



## Progress on CHIP

In March 2020, as the Iredell County Health Department was beginning to embark on the Community Health Improvement Planning (CHIP) process, our County was struck with its first case of COVID-19. The COVID-19 pandemic was unlike anything our agency has faced. We were forced to reallocate most of our staff members to COVID-specific related tasks and duties. While we were unable to make significant progress on our CHIP during the last year, we were able to move forward in transitioning our paper-based Action Plans to a web-based CHIP. This will allow us to more readily share our progress with our partners and the community in a more concise and easily accessible manner. Our agency was also able to participate in Results-Based Accountability training this year. Adopting this data-driven, decision-making process will improve the effectiveness of our programs by starting at the "end" and working backwards to identify powerful measures that will impact progress. While we were not able to physically meet with our community partners to accomplish action steps because of the COVID-19 pandemic, we were able to set up our results, indicators, programs, and performance measures in Clear Impact Scorecard. Utilizing the Scorecard will better allow us to see the progress we are making toward creating a healthy and thriving Iredell County.

## Morbidity and Mortality Changes Since Last CHA

The most significant mortality and morbidity change over the last year is the impact the COVID-19 pandemic had on our community. From March 2020 through June 2021, Iredell County experienced 18,951 cases and 221 deaths as a result of the novel strain of coronavirus. At the peak of the pandemic in January 2021, Iredell County saw a positivity rate of 17%.

Additional notable morbidity and mortality changes since the last Community Health Assessment can be found below:

### Population & Socioeconomic

- Poverty Rate: 10.9% (2018: 11.5%)
- Unemployment Rate: 4.4 (2018: 3.4)
- Percent of Uninsured children: 4% (2018: 5%)
- Residents with a Bachelors Degree or Higher: 28.4% (2018: 27.5%)

### Mental Health

- Average number of mentally unhealthy days reported in the last 20 days: 4.4 (2019: 3.8)
- Ratio of population to mental health providers: 520:1 (2019: 560:1)
- Number of Suicide deaths: 40 (2016: 31)

### Chronic Disease

- Leading Causes of Death
  - Cancer: 21% (2018: 19%)
  - Diseases of the Heart: 20% (2018: 18%)
  - Chronic Lower Respiratory Disease: 7% (2018: 6%)
  - Cerebrovascular Diseases: 6% (2018: 5%)
  - Diabetes Mellitus: 3% (2018: 3%)
- Percent of Adults who currently smoke: 19% (2019: 17%)
- Percent of Adult Obesity: 35% (2019: 30%)
- Percent of adults who are physically inactive: 23% (2019: 22%)

### Infant Mortality

- Total Infant Mortality Rate: 6.4 (2018: 8.5)
  - White Infant Mortality Rate: 5.4 (2018: 7.4)
  - African American Infant Mortality Rate: 10.8 (2018: 22.4)
  - Hispanic Infant Mortality Rate: 4.5 (2018: 0)
- Percent of Women who receive early prenatal care: 69% (2018: 69%)
- Percent of Babies born at a low birth weight: 7.5% (2018: 9.8%)

- Percent of Babies Born Pre-Term: 10.8% (2018: 10.1%)

## Emerging Issues Since Last CHA

### COVID-19

The most prominent emerging issue since the last Community Health Assessment has been, without a doubt, the COVID-19 Pandemic. The novel strain of coronavirus has caused health and socioeconomic impacts locally, nationally, and worldwide. Based on preliminary estimates, COVID-19 will be among the top three leading causes of death in Iredell County for 2020. The effects of the COVID-19 pandemic stretch far beyond health impacts, the socioeconomic impact caused by the pandemic are nearly immeasurable. At the height of the COVID-19 pandemic, Iredell County saw an unemployment rate of 14.7. While both locally and state-wide, efforts have been made to reduce the burden of the COVID-19 economical impact on families, there have been barriers in relation to access to healthcare, food security, and reliable housing. As we move past the peak of the pandemic and overcoming the impact COVID-19 had on our healthcare systems, we are preparing to proactively tackle the socioeconimocal impact the pandemic has had on our community.

## New/Paused/Discontinued Initiatives Since Last CHA

### Health Equity

During the last year, the Iredell County Health Department has been working to improve awareness and outreach efforts to underserved and traditionally marginalized populations. During the COVID-19 pandemic, we were able to utilize data available to us to determine where and who in our community may not be accessing services we offer, or may have barriers related to cost or transportation that prohibit them from accessing available services. During the next year, we plan to specifically focus on COVID-19 vaccination rates among underserved communitiies. Our agency plans to hire a Community Health Worker who will be able to bring COVID-19 prevention awareness and COVID-19 Vaccine outreach programs to underserved communities through faith-based and commmunity partnerships. This individual will be trained to specifically identify health equity issues and be able to connect resources to alleviate the barriers many of our community members face in regards to vaccine hesitancy, transportation, and access to healthcare.

### Healthy Iredell

After the completion of the last Community Health Assessment, the Iredell County Healthy Carolinians Taskforce decided to re-brand themselves as Healthy Iredell. To mark the move from a paper-based action plan to an electronic-based CHIP and adoption of the Results-Based Accountability framework, the group felt that the name-change would be a beneficial way to mark this transition. Healthy Iredell strives to take action toward creating measurable change in the lives of Iredell County residents.

## Actions

Name	Assigned To	Status	Due Date	Progress