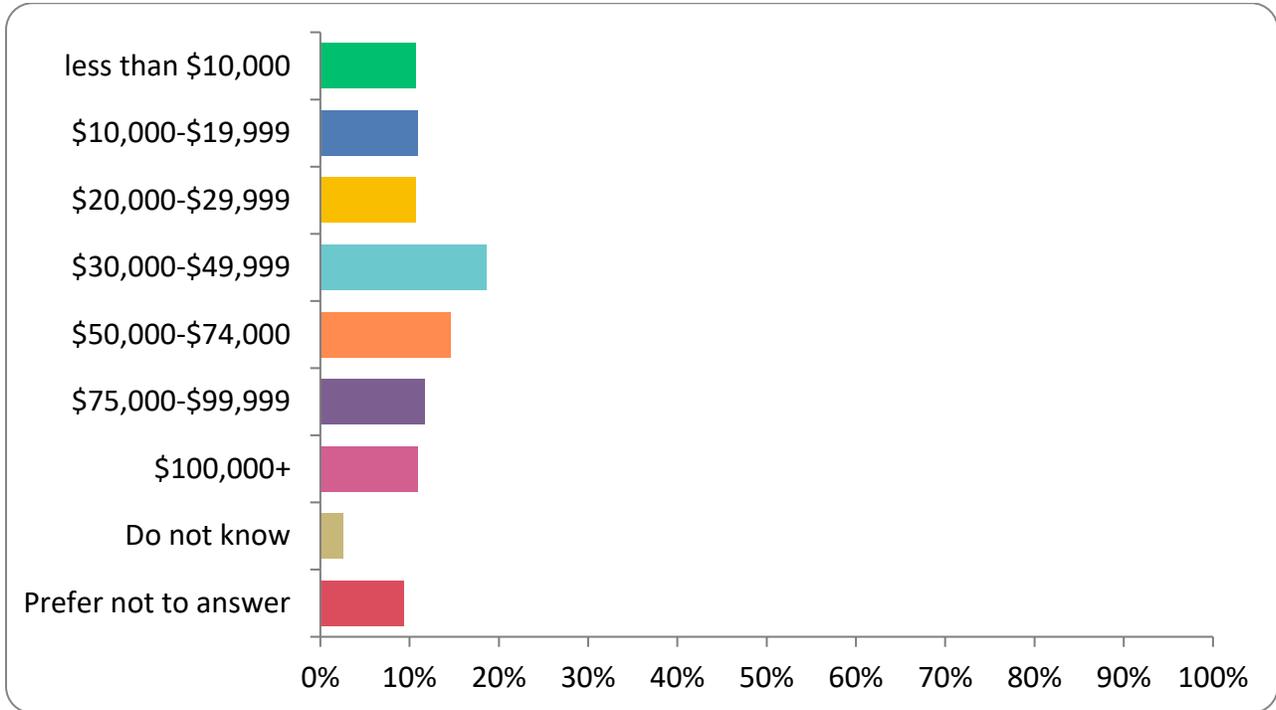


ANSWER CHOICES	RESPONSES	
Less than 12th grade	4.87%	29
High School Graduate	22.99%	137
Some College	17.95%	107
2yr degree	16.61%	99
Bachelor's degree	23.15%	138
Graduate Degree	11.58%	69
Post Graduate Degree	2.85%	17
TOTAL		596

DEMOGRAPHICS

My household income last year was:

Answered: 597 Skipped: 21

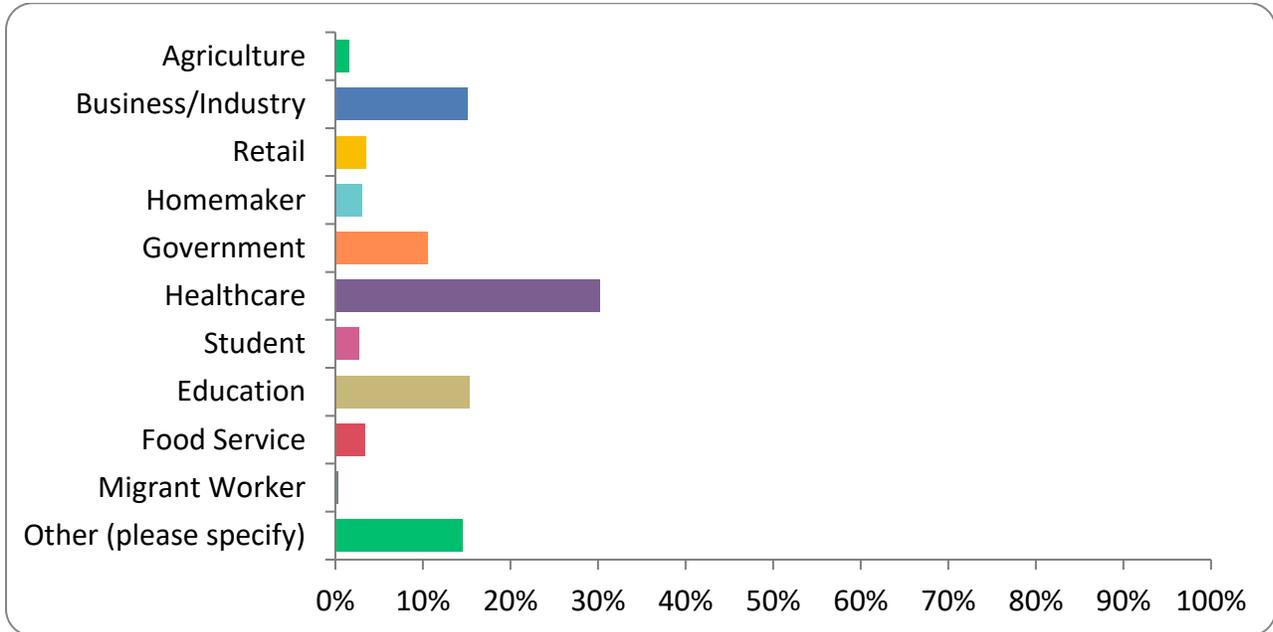


ANSWER CHOICES	RESPONSES	
less than \$10,000	10.72%	64
\$10,000-\$19,999	10.89%	65
\$20,000-\$29,999	10.72%	64
\$30,000-\$49,999	18.59%	111
\$50,000-\$74,000	14.57%	87
\$75,000-\$99,999	11.73%	70
\$100,000+	10.89%	65
Do not know	2.51%	15
Prefer not to answer	9.38%	56
TOTAL		597

DEMOGRAPHICS

My job field is best described as:

Answered: 570 Skipped: 48

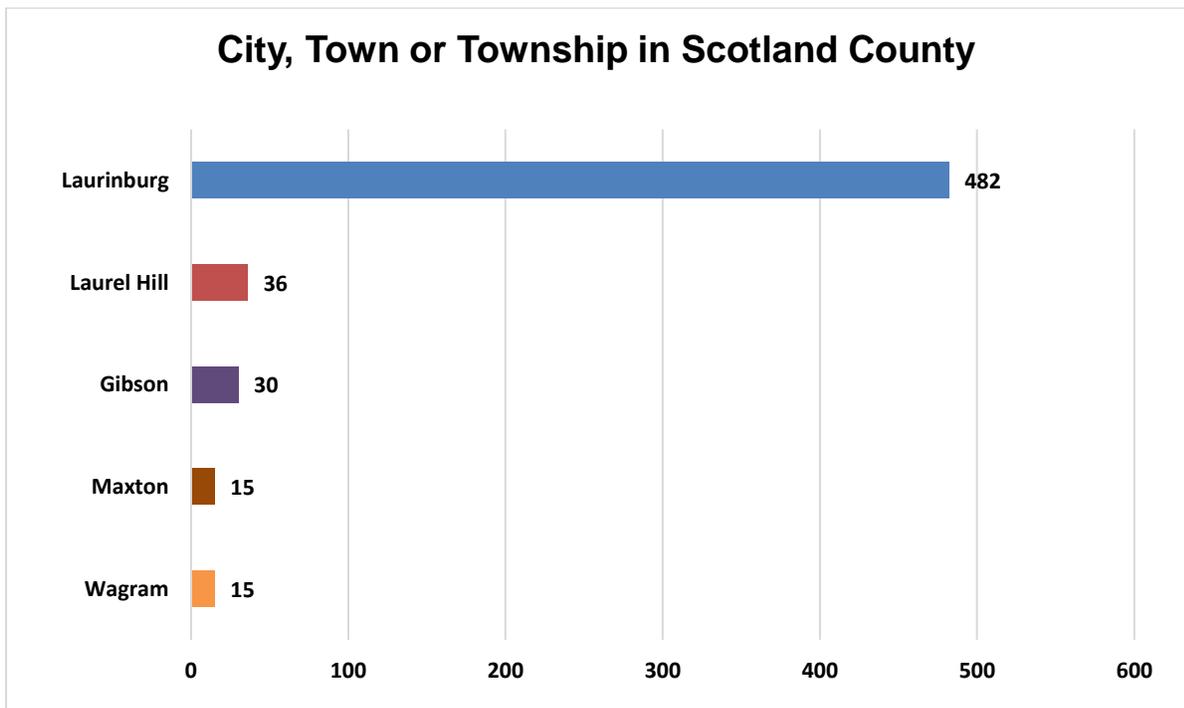
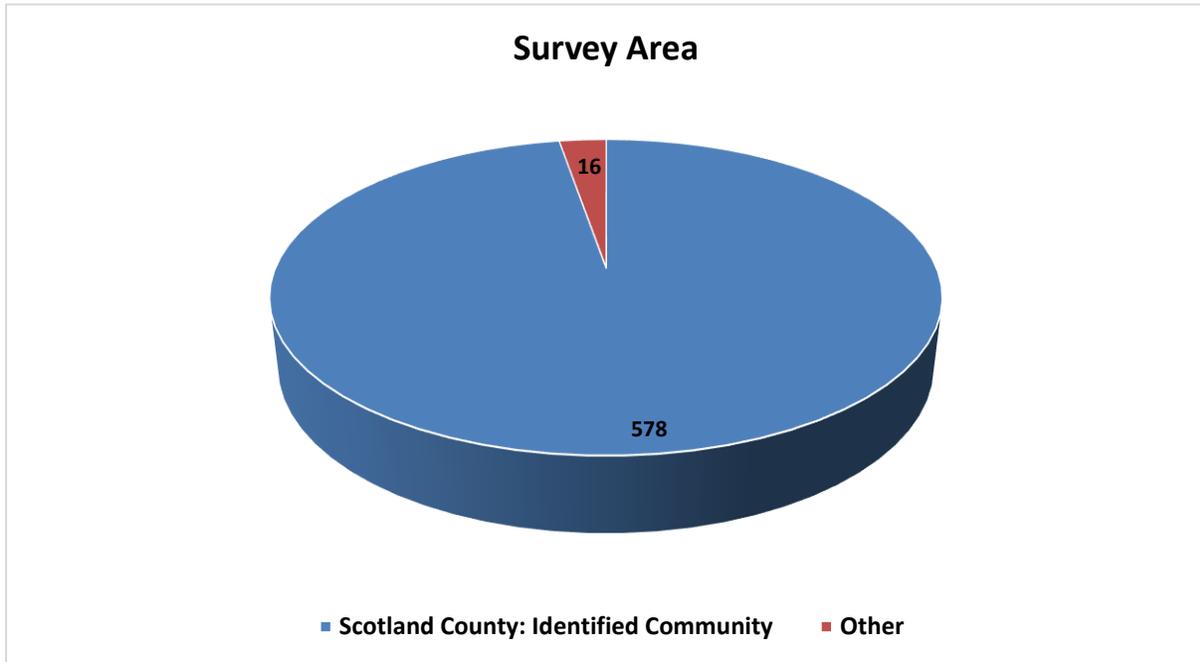


ANSWER CHOICES	RESPONSES	
Agriculture	1.58%	9
Business/Industry	15.09%	86
Retail	3.51%	20
Homemaker	2.98%	17
Government	10.53%	60
Healthcare	30.18%	172
Student	2.63%	15
Education	15.26%	87
Food Service	3.33%	19
Migrant Worker	0.35%	2
Other (please specify)	14.56%	83
TOTAL		570

DEMOGRAPHICS

What is the name of the city where you Live? _____

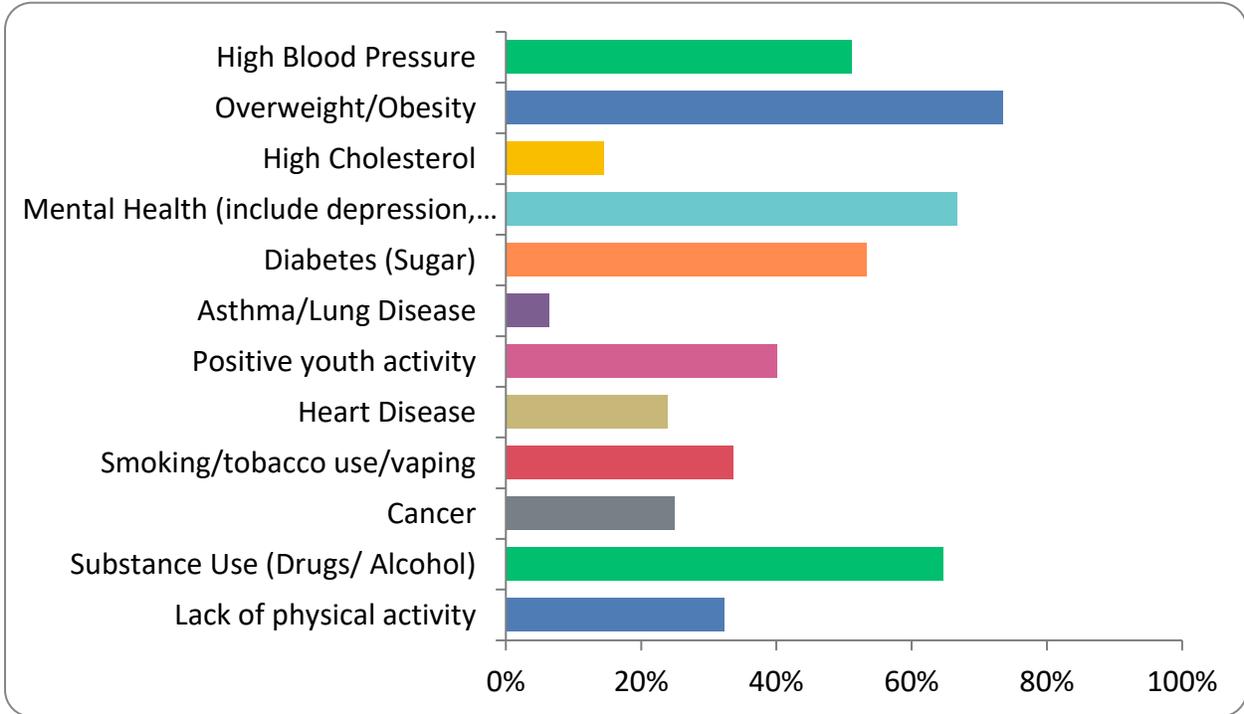
Answered: 594 Skipped: 24



**COMMUNITY HEALTH NEEDS ASSESSMENT:
SECONDARY SURVEY RESULTS**

Q1: Pick your top 5 Community Health issues

Answered: 309 Skipped: 0



ANSWER CHOICES	RESPONSES	
High Blood Pressure	51.13%	158
Overweight/Obesity	73.46%	227
High Cholesterol	14.56%	45
Mental Health (include depression, anxiety)	66.67%	206
Diabetes (Sugar)	53.40%	165
Asthma/Lung Disease	6.47%	20
Positive youth activity	40.13%	124
Heart Disease	23.95%	74
Smoking/tobacco use/vaping	33.66%	104
Cancer	24.92%	77
Substance Use (Drugs/ Alcohol)	64.72%	200
Lack of physical activity	32.36%	100
TOTAL RESPONDANTS: 309		

Q1: Pick your top 5 Community Health issues

HEALTH ISSUES PRIORITIZED

Answered: 309 Skipped: 0

ANSWER CHOICES	RESPONSES	
Overweight/Obesity	73.46%	227
Mental Health (include depression, anxiety)	66.67%	206
Substance Use (Drugs/ Alcohol)	64.72%	200
Diabetes (Sugar)	53.40%	165
High Blood Pressure	51.13%	158
Positive youth activity	40.13%	124
Smoking/tobacco use/vaping	33.66%	104
Lack of physical activity	32.36%	100
Cancer	24.92%	77
Heart Disease	23.95%	74
High Cholesterol	14.56%	45
Asthma/Lung Disease	6.47%	20
TOTAL RESPONDANTS: 309		

**COMMUNITY HEALTH NEEDS ASSESSMENT:
FOCUS GROUP RESPONSES**

Scotland County Focus Group Questions and Responses

Core Questions:

NOTE: These responses are a Summary of 3 FOCUS groups (April 28, May 11, and May 25, 2022)

How are we doing?

(Prompt questions) What are some of the trends (strengths or opportunities) in Scotland County in the last 5-10 years? (physical/mental health, environmental, education, economy)

Strengths:

- Bowling Alley was decorated and are allowing kids in free of charge for the summer
- Laurinburg After 5 (summer concerts)
- Scotland County has good schools
- Our children get a better education at Scotland
- Change of scenery-better place to live (relocation)
- SHAC (Student Health Advisory Council) and DSS/Health Department are collaborating well
- Schools are very active in the Community and have some partnerships with different organizations in place

Opportunities:

- Need more businesses, more job opportunities
- Parent education- mental health resources in Scotland County and steps to take when needed.
- Pre-mental health crisis: To increase access to information and care, imbed parent education i.e.: (flyers) on mental health services into various locations such as: pediatricians offices, family practices that care for children, social services, and the hospital.
- Provide list of Mental Health providers in Scotland County.
- Talk to pediatricians about using Adverse Childhood Experiences (ACEs) questionnaires for all wellness checkups.
- Parents need to know how to get financial assistance from DSS. Some churches have emergency funds to help families that need emergency assistance with utility bills.
- Transportation-big barrier in Scotland County. SCATS is available but limited. If services are needed, how does the process work? If children have appointments in other counties such as Hoke or Cumberland, can they get there? What does it cost for SCATS to run past 5:00pm?
- Short term homeless shelters are needed in Scotland County, maybe for 30 days or less
- Better education for our children
- Crime is high especially in Housing Developments/ not tenants, but visitors bring violence in
- Violence-more kids are involved in violence/crime
- Drugs/Alcohol
- Law enforcement /Fire Department understaffed
- Too many uninsured residents
- Medicare/Medicaid not understood. Need Advocates/Liaison for insurances/Medicare & Medicaid
- Residents with no Dental/prescription Insurances, can't afford medicines
- Chronic disease: diabetes, asthma care- education on where to get assistance if uninsured

How did we get here?

(Prompt questions) What's the story? (Trends: positive/negative, internal/external challenges, underserved)

- Closing of factories which caused unemployment
- Mental health providers are ever changing, which is disruptive for children and cause trust issues.

- Housing is taking longer for placement which contributes to homelessness.
- Is there a need for pediatricians to have a liaison/screener for the ACEs questionnaire for well child visits? Children with high ACEs scores would need a mental health referral. Having these ACEs scores would help with early intervention for these children.
- Community violence is an issue in Scotland County. Need after school programs for youth, adolescent age group and children who do not play sports. Parks and Recreation programs?
- In addition to Head Start, daycare for children. "No daycare" is a barrier for employment.
- Rural Community Fire and Police Departments are understaffed
- Need more involvement with Church Community (School and Court systems)
- Court systems soft on crime (policies). Inmates should work (learn useful skills)
- No Rehabilitation for inmates (support programs needed)
- Need to offer jobs for inmates when they get out of prison/halfway housing for community re-entry
- Mental Health needs not addressed, in general
- Passing children up to the next grade when they are not ready
- Grant funding ended: Lost LHA Community Learning Center after school programs
- Not enough things for kids to do
- No pools for families to use in summer when kids are out of school
- Violence (#1) Something needs to be done about access to guns
- Parenting skills: i.e., unsupervised kids, children supervising children
- Lack of funding for programs

Who are the partners who play a role in turning the curve?

(Prompt questions) Who is responsible for change? Who do we need at the table? Describe collaborative efforts in the Community.

- Pediatricians, Physicians that service children and adolescents
- County Commissioner
- City Council
- Department Social Services (DSS)
- School Board/ school system
- Health Department
- Chamber of Commerce
- Churches/Faith Community
- Laurinburg Housing Authority (LHA)
- Mental Health Counselors (i.e., Monarch/East Point)
- Juvenile Crime Prevention Council (JCPC) and Juvenile Justice System
- Grant writer
- Adult Protective Services
- Daycares, Head Start
- Parks and Recreation
- The community
- Small businesses
- Student Health Advisory Council (SHAC)
- Politicians/elected officials
- Medical field representatives/Scotland Health Care
- Health Department
- Police Chief/Scotland Police Department
- SCATS/Transportation
- Drug Rehabilitation
- Vocational Rehabilitation
- Parents
- Fire Department

What works?

(Prompt questions) What are we doing to contribute to positive change (what can we do)? Pie in the sky. Cost?

- Increase High School graduation
- Decrease in gangs
- Educate about resources for mental health/drug rehabilitation
- Decrease jail
- Structured programs for children
- More playgrounds/basketball courts
- Offer services that are low/no cost (some respondents not sure if there are low-cost/no-cost fixes)
- Let parents know of services, support, and talk to them (form relationships with each other)
- Trades- we have gotten away from trade jobs. Need to increase training for these jobs
- Use empty school buildings for things like after school programs, etc.
- Neighborhood/Community Watch
- Police patrol
- Parental involvement/volunteers
- Activities for adults
- YMCA with pool- offer other services like tutoring for children
- Community Pool
- Laurinburg Housing Authority (LHA) should have their own parks for the children-easy access
- Recreational Center
- Solicit community volunteers to dedicate some time for transportation needs, etc.
- Continue with obtaining community needs survey's
- Skating rink with age limits, i.e., morning session for small children only so they feel safe skating
- Suggestions for a movie night

Additional Question (Pie in the Sky- Action)

If you had \$200,000 to spend on a community project, how would you spend it?

- Use the old Century Care building for a homeless shelter
- Extend and improve transportation system
- Extensions of Parks and Recreation to reach all parts of Scotland County (scaled down Boys and Girls Club)
- Parent education
- YMCA (with a pool)
- Grant writer
- Resources for children, after school programs (repurpose empty buildings)
- Improve playgrounds, add more basketball courts

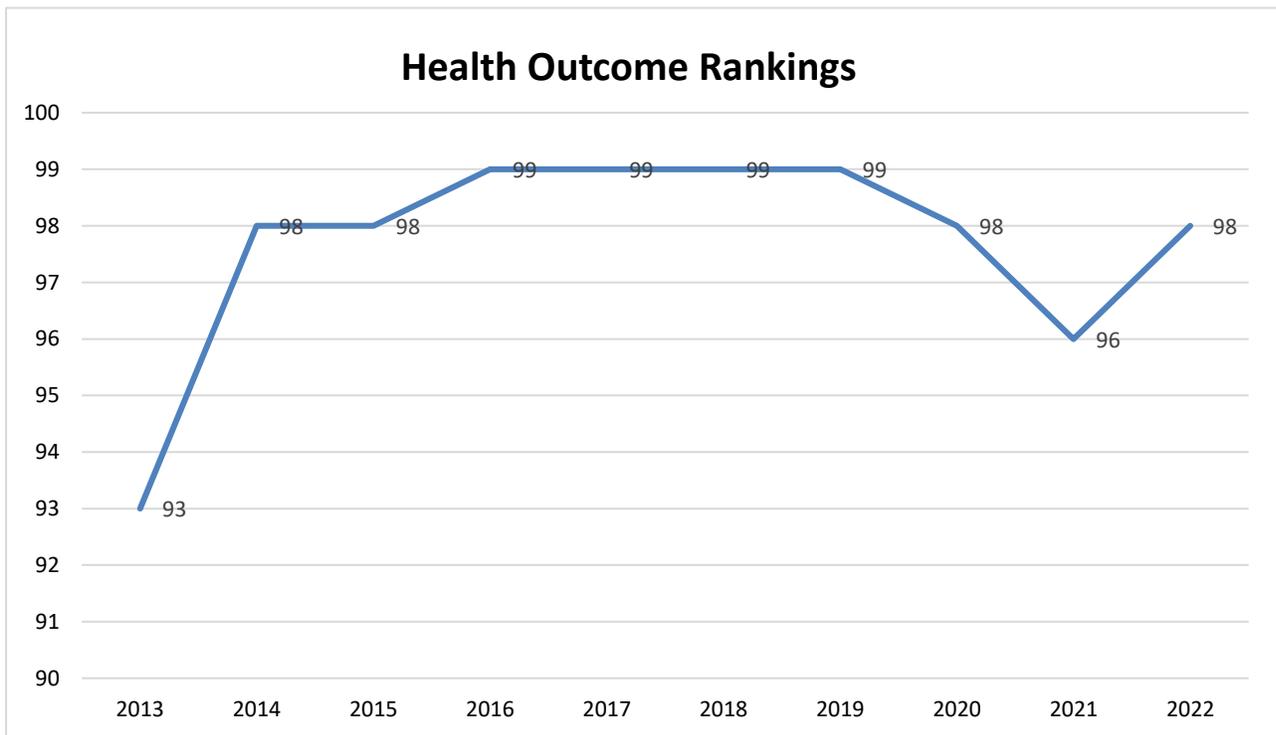
Summarize Key Points/Subject

1. Mental Health (children and adults)
2. Substance misuse
3. Crime/Violence/Gangs
4. Transportation
5. Housing/short term (30 days) homeless shelter
6. Positive youth activities
7. Jobs/Trades
8. Parent education on available resources (i.e., mental health, activities for youth)
9. Lack of insurance or lack of understanding (How do you access health care/dental care if you are uninsured?)

Secondary Data Collection Process and Results:

SECONDARY DATA COLLECTION AND RESULTS

Secondary data was collected from respected sites as listed in Appendix D. This data includes comparisons of County rankings to State rankings and top performers. 2022 County Health Rankings has Scotland County ranked at 98/100 in health outcomes and 99/100 in health factors. The graph below depicts a trend line of Scotland County’s health outcomes over the past 10 years.

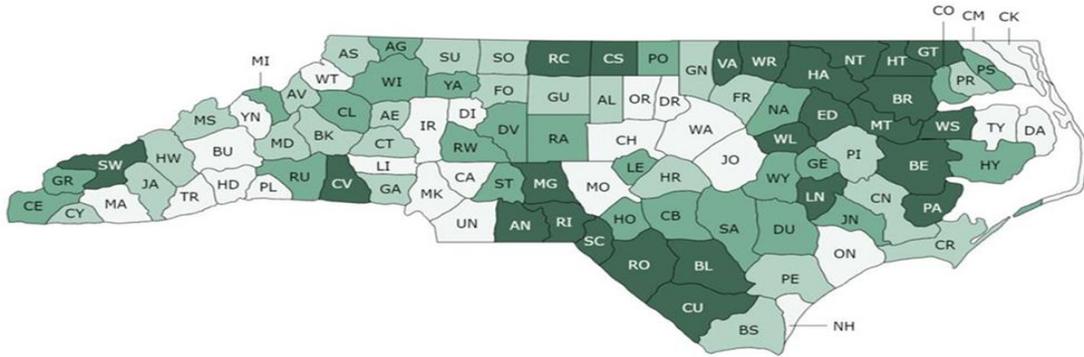


		Health Outcomes	Health Factors
State	County	Rank	Rank
North Carolina	Scotland	98	99

County Health Rankings and Roadmaps, www.countyhealthranking.org

Secondary Data Results: Scotland County 98%

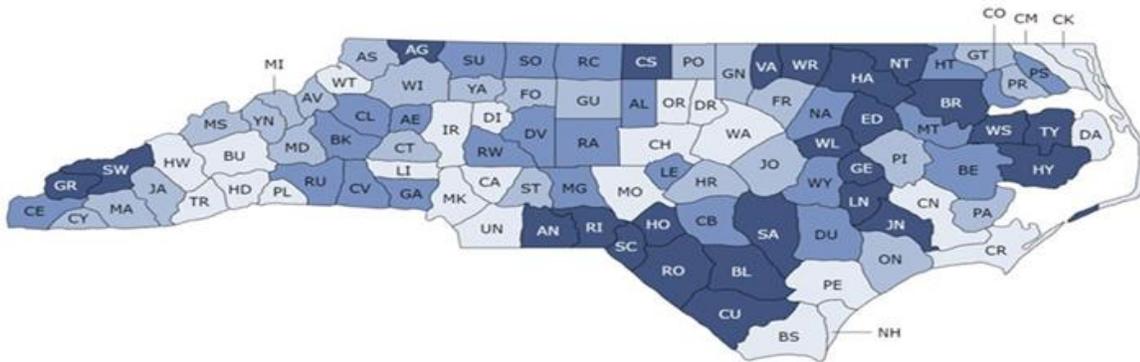
2022 Health Outcomes – North Carolina



County Health Rankings & Roadmaps
Building a Culture of Health, County by County

Secondary Data Results: Scotland County 99%

2022 Health Factors – North Carolina



County Health Rankings & Roadmaps
Building a Culture of Health, County by County

County Health Rankings and Roadmaps, www.countyhealthranking.org

2022 County Health Rankings for the 100 Ranked Counties in North Carolina

County	Health Outcomes	Health Factors	County	Health Outcomes	Health Factors	County	Health Outcomes	Health Factors	County	Health Outcomes	Health Factors
Alamance	37	51	Cumberland	52	70	Johnston	20	27	Randolph	65	65
Alexander	39	55	Currituck	9	17	Jones	70	77	Richmond	93	94
Alleghany	63	78	Dare	4	10	Lee	56	53	Robeson	100	100
Anson	94	93	Davidson	54	59	Lenoir	90	82	Rockingham	81	73
Ashe	27	30	Davie	21	20	Lincoln	22	22	Rowan	61	62
Avery	32	39	Duplin	75	74	Macon	25	28	Rutherford	66	68
Beaufort	80	54	Durham	7	9	Madison	40	33	Sampson	62	76
Bertie	89	84	Edgecombe	99	98	Martin	88	72	Scotland	98	99
Bladen	85	89	Forsyth	33	29	McDowell	46	42	Stanly	53	46
Brunswick	26	24	Franklin	35	43	Mecklenburg	6	14	Stokes	43	58
Buncombe	19	8	Gaston	50	52	Mitchell	51	36	Surry	47	67
Burke	49	61	Gates	78	40	Montgomery	77	69	Swain	96	85
Cabarrus	10	12	Graham	71	80	Moore	17	6	Transylvania	18	16
Caldwell	68	63	Granville	34	34	Nash	64	66	Tyrrell	16	91
Camden	5	15	Greene	59	88	New Hanover	14	7	Union	3	5
Carteret	28	18	Guilford	31	31	Northampton	86	86	Vance	95	96
Caswell	76	79	Halifax	97	97	Onslow	23	26	Wake	1	2
Catawba	30	32	Harnett	36	50	Orange	2	1	Warren	92	95
Chatham	11	3	Haywood	42	25	Pamlico	79	37	Washington	87	90
Cherokee	73	56	Henderson	12	11	Pasquotank	55	57	Watauga	8	4
Chowan	67	64	Hertford	84	75	Pender	29	23	Wayne	74	60
Clay	38	38	Hoke	57	81	Perquimans	48	47	Wilkes	72	48
Cleveland	83	71	Hyde	60	83	Person	58	44	Wilson	82	87
Columbus	91	92	Iredell	15	19	Pitt	44	35	Yadkin	69	49
Craven	45	21	Jackson	41	45	Polk	13	13	Yancey	24	41

www.countyhealthrankings.org

COUNTY DEMOGRAPHICS (SC)	Scotland County (SC)	Error Margin	Top U.S. Performers ^	North Carolina	RANK (SC) of 100
Health Outcomes					98
Length of Life					94
Premature death	12,600	11,200-14,000	5,600	8,000	
Quality of Life					99
Poor or fair health **	28%	25-30%	15%	18%	
Poor physical health days **	5.1	4.8-5.3	3.4	3.7	
Poor mental health days **	5.3	5.1-5.5	4	4.4	
Low birthweight	14%	13-16%	6%	9%	
Additional Health Outcomes (not included in overall ranking)					
COVID-19 age-adjusted mortality **	116	87-151	43	60	
Life expectancy	73.1	72.1-74.1	80.6	77.7	
Premature age-adjusted mortality	590	550-640	290	380	
Child mortality	90	60-130	40	60	
Infant mortality	10	6-14	4	7	
Frequent physical distress **	17%	16-18%	10%	12%	
Frequent mental distress **	18%	17-19%	13%	14%	
Diabetes prevalence **	15%	14-16%	8%	11%	
HIV prevalence	435		38	373	
Health Factors					99
Health Behaviors					98
Adult smoking **	27%	24-29%	15%	19%	
Adult obesity **	41%	40-42%	30%	34%	
Food environment index	6		8.8	6.6	
Physical inactivity **	34%	32-36%	23%	26%	
Access to exercise opportunities	56%		86%	68%	
Excessive drinking **	15%	15-16%	15%	17%	
Alcohol-impaired driving deaths	30%	22-38%	10%	26%	
Sexually transmitted infections	982.1		161.8	669.9	
Teen births	44	39-49	11	21	
Additional Health Behaviors (not included in overall ranking)					
Food insecurity	20%		9%	14%	
Limited access to healthy foods	10%		2%	8%	
Drug overdose deaths	22	14-33	11	24	
Motor vehicle crash deaths	24	19-31	9	15	
Insufficient sleep **	41%	40-42%	32%	36%	
Clinical Care					73
Uninsured	14%	12-15%	6%	13%	
Primary care physicians	1,830:1		1,010:1	1,400:1	
Dentists	3,460:1		1,210:1	1,710:1	
Mental health providers	520:1		250:1	360:1	
Preventable hospital stays	5,740		2,233	4,096	
Mammography screening	56%		52%	48%	
Flu vaccinations	38%		55%	53%	

COUNTY DEMOGRAPHICS (SC)	Scotland County (SC)	Error Margin	Top U.S. Performers ^	North Carolina	RANK (SC) of 100
Additional Clinical Care (not included in overall ranking)					
Uninsured adults	18%	15-20%	7%	16%	
Uninsured children	5%	4-7%	3%	6%	
Other primary care providers	560:1		580:1	690:1	
Social & Economic Factors					100
High school completion	81%	79-83%	94%	89%	
Some college	48%	43-53%	74%	68%	
Unemployment	12.00%		4.00%	7.30%	
Children in poverty	46%	37-54%	9%	18%	
Income inequality	5.5	4.9-6.1	3.7	4.7	
Children in single-parent households	47%	42-52%	14%	27%	
Social associations	11.2		18.1	11.3	
Violent crime	694		63	351	
Injury deaths	97	82-111	61	82	
Additional Social & Economic Factors (not included in overall ranking)					
High school graduation	81%		96%	87%	
Disconnected youth	9%	3-15%	4%	7%	
Reading scores	2.7		3.3	3.1	
Math scores	2.8		3.4	3.1	
School segregation	0.02		0.02	0.2	
School funding adequacy	(\$8,620)			(\$3,326)	
Gender pay gap	0.83	0.72-0.94	0.88	0.84	
Median household income	\$33,500	\$28,100 to \$38,900	\$75,100	\$59,600	
Living wage **	\$34.78			\$38.86	
Children eligible for free or reduced price lunch	99%		32%	58%	
Residential segregation - Black/white	32		27	52	
Residential segregation - non-white/white	25		16	46	
Childcare cost burden **	42%		18%	29%	
Childcare centers **	9		12	9	
Homicides	17	12-23	2	7	
Suicides	10	6-17	11	13	
Firearm fatalities	25	18-34	8	14	
Juvenile arrests					
Physical Environment					79
Air pollution - particulate matter	7.5		5.9	7.5	
Drinking water violations	No				
Severe housing problems	21%	18-23%	9%	15%	
Driving alone to work	83%	80-87%	72%	79%	
Long commute - driving alone	25%	22-29%	16%	34%	
Additional Physical Environment (not included in overall ranking)					
Traffic volume	117			228	
Homeownership	60%	57-63%	81%	66%	
Severe housing cost burden	18%	16-20%	7%	12%	
Broadband access	68%	65-70%	88%	83%	
^ 10th/90th percentile, i.e., only 10% are better.					
** Data should not be compared with prior years					
Note: Blank values reflect unreliable or missing data					

SECONDARY DATA SUMMARY

AREAS OF STRENGTH

Air pollution-particulate matter
Increased mammography screening

AREAS TO EXPLORE

Health Behaviors

- Adult smoking
- Adult obesity
- Food environment index
- Sexually transmitted infections
- Teen births
- Drug overdose deaths

Clinical Care

- Uninsured
- Preventable hospital stays
- Flu vaccinations

Social and Economic Factors

- Some college
- Unemployment
- Children in poverty
- Children in single-parent households
- Violent crime

Physical Environment

- Severe housing problems
- Driving alone to work
- Long commute-driving alone

TRENDS

Improvement

- Alcohol-impaired driving deaths*
- Dentists*
- Preventable hospital stays*
- Air pollution-particulate matter
- Uninsured*
- Mammography screening

Stable

- Premature death*
- Unemployment*
- School funding adequacy (new measure)

Deterioration

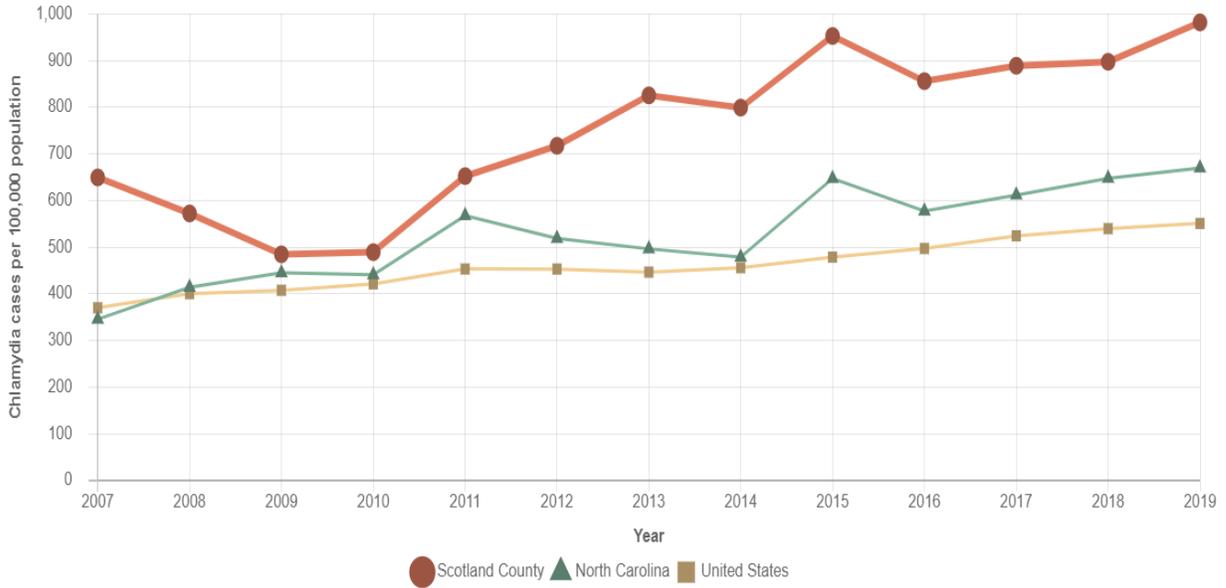
- Adult obesity*
- Sexually transmitted infections*
- Primary care physicians*
- Flu vaccinations*
- Children in poverty*
- Violent crime*

* Statistical performance remains lower than North Carolina

SCOTLAND COUNTY, NC: COUNTY, STATE, AND NATIONAL TRENDS

Sexually transmitted infections in Scotland County, NC
County, state and national trends

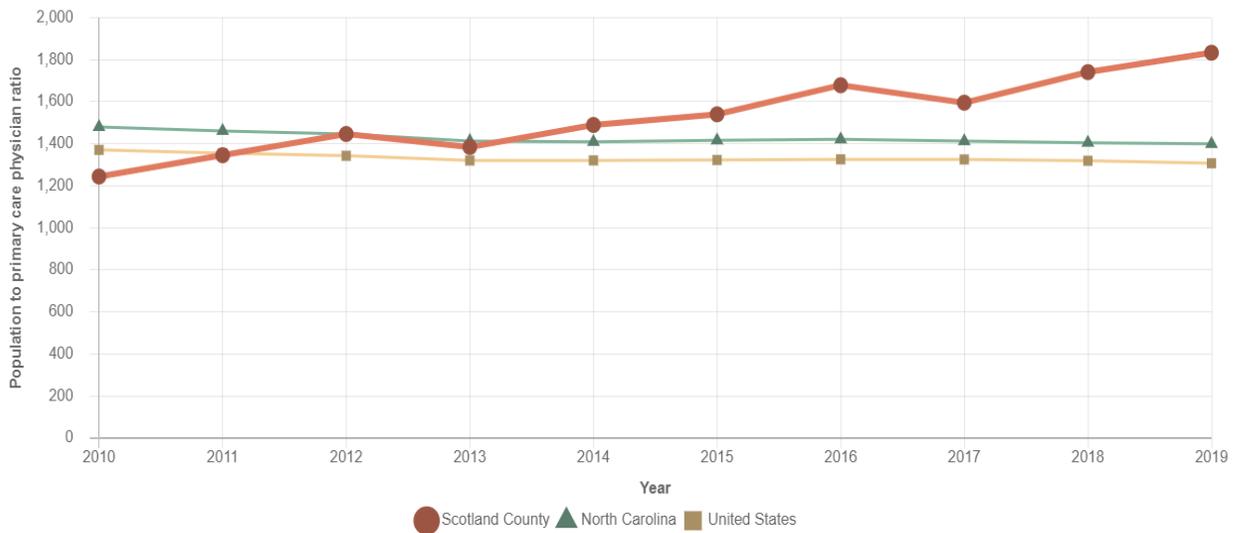
Scotland County is getting worse for this measure.



Notes:
Sexually transmitted infections should only be compared across states with caution.

Primary care physicians in Scotland County, NC
County, state and national trends

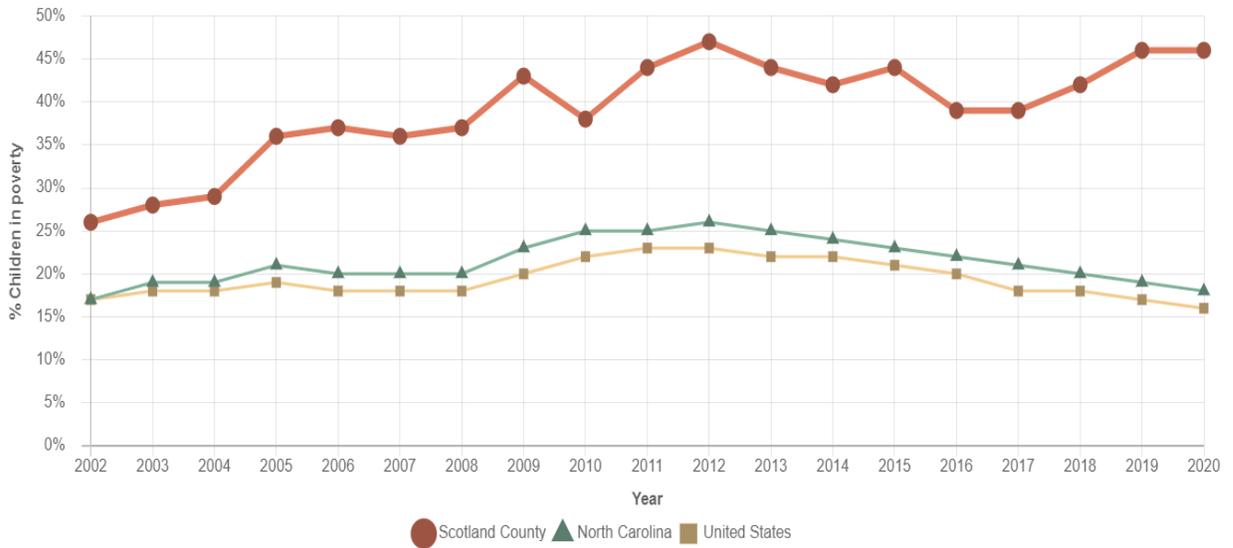
Scotland County is getting worse for this measure.



Notes:
The data in this table reflect the average population served by a single primary care physician.

Children in poverty in Scotland County, NC County, state and national trends

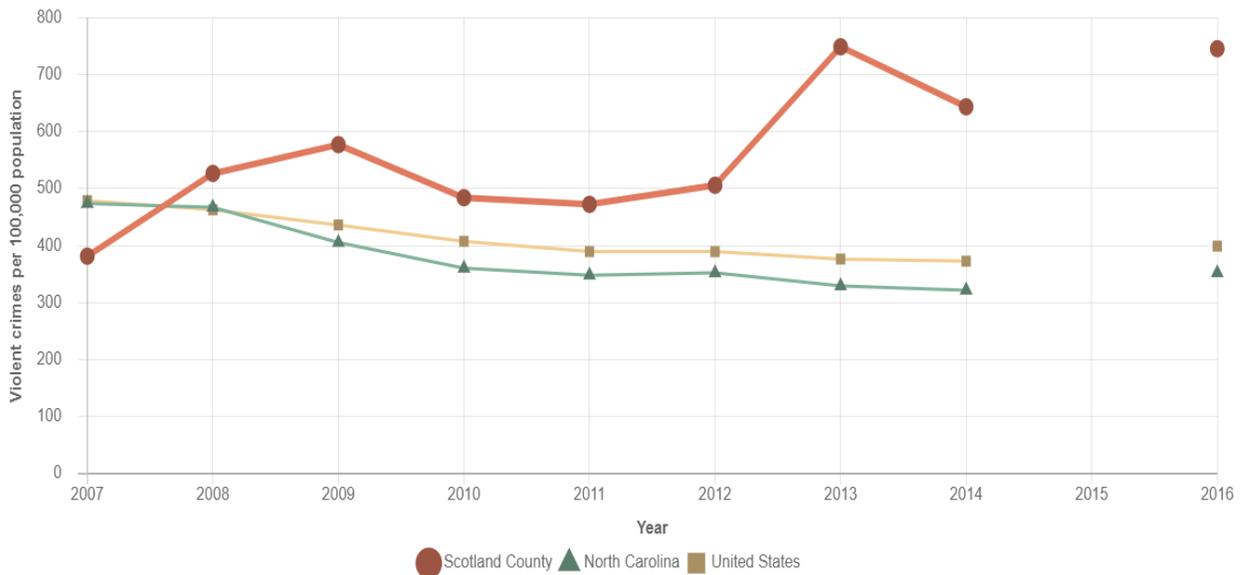
Scotland County is getting worse for this measure.



Notes:
Prior to 2005, Children in poverty was based on the Current Population Survey; beginning in 2005, it was based on the American Community Survey.

Violent crime in Scotland County, NC County, state and national trends

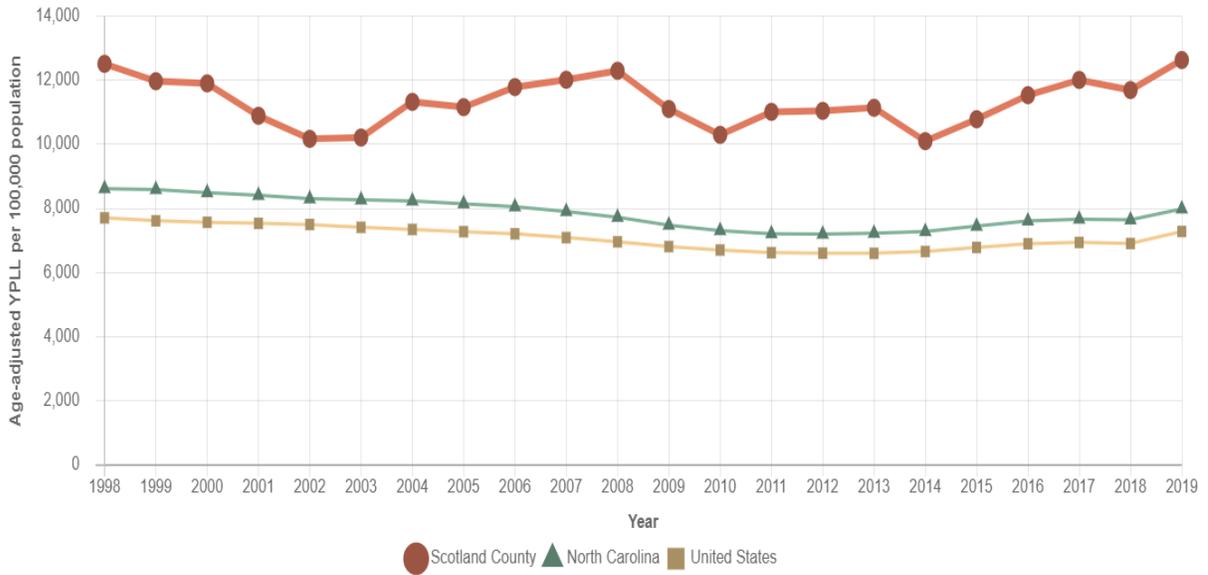
Scotland County is getting worse for this measure.



Notes:
2015 data are unavailable for all counties and states.

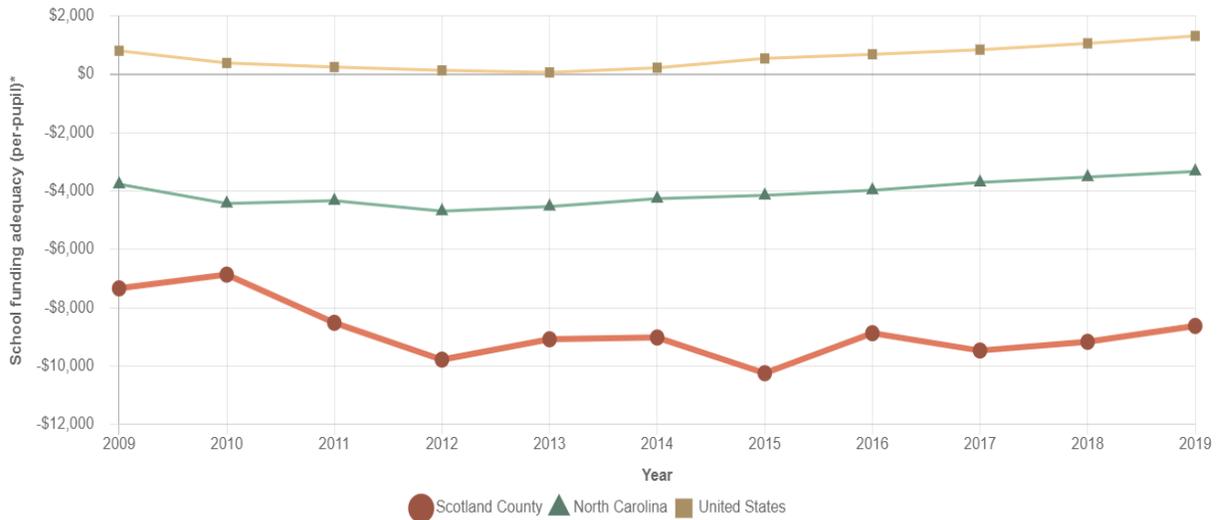
Premature death in Scotland County, NC Years of Potential Life Lost (YPLL): county, state and national trends

No significant long term trend was found in Scotland County for this measure. However, in recent years the trend has worsened.



Notes:
Each year represents a 3-year average around the middle year (e.g. 2015 is the middle year of 2014-2016).

School funding adequacy in Scotland County, NC County, state and national trends



Notes:
*School funding adequacy is the actual per-pupil spending compared with an estimated amount that would need to be spent to achieve U.S. average test scores in each school district. The county value is the cross-district average of the spending surplus or deficit.

Causes of Death

NCDHHS COVID 19	13-Aug-22	
	Cases	Death
Scotland County	11,442	136
North Carolina, State	3,074,964	25,760

Scotland County, NC March 7, 2020, through August 7, 2022 COVID Cases- USA FACTS



Leading Causes of Death: Mortality in the United States, 2020	Leading Causes of Death in Scotland County, NC (Pre-COVID)
1) Heart disease	1) Diseases of heart
2) Cancer	2) Cancer
3) COVID-19	3) Alzheimer's disease
4) Accidents (unintentional injuries)	4) Chronic lower respiratory diseases
5) Stroke (cerebrovascular diseases)	5) Diabetes mellitus
6) Chronic lower respiratory diseases	6) Nephritis, nephrotic syndrome and nephrosis
7) Alzheimer's disease	7) Cerebrovascular diseases
8) Diabetes	8) All other unintentional injuries
9) Influenza and pneumonia	9) Pneumonitis due to solids and liquids
10) Nephritis, nephrotic syndrome, and nephrosis	10) Assault (homicide)
National Center for Health Statistics: CDC	Source: State Center for Health Statistics, North Carolina 2019

Data Analysis

COMMUNITY HEALTH NEEDS ASSESSMENT: PRIMARY (MAIN) SURVEY

The Community Health Advisory Board analyzed the main survey (Appendix B) findings and compared it to the secondary data. Key findings and limitations included:

- I. Several of the demographic categories were underrepresented when compared to the secondary data. Some of these groups were adolescents, males, never married, uninsured and/or Medicaid insured population, unemployed and those with an education level less than bachelor's degree. Some of these limitations were addressed by hosting the focus groups with staff in the public school system, who represented the interest of those under 18 and through two sessions with the Laurinburg Housing Authority. Additionally, a large portion of the employed surveyed population work within the health care and education sectors. Thus, they often work closely with the underrepresented populations. Each cycle, we will continue to work on strategies to be more inclusive of these populations.
- II. Some of the perceptions and behaviors reported in the survey also conflicted with the secondary data. Some of these are as follows:
 - a. The perception of "good health" compared to a county health ranking of 98/100 was high. According to the primary survey data, almost 81% of respondents reported feeling good or higher, regarding physical health and 19% reported fair, poor, or unsure about physical health. Mental health was similar with approximately 80% of respondents reporting good or higher regarding feelings about mental health, and almost 20% reporting fair, poor or unsure about mental health. None the less, the number of days that were reported as "NOT good mental health day", averaged 6.77 for the primary survey and 5.3 on the secondary data.
 - b. Reported engagement in physical activities on the primary survey was disproportionate to related measures in the secondary data. In the primary survey, 18.31% of respondents reported that they participated in no physical activity. In the secondary data, 34% of adults 20 or over reported physical inactivity. However, 69.09% of the respondents reported that they did not take advantage of the use of the County parks.
 - c. Adult obesity was unrepresented in the primary survey as a diagnosis. Only 30% of the respondents reported being told by a doctor, nurse, or health professional that they were overweight/obese but according to the secondary data, 41% of the adult population of Scotland County is obese.

- III. High blood pressure/heart disease, obesity, and diabetes were listed as the greatest individual health concerns, each with greater than 20% of the responses. In addition, heart disease is the number one cause of death in Scotland County, as well as the United States. The top health concerns for the community were listed as gangs/violence, diabetes, substance misuse (drugs/alcohol), high blood pressure, obesity/overweight and mental health.
- IV. When asked which screenings or services that the community/family/friends needed for improved health outcomes, over 57% chose mental health services. Job opportunities (50.95%) and positive youth activities (48.36%) were also frequently selected.
- V. The top five choices for behaviors or risk factors that impact the family were:
 - a. lack of physical activity-41.0%
 - b. substance misuse (drugs/alcohol)-26.16%
 - c. crimes/violence-18.0%
 - d. cancer-17.81%
 - e. use of tobacco or vaping products-15.21%
- VI. Over 28% of respondents reported they would not evacuate during an emergency because:
 - a. they did not want to leave their home/property or
 - b. they were concerned about personal/family safety. Some of the gaps identified that contribute to this include awareness of resources and education.
- VII. Correlations between risk factors, concerns, and health needs of the community:
 - a. Obesity, diabetes, heart disease, substance misuse and lack of physical activity
 - b. Mental health, substance misuse, gangs/violence/crime (safety)
 - c. Economics, lack of job opportunities, transportation, literacy
- VIII. The major sources of communication related to emergency events are television, text messages (emergency alert) and social media (example- Facebook).
- IX. Collectively, some of the top community needs were identified as:

Disease based:

 - a. Obesity (diabetes, heart disease, and hypertension/cholesterol)
 - b. Mental health (awareness and negative stigmatism, fear, and substance misuse: alcohol, drugs, tobacco)
 - c. Cancer

- d. lack of access to health care (transportation, education, lack of insurance or insufficient insurance coverage)

Process based:

- a. Access to health care (scheduling and transportation)
- b. Health literacy
- c. Underinsured
- d. Gangs/violence/crime (lack of jobs, lack of positive youth activities and physical activities)

COMMUNITY HEALTH NEEDS ASSESSMENT: SECONDARY SURVEY

The primary survey data was reviewed, compared to the secondary data, and analyzed by the Community Health Advisory Board (CHAB). The top significant health issues were identified based on data analysis and in relation to the scope and severity of the need as well as available resources within the health care system, partnering organizations, and the community to establish and deliver effective interventions. A one-question survey was used to further define and prioritize the 12 identified health care concerns.

Overweight/Obesity	73.46%	227
Mental Health (include depression, anxiety)	66.67%	206
Substance Use (Drugs/ Alcohol)	64.72%	200
Diabetes (Sugar)	53.40%	165
High Blood Pressure	51.13%	158
Positive youth activity	40.13%	124
Smoking/tobacco use/vaping	33.66%	104
Lack of physical activity	32.36%	100
Cancer	24.92%	77
Heart Disease	23.95%	74
High Cholesterol	14.56%	45
Asthma/Lung Disease	6.47%	20

COMMUNITY HEALTH NEEDS ASSESSMENT: FOCUS GROUP

Information obtained during the focus groups revealed that programs geared towards healthy behaviors are desired. Specific requests include mental health awareness and resource education, parenting classes and recreational activities. Young adults and teens could benefit from positive, active programs to prevent future negative outcomes, such as criminal involvement, violence, and/or premature death. The most prevalent disease-based health issues mentioned in focus group correlate to the CHNA Survey, including mental health, diabetes, and asthma. Dental care (lack of resources to obtain care), need for job opportunities, lack of insurance and violence/crime are topics that were identified from the focus group that are supported by the primary and secondary data.

2019 IMPLEMENTATION STRATEGIES PROGRESS REPORT

OVERVIEW

Based on the data that was collected and analyzed, the priority needs identified for 2019 included:

IV. Obesity related hypertension, heart disease, and diabetes

V. Mental health including substance misuse

VI. Lack of positive youth engagement and healthy behaviors

Strategies to improve the health and well-being of Scotland County included improving health literacy and facilitating access to health care. The strategies and action plans were designed to build on the work from previous CHNAs and improvement plans.

To combat obesity-related health conditions, several initiatives were enhanced and initiated prior to March of 2020, when the COVID -19 pandemic forced a shift in priorities. Several Mental Health/substance misuse related events were sponsored, including community awareness and education on nicotine misuse for adults and youth and tobacco cessation geared towards Scotland Health Care Associates. There was also a special focus on childhood and adolescent awareness and intervention, with efforts to establish healthy eating and exercise behaviors before unhealthy habits become routine. However, due to the pandemic, Scotland Community Health team and its internal and external partners found limited opportunities to partner or sponsor non-COVID related community health events and services to community members. Alternatives to in-person service delivery such as virtual programs, social media posts and press releases were utilized.

At the same time, the COVID -19 pandemic was posing a significant threat to lives across our nation. To address health and safety needs during the pandemic, it was imperative to establish screening and testing programs to decrease the spread of the virus, increase access to testing and COVID-19 treatment, and help prevent system capacity overload. Health and safety measures were implemented, not only in our community and the surrounding areas, but also throughout the country. We implemented free COVID testing and education in July 2020, on the main campus of Scotland Health Care System and later, throughout the Scotland Physician Network. A COVID Infusion Clinic was developed in December 2020, opening to patients in January 2021. The vaccine clinics followed in February 2021. We opened a mass vaccination site and ran mobile sites, as well.

With assistance from the COVID-19 NC Pro Pandemic Grant, we also established a program that was designed to address the educational, financial, and transportation barriers frequently found in underserved and lower socioeconomic areas throughout Scotland and Robeson Counties. We utilized mobile medical units, staffed with clinicians and support staff for further service area outreach. Collaboration for access to treatment was paramount for success. Community Partners included but was not limited to the faith-community, local and nearby Colleges and Universities, Scotland County Public School System, Lumbee Tribe of North Carolina, Scotland County Parks and Recreation, local retirement community/facility, and entities in several neighboring towns and communities.

COVID-19

Strategy

- Provide resources and reinforce education to address infection control practices, decreasing the spread of the coronavirus
- Increase access to COVID-19 testing and treatment for early intervention as appropriate on-site
 - Added Mobile testing July 2020, initial goal to provide 2500 tests
- Decrease hospitalizations through follow-up care management
- Beginning December 2020: introduced service line that included education, medication administration, and monitoring by a registered nurse. Goal of this treatment was to increase health outcomes and/or decrease risks associated with mortality and to decrease hospital admissions

Outcomes

- SHCS sponsored health events that included free Covid-19 testing, vaccinations, access to antibody testing and treatment
- Covid testing
 - On-site: 13,154
 - Mobile: 2,598
- Vaccinations: (include Community members- NC & SC; SHCS Associates; Scotland Physician Network)
 - On-site: over 25,000
 - Mobile: About 600 Vaccines
- Antibody testing- 177 participants: 8 events
- Infusion Treatment- Over 1700 (Jan 21-August 2022)
 - Oral treatment has also been made available
- Our partners needed access to items such as masks, disinfectant supplies, hand hygiene supplies, etc. We were able to provide accessibility to these items that in turn, provided a distribution chain for community members, allowing them to implement infection control practices

Obesity

Strategy

To address obesity, Scotland Health Care System will focus specifically on heart disease, diabetes, and hypertension by:

- 1) Increase number of related screenings (A1C, lipid panel, blood pressure and body mass index) by 10%.
 - a. A1C- 1,170 (+117)
 - b. Lipid- 1,093 (+109)
 - c. Blood pressure- 1,376 (+138)
 - d. Body mass- 472 (+47)
- 2) Ensure 10% of the population resulting in an abnormal screening complete a provider visit
- 3) Ensure 10% of population resulting in an at-risk screening participate in a prevention-based program

Outcomes

- Multifaceted education programs concerning nutrition, heart health, and disease prevention and management were provided
- Body mass index screenings and education was provided for 153 participants
- A1C screenings and education was provided for 494 participants.
- Lipid panel screenings and education was provided for 477 participants
- Blood pressure screenings and education was provided for 562 participants

NOTE: Screenings performed, and volume outcomes affected by COVID-19 pandemic

Diabetes

Strategy

Scotland Health Care System will address diabetes by:

- 1) Increasing education offerings
- 2) Identifying ways to decrease barriers for treatment of diabetes for community members such as facilitating access to health care for patients without insurance or ability to pay
- 3) Offering free screenings at community events and free programs to at-risk patients
- 4) Developing Diabetes Education Plan to include Diabetes Educator

Outcomes

- Community Health Education facilitated an active Diabetes Support Group funded by the Scotland Memorial Foundation
 - Social media posts and press releases provided to the community
- A Certified Diabetic Educator was onboarded in the Scotland Physician Network
- From FY 2019 to July 31, 2022:
 - 94 initial consults
 - 112 diabetes educator visits performed
- 494 A1C screenings performed
- Diabetes related supplemental education provided during various local community events

NOTE: Screenings performed, and volume outcomes affected by COVID-19 pandemic.

Heart Disease

Strategy

To address heart disease, Scotland Health Care System will focus on:

- 1) Community education and efforts to increase early heart disease, awareness, and detection
- 2) Increasing screenings for heart disease

Outcomes

- Lipid panel screenings and education was provided for 477 participants.
- Blood pressure screenings and education was provided for 562 participants
- Social media/radio and press releases including Healthy Heart Campaign and Healthy Perspectives
- Cardiac Rehab Team implemented CHF program “Heart Failure to Success”
- CHF Support group workgroup created
- From FY 2019 to July 31, 2022, Cardiac Rehab has seen approximately 14,000 visits, with over 290 new patients
- From FY 2019 to July 31, 2022, Scotland Cardiovascular Center has carried out 821 diagnostic catheterizations, 183 percutaneous coronary interventions, and 30 vascular procedures
- SHCS established a tobacco cessation program for Employees (QuitSmart).
 - Session one: 4 classes
 - Session two: 1 class, before transitioning to the self-guided workbook, due to COVID restrictions
 - Approximately 12-15 participants completed the Classes

NOTE: Screenings performed, and volume outcomes affected by COVID-19 pandemic.

Mental Health

Strategy

To address mental health, Scotland Health Care System will continue to partner with various community partners.

- 1) Enhance the awareness of mental health
- 2) Include mental health screenings in events
- 3) Ensure 10% of population resulting in abnormal screening complete a provider visit.
- 4) Ensure 10% of identified participants enroll in a mental health program

NOTE: Screenings performed, and volume outcomes affected by COVID-19 pandemic.

Outcomes

SHCS partnered with various organizations to enhance mental health awareness and passed out information on mental health tips for adults and adolescents (see youth section)

- SHCS continued partnership with the Opioid Prevention and Education Network (OPEN) to address opioid crisis
- Established mental health screening process to perform screenings at Community Health events. 48 mental health screenings were completed in 2021
- Collaborated with Associate Health to address Pandemic related stress and completed mental health screenings for Associates as a pilot. Health Care System offered EAP counseling as a result
- August 2021, Scotland Physician Network onboarded Licensed Clinical Social Worker (SW) who serviced participants from Scotland, Robeson, and Marlboro County
 - SW performed 407 visits (104 patients) since onboarding
 - A second Behavior Health Specialist, who is also a Licensed Clinical Social Worker was onboarded and started seeing patients June 2022
- SHCS has process to complete mental health screenings on admission or presentation of each visit
- In collaboration with Scotland County Health Department, social media posts and press releases included “Dangers of Vaping”
- Scotland Human Resources sponsored Associate Program (QuitSmart) for tobacco cessation
 - nicotine replacement therapy
- Resilience Video- Eastpointe-Laurinburg

Youth

Strategy

To promote positive youth activities.

- 1) Facilitate three events that focus on positive health behaviors targeted towards adolescents
- 2) Involve 100 adolescents in healthy outreach events
- 3) Offer exercise and nutrition education programs to children in each service area County (Scotland, Robeson, Marlboro)
- 4) Sponsor an exploration room at the Laurinburg Smart Start office

Outcomes

SHCS sponsored or participated in health events that focused on healthy behaviors

- Participated in 4 events that specifically targeted youth: Halloween in the Park, serving 108; Youth Toy drive and Vaping-Washington Park; Oxendine School career and Health Fair; and Wagram Recreation Center trunk or treat. Provided education materials
 - mental health tip sheets- for children and adults (parents and teachers)
 - Height and weight screenings (2 of the events)
- Newborn brain Development program- provided over 300 education bags with books distributed to new mothers (collaboration with Scotland Women's Services Unit)
- Ongoing partnership with public schools to provide sports physicals
- Food drive with local school
- Charged up- physical and nutrition program offered virtually
- Education programs
 - Smart start playroom constructed
 - Suicide and Bullying Prevention

NOTE: Screenings performed, and volume outcomes affected by COVID-19 pandemic.

Other

Health Indicator

While not selected as one of the three groupings of significant health priorities for the Community Health Improvement Plan, Scotland Health Care System does recognize the importance of continuing to partner with other organizations or agencies who are addressing these health concerns:

- 1) Cancer: Partner with Scotland Cancer Center, an affiliate of Duke Health and support their efforts to provide cancer care to the community, sponsor health events that include Cancer Center and/or offer PSA screenings (Scotland Foundation also supports Cancer care through fundraising efforts)
- 2) Dental: Partner with agencies and organizations such as the Scotland Health Department, Scotland Free Clinic or Scotland County School Systems to provide education and awareness (has been addressed in past CHIPs)
- 3) Asthma: Serve as a referral source for anyone who may need treatment. Educate public on available resources in the community

Justification

These health needs will not be addressed in the Community Health Improvement Plan:

- 1) Cancer: Other facilities or organizations in the community are addressing the need

General Screening Mammograms	2019	2020	2021	1/1/2022 - 7/31/2022
Screening Mammograms	6367	6468	6833	3979
Callbacks from Screenings	112	147	102	79

Foundation Screening Mammograms	2019	2020	2021	1/1/2022 - 7/31/2022
Screening Mammograms	246	262	322	162
Callback from Screenings	9	10	12	3

- 2) Dental: Other facilities or organizations in the community are addressing the need and relatively low priority assigned to the need
- 3) Asthma: A relatively low priority assigned to the need

SPOTLIGHT ON SUCCESS

Fiscal Year 2019

Hospital Services

Emergency Visits	55,394
Inpatient Hospital Stays	5,523
Observation Patients	2,037
Hospital Patient Days (All Patients)	24,214
Total Surgical Cases	7,183

Community Benefit

Charity Care Costs	\$3,795,000
Medicare and Medicaid Losses	\$7,316,000
Bad Debt and Uninsured Costs	\$11,992,000
Cash and In-Kind Donations	\$48,000
TOTAL COMMUNITY BENEFIT	\$23,151,000

	Primary Care Practices	66,610
	Hospitalist	25,321
	Surgical	13,358
	Obstetrics and Gynecology	18,715
	Other Specialties (ENT, Nephrology, Urology)	5,308

Fiscal Year 2020

Hospital Services

Emergency Visits	46,732
Inpatient Hospital Stays	5,774
Observation Patients	2,723
Hospital Patient Days (All Patients)	25,567
Total Surgical Cases	6,751

Community Benefit

Charity Care Costs	\$3,028,000
Medicare and Medicaid Losses	\$5,386,000
Bad Debt and Uninsured Costs	\$12,152,000
Cash and In-Kind Donations	\$132,000
TOTAL COMMUNITY BENEFIT	\$20,699,000

	Primary Care Practices	63,351
	Hospitalist	25,951
	Obstetrics and Gynecology	20,053
	Urgent Care	18,954
	Surgical	12,966
	Other Specialties (ENT, Nephrology, Urology)	11,739

Fiscal Year 2021

Hospital Services

Emergency Visits	47,549
Inpatient Hospital Stays	5,830
Observation Patients	3,100
Hospital Patient Days (All Patients)	32,425
Total Surgical Cases	7,111

Community Benefit

Charity Care Costs	\$3,974,000
Medicare and Medicaid Losses	\$7,533,000
Bad Debt and Uninsured Costs	\$12,777,000
Cash and In-Kind Donations	\$195,000
TOTAL COMMUNITY BENEFIT	\$24,479,000

	Primary Care Practices	71,713
	Hospitalist	32,246
	Obstetrics and Gynecology	22,068
	Urgent Care	20,734
	Surgical	14,030
	Other Specialties (ENT, Nephrology, Urology)	17,889

PROJECTS AND PROGRAMS SUPPORTED BY THE SCOTLAND MEMORIAL FOUNDATION

2019

- Scotland Family Counseling Center – Wireless equipment for Eye Movement Desensitization and Reprocessing for patients
- Scotland County Parks & Recreation – Hammond Park Outdoor Exercise Equipment
- Scotland County AAU Basketball Team Sponsorship
- St. Andrews Knights Wrestling Team Sponsorship
- Total Women’s Outreach Educational Conference Sponsorship
- NAACP Back to School Supply Drive
- Scotland County Schools Kindergarten book – “Four Seasons for Little People” (2019 -2020 school year)
- RCC – Nurse simulation lab support
- Women’s Health Event
- Diabetes Education Fair
- Men’s Health Event
- Pregnancy Fair
- Breast Cancer Awareness walk
- Cancer Survivors Day Celebration
- Henley’s Heart Fund for Cardiovascular Rehabilitation
- Charles L. “Chuck” Hicks Memorial Fund for Cardiopulmonary Rehabilitation
- Cancer Center Patient Support Fund
- Wound Healing Center Compassionate Care Fund
- Nursery/Pediatric Patient Support Fund
- Free Mammogram Screening Program
- SHCS patient support funds-case management

2020

- Scotland County Schools Kindergarten book – “Four Seasons for Little People” (2020- 2021 school year)
- Scotland County Partnership for Children and Families Hands on learning center
- Scotland Family Counseling Center – Sand Therapy Tray
- Women’s Health Event – Pembroke
- Henley’s Heart Fund for Cardiovascular Rehabilitation
- Charles L. “Chuck” Hicks Memorial Fund for Cardiopulmonary Rehabilitation
- Cancer Center Patient Support Fund
- Wound Healing Center Compassionate Care Fund
- Nursery/Pediatric Patient Support Fund
- Free Mammogram Screening Program
- SHCS patient support funds-case management

2021

- Hospice – Camp Spinoza
- Scotland County EMS – Stair-Pro Chair
- Hospice – Busy Boards/Blankets
- SHCS ED – Covid Kits
- Drive Through Cancer Survivor Celebration
- NAACP – Back to School Backpack Drive
- Henley’s Heart Fund for Cardiovascular Rehabilitation
- Charles L. “Chuck” Hicks Memorial Fund for Cardiopulmonary Rehabilitation
- Cancer Center Patient Support Fund
- Wound Healing Center Compassionate Care Fund
- Nursery/Pediatric Patient Support Fund
- Free Mammogram Screening Program
- SHCS patient support funds-case management

SPOTLIGHT ON SUCCESS

EXPANDING MEDICAL SERVICES IN THE COMMUNITY

- Inpatient Clinical Optimization Team (COT) was developed (Integration of Quality and Patient Experience)
- Reimplemented Fall Safety Module (inpatient hospital)
- Expanded Telemetry beds (inpatient hospital)
- Created Opioid detox protocol (inpatient hospital)
- Expanded dialysis beds (inpatient hospital)
- Hospital Care at Home implemented
- Urgent Care opened in Pembroke
- Scotland Health Care has implemented The Advanced Illness Team to increase access to information and resources for those with advance chronic illness
- Scotland Hospice implemented negative pressure rooms at Morrison Manor to be able to provide end-of-life care to patients who also have COVID-19
- **Admissions** for Scotland Health Care System Hospice Care Division
 - FY 2019: 305
 - FY 2020: 358
 - FY 2021: 370
 - FY 2022 thought July 31: 287
- FY 2021: Scotland Health Care System partnered with The Blood Connection (New contract October 1, 2020)
 - 3 blood drives
 - 99 units of blood (each donation saves up to three (3) lives)
- FY 2022: Scotland continued partnership with The Blood Connection
 - 4 blood drives
 - 124 units of blood (each donation saves up to three (3) lives)
 - In addition, 1 partnership with **lifeLINK** for blood donations for Medical Flight Unit

Scotland Physician Network added:		
2019	2020	2021
<ul style="list-style-type: none"> • Primary Care Providers: 25 • Specialists Providers: 18 • Practices that joined SPN: 1 	<ul style="list-style-type: none"> • Primary Care Providers: 26 • Specialists Providers: 21 • Practices that joined SPN: 3 	<ul style="list-style-type: none"> • Primary Care Providers: 26 • Specialists Providers: 24

Community Health Improvement Plan

SCOTLAND HEALTH CARE SYSTEM (SHCS) SERVICES

- Cancer Center- Duke Health Affiliate
- Cardio, Neurology, and Respiratory
- Cardiovascular Center
- Emergency Center
- Emergency Air Medical Transportation Service
- Endoscopy Center/Colonoscopy
- ENT
- General Surgery & GI Services
- Hospice
- Hospitalist
- Imaging Services
- Inpatient Care
- Inpatient Rehabilitation
- Nephrology
- Occupational Medicine
- Orthopedics
- Outpatient Imaging Center- Mammography
- Pulmonology
- Rehabilitation Services
- Scotland Physician Network
- Scotland Family Counseling Center
- Sleep Center
- Specialty Clinics
- Surgical Services
- Telestroke
- TelePysch-Inpatient
- Urgent Care
- Urology
- Vascular Services
- Virtual Critical Care
- Women's Center
- Wound Healing Center

2022 COMMUNITY HEALTH IMPROVEMENT PLAN PRIORITIES AND STRATEGIES

- I. **Obesity related hypertension, heart disease, and diabetes**
- II. **Mental health including substance misuse**
- III. **Lack of positive youth engagement and healthy behaviors**

PRIORITY 1: OBESITY RELATED HYPERTENSION, HEART DISEASE AND DIABETES

Situational Analysis

Obesity is a serious and costly chronic disease that continues to rise in both Scotland County and in the United States. Overweight and obesity are the accumulation of abnormal or excessive fat that poses a risk to health. Over the last few decades, there has been a drastic increase in the prevalence of obesity. Obesity is putting a strain not only on our health, but also on health care cost, productivity, and military readiness. This condition is an epidemic that increases an individual's chance of developing type 2 diabetes, high blood pressure, certain cancers, stroke, and heart disease. Heart disease is the leading cause of death in North Carolina, as well as Scotland County. To prevent obesity related conditions, strategies that support healthy changes in diet and/or physical activity must be implemented (CDC.gov/obesity).

Based on Scotland County data (County Health Rankings & Roadmaps), people are experiencing a higher percentage of poor health, poor physical health days, and more frequent physical distress compared to other counties in the state of North Carolina. Additionally, diabetes prevalence is 15%, adult obesity is 41%, physical inactivity is 34%, and access to exercise opportunities is 56%, all of which show poorer performance levels than the state average. The county's food environment index is 6.0/10 and 20% of the population experiences food insecurity, while 10% have limited access to healthy foods.

To combat obesity and related health conditions, several programs will be maintained, enhanced, and/or initiated. These programs provide screenings to identify potential risk factors or detect early-age disease, offer support groups, and provide education concerning nutrition, heart health, and disease prevention and management.

Partners

- The Scotland Memorial Foundation
- Local Chambers
- Faith-based organizations
- Scotland County Health Department
- SHCS Human Resources: Benefits
- Scotland Physicians Network
- University of North Carolina at Pembroke
- SHCS: Business & Industry
- Laurinburg Housing Authority
- SHCS: Cardiac Rehab
- Parks & Recreation Department
- The Lumbee Tribe of North Carolina
- Scotland Community Health Clinic

Community Objectives	Indicator Source		
1. Increase number of related screenings (A1C, lipid panel, blood pressure, and body mass index) by 100%		Baseline	Goal
	A1C	494	988
	Lipid Panel	477	954
	Blood Pressure	562	1124
	BMI	153	306
2. Collaborate with partners to support community events or campaigns related to obesity, hypertension, heart disease or diabetes.	40		
3. Sponsor or co-sponsor educational presentations to increase awareness and improve health literacy regarding obesity and/or related chronic diseases.	3		
Increase number of obesity related screenings by 100%, collaborate with partners to support community events or campaigns and sponsor or co-sponsor educational presentations to increase awareness and improve health literacy related to obesity, hypertension, heart disease or diabetes			
HNC 2030 Desired Results: Reduce Overweight and Obesity; Increase Life Expectancy; Increase Physical Activity			
<p>Intervention: Increase the number of health screenings, increase health literacy Setting: Community events, community centers, Virtual/ social media campaigns and/or communications, Employee related campaigns Time Frame: September 2022- August 2025</p>			
<p>Evaluation Measures: Total number of citizens screened; Number of community events, campaigns or presentations sponsored or co-sponsored by SHCS Process: Screenings for A1C, lipid panel, blood pressure, and body mass index will be offered at no cost to all participants. Screenings and educational literature will be offered during SHCS sponsored community events and/or community events sponsored by our partners. Educational literature and presentations will be offered during in-person or virtual events sponsored by SHCS or by our partners. Outcomes: Risk factors for diseases can be detected at an early age; citizens identified with abnormal results will be offered treatment plan options. References: Center for Disease Control and Prevention August 10, 2021; https://www.cdc.gov/diabetes/basics/getting-tested.html American Heart Association: https://www.heart.org American Diabetes Association: https://www.diabetes.org</p>			

PRIORITY 2: MENTAL HEALTH AND SUBSTANCE MISUSE

Situational Analysis

Mental health is an important component of overall health and includes our emotional, psychological, and social well-being. In the United States, nearly one in five adults live with a mental illness, approximately 52.9 million in 2020 (National Institute of Mental Health). Despite high prevalence, stigma and other barriers often prevent people from receiving the mental health care that they need. In addition, mental disorders often co-occur with substance use disorder. Fatal drug overdoses in the United States have been increasing and has continued to increase during the COVID-19 pandemic, which has created a greater burden on mental health. Based on Scotland County data, (County Health & Rankings Roadmaps) people are experiencing more poor mental health days, more frequent mental distress, and have a lower quality of life compared to the state of North Carolina. Additionally, adult smoking is 27%, excessive drinking is 15%, alcohol-impaired driving deaths is 30%, and insufficient sleep is 41%.

According to the Centers for Disease Control and Prevention, drug overdoses in the U.S. rose by 15% from 2020 to 2021. An estimated 107, 622 people died of overdoses in 2021. Although the greatest number of deaths, nationwide, were from synthetic opioids (fentanyl), prescriptions drugs continue to contribute to this growing public health concern. Scotland County drug overdose deaths are less than reported by the state of North Carolina; however, the County did show an increase (22 per 100,000 population) since 2019.

To address the existing issues, several programs will be maintained, enhanced, and/or initiated. These programs address the opioid crisis and other substance misuse problems, offer support groups, offer referrals, enhance positive relationships with pharmacies, and provide screenings for depression, opioid, tobacco, and alcohol misuse.

Partners

- The Scotland Memorial Foundation
- Local Chambers
- Faith-based organizations
- Scotland County Health Department
- SHCS Human Resources: Benefits
- Scotland Physicians Network
- Hospice of Scotland County
- Scotland Community Health Clinic
- SHCS: Business & Industry
- Laurinburg Housing Authority
- Robeson Health Care Corporation
- Scotland Family Counseling Center
- Parks & Recreation Department
- The Lumbee Tribe of North Carolina
- City of Laurinburg
- University of North Carolina at Pembroke

Community Objectives	Indicator Source
1. Enhance the awareness of mental health through sponsoring or co-sponsoring educational events and/or media messaging.	12
2. Include mental health educational materials at other community events	40
3. Develop a mental health resource website to provide the community with a central location for information	Website developed
Enhance the awareness of mental health through sponsoring or co-sponsoring community events, educational events and/ or media messaging/campaigns	
HNC 2030 Desired Results: Improve Access and Treatment for Mental Health Needs; Decrease Excessive Drinking; Decrease Tobacco Use; Decrease Drug Overdose Deaths	
<p>Intervention: Utilize various avenues to increase awareness, access and literacy regarding mental health Setting: social media, community-based centers, community events, campaigns Time Frame: September 2022- August 2025</p>	
<p>Evaluation Measures: Number of messages shared within the community Process: Increase awareness and positive messaging of mental health at designated sponsored community events or in partnership with community agency or organizations. Share endorsed messages promoting mental health wellness on a social media platform. Apparel and items with messaging related to mental health will be provided at designated community events Outcomes: The expected outcome is that increase mental health literacy and awareness of mental health wellness will decrease the negative stigmatism, which prevents treatment and impacts quality of life References: Association for Psychological Science. 2014 The impact of mental illness stigma on seeking and participating in mental health care. Available at: https://journals.sagepub.com/stoken/rbtf/dDpyhM2zRi.Fg/full Mental Health and Substance Use Co-Occurring Disorders.2022. https://www.mentalhealth.gov/what-to-look-for/mental-health-substance-use-disorders Center for Disease Control and Prevention: https://www.cdc.gov/mentalhealth/index.htm</p>	

PRIORITY 3: POSITIVE YOUTH ACTIVITIES

Situational Analysis

Although youth is typically a dynamic and healthy stage of life, it is also one of the most critical stages of human development. Adolescents are more vulnerable in certain situations and are at risk of making unsafe or unhealthy choices. These unhealthy behaviors may lead to long-term risk factors for health conditions as adults. Therefore, it is important to promote physical, emotional, and intellectual wellness. It is also necessary to engage youth in situations that promote positive social roles and relationships.

Based on Scotland County data, there is a significantly higher number of premature deaths, higher rates of child and infant mortality, and higher teen birth rates compared to the state and nation. Additionally, low birthweight is 14%, uninsured children is 5%, high school graduation is 81%, children in poverty is 46%, children in single parent households is 47%, and disconnected youth is 9%. Additionally, the CDC reports that 15.4 % of adolescents (grade 9-12) are obese and another 16% are overweight.

In 2021, 13.4% of high school students reported use of any tobacco product (past 30 days). About 1 of every 9 high school students (11.3%) reported that they had used electronic cigarettes in the past 30 days. In the United States, E-cigarettes were the most used tobacco product of high school students. In North Carolina, youth tobacco use (2017) among high school students was 28.8% and 10.7%, among middle school children (ncdhhs.gov).

To promote positive youth activities, several programs will be initiated. These programs will offer parent development, professional development for daycare workers, teachers, youth coordinators etc., and provide education on topics, including physical and dental health, bullying, seatbelt safety, substance misuse, mental health, safe sex, and literacy.

Partners

- The Scotland Memorial Foundation
- Local Chambers
- Faith-based organizations
- Parks & Recreation Department
- Scotland County Health Department
- Scotland Community Health Clinic
- University of North Carolina at Pembroke
- SHCS: Business & Industry
- Laurinburg Housing Authority
- Robeson Health Care Corporation
- The Lumbee Tribe of North Carolina
- Scotland Family Counseling Center
- City of Laurinburg
- Partners in Ministry
- Scotland Physicians Network

Community Objectives	Indicator Source
1. Participate in events that focus on positive healthy behaviors targeted towards adolescents	5
Facilitate events that focus on positive healthy behaviors targeted towards adolescents	
HNC 2030 Desired Results: Improve child well-being; reduce Overweight and Obesity; Decrease Tobacco Use; Increase Physical Activity	
Intervention: Sponsor events targeting adolescents, focusing on healthy behaviors Setting: Community based centers, community events Time Frame: September 2022- August 2025	
Evaluation Measures: Number of messages shared, or events facilitated in community Process: Education based events and tools will be shared with adolescents, caregivers, and those working with the targeted population to reinforce the importance of healthy behaviors related to physical, mental, and emotional health. Outcomes: The expected outcome is that adolescents and their caregivers will increase awareness of healthy behaviors to prevent early disease or mental distress. References: Center for Disease Control and Prevention. 2017. Differences in health care, family, and community factors associated with mental, behavioral, and developmental disorders among children aged 2–8 years in rural and urban areas — United States, 2011–2012. Available at: https://www.cdc.gov/mmwr/volumes/66/ss/ss6608a1.htm Center for Disease Control and Prevention: https://www.cdc.gov/tobacco/data_statistics/fact_sheets/youth_data/tobacco_use/index.htm North Carolina Department of Health and Human Services/tobacco prevention and control: https:// www.tobaccopreventionandcontrol.ncdhhs.gov	

ONGOING HEALTH AND SAFETY CONCERN: COVID-19

Situational Analysis

In March 2020, the health care priorities of Scotland Health Care System and its partners shifted to life-saving health and safety measures for the community and surrounding areas due to the COVID-19 Pandemic. Although COVID-19 was not one of the community's identified significant health concerns, the virus has had a profound impact on those who already live with one or more chronic diseases. Those with chronic conditions such as heart disease, diabetes, obesity, lung, or kidney disease, have an increased risk for severe illness from COVID-19. COVID has also placed a greater burden on mental health. As a community we must learn to live with COVID-19, while managing our overall physical and mental health and wellness needs. That means we must continue to educate and update the community to build a respectful and thorough knowledge of the virus and its impact so that we are better able to adapt as it changes or when our community begins to see an increase in cases.

Scotland County has had over 11,400 cases of COVID-19 and 136 deaths. As of August 17, 2022, the total population of Scotland County that was vaccinated with the initial series (two doses of Pfizer or Moderna or one dose of J&J) is 50% and those with at least one dose of a vaccine series is 54%. The percent of the vaccinated population with at least one booster or additional dose is 26%.

To promote a safe and healthy community by facilitating early viral detection and treatment, increasing awareness of healthy behaviors to prevent or slow spread of the virus and improve infection control practices.

Partners

- The Scotland Memorial Foundation
- Local Chambers
- Faith-based organizations
- Parks & Recreation Department
- Scotland County Health Department
- Scotland Community Health Clinic
- University of North Carolina at Pembroke
- SHCS: Business & Industry
- Laurinburg Housing Authority
- Robeson Health Care Corporation
- The Lumbee Tribe of North Carolina
- Scotland Family Counseling Center
- City of Laurinburg
- Partners in Ministry

Community Objectives	Baseline/ Indicator Source
1. Support a safe and healthy community by providing educational materials at community events	40
2. Health Care System will continue to offer testing & vaccines through our Primary Care Clinics, Urgent Care, & Associate Health	ongoing
Support a safe and healthy community	
HNC 2030 Desired Results: Increase Life Expectancy	
<p>Intervention: Support or sponsor screening, testing, vaccination, treatments for COVID-19 and educational events focusing on healthy behaviors and infection control practices</p> <p>Setting: Community based centers, community events, SHCS</p> <p>Time Frame: September 2022- August 2025</p>	
<p>Evaluation Measures: Number community events, hospitalizations, deaths, infections</p> <p>Process: Screenings, testing, vaccinations, and treatment for COVID-19 will be offered in alignment with community needs. Educational literature will be offered during SHCS planned events and/or community planned events sponsored by our partners.</p> <p>Outcomes: Risk factors for diseases can be detected early; citizens identified with abnormal (positive) results will be provided education for safety and infection control and will be evaluated for treatment plan options.</p> <p>References: Center for Disease Control and Prevention https://www.cdc.gov/coronavirus/2019-ncov/index.html North Carolina Department of Health and Human Services: https://covid19.ncdhhs.gov/</p>	

Distribution

Scotland Health Care System's Community Health Improvement Plan will be available on the SHCS and Scotland County Health Department websites. Findings will be shared in public forums, community events, and key committees. Instructions on retrieving the document will be shared within the community via the newspaper, radio, social media, etc.

Appendices

- A- Key Stakeholders
- B- Community Health Needs Assessment Survey
- C- Community Health Needs Top 5 Survey
- D- Data Source
- E- Local Resource Directory

APPENDIX A

KEY STAKEHOLDERS

4-H Youth Development Scotland County Center
Berea Baptist Church, Pembroke
Bright Hopewell Baptist Church
Campbell Soup
Carlie C's
Church and Community Services
City of Bennettsville
City of Laurinburg
Community Members
CORE (Community Organized Relief Effort)
First Presbyterian Church, Bennettsville
First United Methodist Church, Laurinburg
First United Methodist Church of Pembroke and Sandy Plains United Methodist Church
Habitat for Humanity
Laurinburg Housing Authority
Laurinburg Presbyterian Church
Local Community Chambers
Local Libraries
Local Rotary Clubs
Lumbee Tribe of North Carolina
Man 2 Man: Bennettsville
Parks and Recreations Departments (local)
Partners in Ministry
Pharmacies (local)
Pilkington
Robeson Health Care Corporation
Scotia Village
Scotland Cancer Treatment Center
Scotland Community Health Clinic
Scotland County Health Department
Scotland County School System
Scotland Family Counseling
Scotland Health Care System Associates
Scotland Memorial Foundation
Scotland Memorial Hospital
Scotland Physicians Network
Scotland Place
SHCS Associate Health
SHCS Business and Industry
SHCS Human Resources: Benefits
SHCS Imaging Services
SHCS Marketing
SHCS Occupational Health
SHCS Resource Management
Smart Start Program
Spring Branch Baptist Church
Town of Pembroke
Trinity Rail
True Value – Pembroke
United Way of Scotland County
University of North Carolina at Pembroke
Vocational Rehabilitation Services

APPENDIX B

2022 SCOTLAND COUNTY COMMUNITY HEALTH NEEDS SURVEY

By Scotland Health Care System & Scotland County Health Department

SECTION I: THESE QUESTIONS APPLY TO YOU AS AN INDIVIDUAL

1. How do you feel about your physical health? (Check one)
 Excellent Very Good Good Fair Poor Don't Know /Not Sure
2. How do you feel about your mental health (includes stress, depression and problems with emotions)? (Check one)
 Excellent Very Good Good Fair Poor Don't Know /Not Sure
3. In the past 30 days, how often has your mental health (includes stress, depression and problems with emotions) NOT been good? Enter a number between zero (0) and thirty (30) (Please specify) _____
4. Do you know that there are Resources available for Mental Health needs? Choose one: Yes No
5. 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) _____
6. In the past 3 months, how often have you used Parks/trails in Scotland County for any physical activities/exercises such as running, sports, or walking for exercise? (Check one)
 None 1-2 days/week 3-5 days/week 6-7 days/week Other (Please specify) _____
7. I feel that the Parks in Scotland County are (choose all that apply): Safe Convenient Not utilized
8. 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
9. 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 Moore Regional Hospital Scotland Community Health (Free Clinic)
 Southeastern Regional Medical Center First Health Richmond Cape Fear Valley Medical Center
 Sandhills Medical Center (Hamlet) Other Urgent Care Centers (please specify) _____
10. 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) _____
11. In the past year, have you attended any free community health events or screenings in Scotland County for any of the following: COVID booster or vaccine, Blood pressure, Cholesterol, Diabetes, Mammogram, PSA, other?
 Yes No
12. In the past year, have you participated in "Operation Medicine Drop" in Scotland County? (Chose one)
 Yes No Not familiar with this service/program
13. In the past year have you use/needed a Naloxone kit? (Chose one)
 Yes No Not familiar with this service/program
14. Do you use any kind of tobacco, smokeless products or e-cigarettes (vaping)? (Check all that apply)
 Smoke Chew/Dip Electronic Cigarettes None
15. Do you support tobacco/smoke and vape-free public Places/Buildings/Grounds/Parks in Scotland County?
 Yes No

16. What would be your main way of getting information from authorities in a disaster or emergency (tornado, flood, hurricane, etc.)? (Check one)

- Television Neighbors Church Radio Print Media (ex. Newspaper)
 Text Message (Emergency Alert System) Social Media (Facebook, twitter, Instagram, etc.)
 Don't Know / Not Sure Other: _____

17. Would you be likely to evacuate due to a disaster or emergency? Yes No If no, why not? (Check one)

- Concern about personal/family safety Inability to get out of home or area
 No transportation Lack of trust in information
 Health problems (need assistance) Not wanting to leave home or property

18. What are your biggest health issues/ worries? (Check all that apply)

- Asthma/Lung Disease Obesity/Overweight Cancer Stroke
 High blood pressure Heart Disease Diabetes (sugar) Mental Health
 Teen Pregnancy Dental Health Mold Substance Misuse (Drugs/Alcohol)
 STDs Heat Related Illness Mental Health COVID-19 (Coronavirus)
 Smoking/Use of tobacco products or e-cigarettes Other _____

19. Do you have access to healthy foods/items (i.e. fruits, vegetables, whole grains, etc.)? Yes No

SECTION II: THESE QUESTIONS APPLY TO YOUR FAMILY/HOUSEHOLD

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

- Substance Use (Drugs/ Alcohol) Unprotected sex Child/Spouse/Parent Abuse Poor Nutrition
 Seatbelt use Lack of Physical Activity Crime/Violence Child Safety Seat Use
 Lack of Dental Health Use of Tobacco or Vaping Bullying Suicide
 Cancer Other: _____

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

- Cultural or Religious Beliefs No Insurance Unable to pay for visit to doctor
 Fear/Trust Services too far away Have to wait too long at doctor office
 I don't think I need it Transportation No appointments available at doctor when needed
 Medical care not important No child care None. I go to doctor when I need medical care
 Other: _____

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

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

23. Where do you and your family find Resources for other issues/concerns (Mental Health, Substance Misuse, quit smoking, food, shelter)? (Check all that apply)

- Doctor/Health Professional Hospital Health Department Friends or Family
 Newspaper/ Magazines Internet Community Education Events Library
 Television Radio Church Social Media
 Other (Please specify) _____

24. Does your family have a basic emergency supply kit? (Kits include water, canned food, any needed medicines, first-aid kit, 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

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

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Diabetes (Sugar) | <input type="checkbox"/> High Blood Pressure | <input type="checkbox"/> Heart Disease/Stroke | <input type="checkbox"/> Asthma/Lung Disease |
| <input type="checkbox"/> Teen Pregnancy | <input type="checkbox"/> Tobacco | <input type="checkbox"/> Use/E-cigarettes (Vaping) | <input type="checkbox"/> Substance Use (Drugs/ Alcohol) |
| <input type="checkbox"/> Gangs/ Violence | <input type="checkbox"/> Mental Health | <input type="checkbox"/> Adult/ Child Abuse | <input type="checkbox"/> Obesity/Overweight |
| <input type="checkbox"/> Dental Health | <input type="checkbox"/> Suicide | <input type="checkbox"/> Motor Vehicle Deaths | <input type="checkbox"/> Safety |
| <input type="checkbox"/> HIV/AIDS | <input type="checkbox"/> Other: _____ | | |

26. Which do you feel affects the quality of healthcare that you or people in your community receive? (Check all that apply)

- | | | | |
|---|---|---------------------------------------|-------------------------------|
| <input type="checkbox"/> Ability to read & write | <input type="checkbox"/> Language Barrier | <input type="checkbox"/> Age | <input type="checkbox"/> Race |
| <input type="checkbox"/> Sex/Gender | <input type="checkbox"/> Low Income | <input type="checkbox"/> No Insurance | |
| <input type="checkbox"/> Have insurance but unable to pay for doctor visits or co-pay | <input type="checkbox"/> Unable to get a doctor appointment that is convenient for me | | |
| <input type="checkbox"/> Not Affected | <input type="checkbox"/> Other: _____ | | |

27. What do you feel are the top three issues in your community due to lack of money? (Check three)

- | | | | | | |
|---------------------------------------|--|---|---|---------------------------------------|--|
| <input type="checkbox"/> Food | <input type="checkbox"/> Medicine | <input type="checkbox"/> Health Insurance | <input type="checkbox"/> Transportation | <input type="checkbox"/> Home/Shelter | <input type="checkbox"/> Utilities (i.e. Electricity, Fuel, Water) |
| <input type="checkbox"/> Unemployment | <input type="checkbox"/> Mental Health | <input type="checkbox"/> Substance Use | <input type="checkbox"/> Crime/Violence/Gangs | | |

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

- | | | |
|--|--|---|
| <input type="checkbox"/> Mental Health Services (including depression/anxiety) | <input type="checkbox"/> Safe place to walk/play/exercise | <input type="checkbox"/> After-School Programs |
| <input type="checkbox"/> Recreation Center | <input type="checkbox"/> Healthy Food Choices/Nutrition | <input type="checkbox"/> Rehab Services (Drugs/Alcohol) |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Job opportunities | <input type="checkbox"/> Positive youth activities |
| <input type="checkbox"/> Wellness Services | <input type="checkbox"/> Specialty Physicians | <input type="checkbox"/> Quit Smoking |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Literacy | <input type="checkbox"/> Pregnancy Prevention |
| <input type="checkbox"/> Reckless Driving/Seatbelts/Child Car Seats | <input type="checkbox"/> Cholesterol/ Blood Pressure | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Emergency Preparedness | <input type="checkbox"/> HIV/Sexually Transmitted Diseases | <input type="checkbox"/> Dental Screening |
| <input type="checkbox"/> Eating disorders | <input type="checkbox"/> Vaccinations/ Immunizations | <input type="checkbox"/> Disease Outbreaks |
| <input type="checkbox"/> Heat Related Illness | <input type="checkbox"/> Other: _____ | |

SECTION IV: DEMOGRAPHICS

For Statistical Purposes Only, Please complete the following:

I am: Male Female Transgender LGBTQ+ Prefer to self-describe: _____

My Age is: Under 25 25-34 35-44 45-54 55-64 65-74 75-84 85+

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 or Asian American Native Hawaiian Pacific Islander Other: _____

What is your ethnicity? Hispanic Non-Hispanic Unknown

I am: Employed Unemployed Retired Disabled 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 Bachelor 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

APPENDIX C

2022 SCOTLAND COUNTY COMMUNITY HEALTH NEEDS TOP 5 SURVEY

2022 Scotland County Community Health Needs Survey
By Scotland Health Care System & Scotland County Health Department

The 2022 Community Health Needs Assessment Survey Results are in! After compiling the data, these were the top twelve health issues identified by the survey participants. We need your input! Please let us know the top five issues that you feel are most important to focus on in Scotland County. We thank you for your participation.

Pick your top 5 Community Health issues.

- High Blood Pressure
- Overweight/Obesity
- High Cholesterol
- Mental Health (include depression, anxiety)
- Diabetes (Sugar)
- Asthma/Lung Disease
- Positive youth activity
- Heart Disease
- Smoking/tobacco use/vaping
- Cancer
- Substance Use (Drugs/ Alcohol)
- Lack of physical activity

SURVEY ALSO AVAILABLE ONLINE AT: <https://www.surveymonkey.com/r/58ZRPQL>

APPENDIX D

DATA SOURCES

1. USA Facts
<https://usafacts.org/>
2. United States Census Bureau
<https://www.census.gov>
3. National Institute of Mental Health
<https://www.nimh.nih.gov/health/statistics/mental-illness>
4. 2022 County Health Rankings and Roadmaps
5. www.countyhealthrankings.org/app/north-carolina/2022/rankings/scotland/county/outcomes/overall/snapshot
6. City Data – Scotland County
http://www.city-data.com/county/Scotland_County-NC.html
7. North Carolina History Project
<https://northcarolinahistory.org/encyclopedia/scotland-county-1899/>
8. North Carolina Demographics Report
<https://accessnc.nccommerce.com/DemoGraphicsReports/pdfs/countyProfile/NC/37165.pdf>
9. North Carolina State Health Assessment: (NCDHHS)
<https://schs.dph.ncdhhs.gov/units/ldas/docs/SHA-REPORT-Final-2-24.pdf>
10. North Carolina Department of Health and Human Services
www.tobaccopreventionandcontrol.ncdhhs.gov
11. Healthy North Carolina 2030: A Pathway Toward Health (HNC 2030)
<https://nciom.org/wp-content/uploads/2020/01/HNC-REPORT-FINAL-Spread2.pdf>
12. *Trying Hard Is Not Good Enough- How to Produce Measurable Improvements for Customers and Communities*: 10th Anniversary edition, by Mark Friedman (2005, 2009, 2015)
13. Results based accountability
<https://clearimpact.com/results-based-accountability/>
14. Turn the Curve thinking
<https://clearimpact.com/results-based-accountability/turn-the-curve-thinking/>
15. American Hospital Association Community Health Assessment Toolkit
<https://www.aha.org/system/files/hpoe/Reports-HPOE/2017/cha-toolkit-infographic.pdf>
16. Center for Disease Control and Prevention
<https://www.cdc.gov/>

APPENDIX E

SCOTLAND HEALTH CARE SYSTEM RESOURCE GUIDE 2022

Community Resources

Appendix E

Scotland Health Care System, along with various groups, agencies, civic groups, faith organizations, providers, schools, and community volunteers work together for the well-being of all citizens. Listed below are many resources available to the Scotland County community and to the neighboring Pembroke and Bennettsville communities:

- Adolescent Wellness Council
- Adult Care Homes
- Adult Day Care Services
- Adult Education
- After School Care
- Aging Advisory Council
- Alcoholics Anonymous
- American Red Cross
- 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
- Child Care Directions
- Child Care Immunization Program
- Church Community Services
- Civic Organizations
- Community Health & Wellness Resource Guide
- Community Innovations
- Community Transformation Grant Project
- Concerned Citizens for the Homeless, Scotland County
- Department of Social Services
- Domestic Violence & Rape Crisis Center
- Downtown Revitalization
- Early Intervention Clinic – Scotland County Health Department
- EastPointe, M.C.O. 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 (Virtual)
- Growing Change, Inc.
- Habitat for Humanity Scotland Co
- 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
- Narcotics Anonymous
- New Beginningz, Inc.

Community Resources (Continued)

- Northview Harvest Outreach Ministries
- Nursing Homes, Skilled
- Preparedness and Response
- Prescription Assistance Program
- Quitline NC
- ReNew Life Group, LLC
- Restoring Hope Center
- Richmond Community College, Diane F. Honeycutt Center
- Richmond County Health Department, Dental Clinic
- SAFE Kids Mid-Carolinas Program
- Safety Town
- Scotia Village Retirement Community
- Scotland Cancer Treatment Center
- Scotland Family Counseling Center
- Scotland County Community Health Advisory Board
- 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 Health & Wellness Resource Guide
- 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 Grows
- 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
- United Way of Scotland County
- Veteran's Service
- Vocational Rehabilitation Services
- Wagram Recreation/Active Living Center

This resource document is updated, using a Resource published by The Scotland County Health Department: Scotland County Community Health Assessment 2019

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

- City of Pembroke:
 - www.pembrokenc.com
- Pembroke Area Chamber of Commerce:
 - www.pembrokechambernc.com
- Robeson County Health Department:
 - www.robesoncountyhealthdepartment.com/
- Lumbee Tribe of North Carolina
 - www.lumbeetribe.com
- Town of Pembroke Parks and Recreation
 - www.pembrokenc.com/parks—recreation

- City of Bennettsville:
 - www.bennettsville.sc.com
- Marlboro Chamber of Commerce:
 - www.marlorochamber.org
- Marlboro County:
 - www.marlorocounty.sc.gov
- Marlboro County Department of Health and Human Services:
 - www.scdhec.gov
- Marlboro County Parks and Recreation:
 - www.marlorocounty.sc.myrec.com