

Wake County 2019 Community Health Needs Assessment



Opportunities and Challenges

Full Report Available: wakegov.com/wellbeing

MESSAGE FROM THE CO-CHAIRS

Dear Wake County Residents,

Wake County is ranked as North Carolina's healthiest county for the fourth year in a row. The health of our county is one of the top reasons why we are consistently known as one of the best places in the nation to live, work, learn and play.

This success is possible thanks to initiatives like the Community Health Needs Assessment (CHNA), which is a great collaboration between county residents and many community partners. It is also influenced by the social and economic determinants of health, like behavioral, physical and environmental health, and the differences in geography and demographics throughout Wake County.

The CHNA process allows our community to assess the health needs of Wake County every three years. It is a highly collaborative effort between Wake County Human Services, Advance Community Health, Duke Raleigh Hospital, UNC REX Healthcare, United Way of the Greater Triangle Wake County Medical Society Community Health Foundation and WakeMed Health and Hospitals.

Additional input was provided by numerous organizations and community partners represented on the steering committee. Most importantly, completion of the CHNA process would not have been possible without valuable feedback provided by the residents of Wake County through in-person community meetings and an online survey.

The first step of the assessment was to collect and analyze existing statistical data. Second, the report was informed by input from organizations and the community at large. Surveys, focus groups, and prioritization meetings allowed the CHNA team to identify priority areas of need and related resources. The data analysis and community input comprise this report. Overall, we hope that the information in this report will help guide decisions to make Wake County an even healthier community.

Moving forward, the CHNA process is being combined with recommendations from the Population Health Task Force, in an exciting new alignment - LIVE WELL WAKE. Action steps and measures of success will be developed with partners and stakeholders using a results-based accountability methodology. Although the report is done, our work will continue as we develop action plans and strategies in the coming months to address the identified priorities and make improvements in those areas that will benefit the residents of Wake County.

With best regards,



Steve Burriss
President
UNC REX Healthcare



Sig Hutchinson
Wake County Board of Commissioners

Co-Chairs of the Wake County Community Health Needs Assessment

ACKNOWLEDGEMENTS

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- Regina Petteway, Wake County Human Services
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Community Health Needs Assessment Steering Committee

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- Jack Baldwin, Town of Garner
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- Verna Best, Wake County Human Services/Wake County Cooperative Extension
- Darryl Blevins, Wake County Human Services
- Tara Shepherd Bowdel, Salvation Army
- Chris Budnick, Healing Transitions (Formerly The Healing Place)
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- Jose Cabanas, Wake EMS
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- Julie Cox, Inter-Faith Food Shuttle
- Jonathan Cox, Town of Fuquay-Varina
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In addition, many members of the CHAT and Steering Committee played instrumental roles in identifying locations for focus groups and coordinating on-site efforts.

Community Prioritization Forum Teams

- Edie Alfano-Sobsey, Wake County Human Services
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- Andi Curtis, WakeMed Health and Hospitals
- Nicole Dozier, Apex Town Council

- Dr. Sharon Foster, Wake County Human Services Board
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EXECUTIVE SUMMARY

Wake County: A Great Place to Live

The Community Health Needs Assessment process identifies the needs of Wake County, particularly as they relate to the health of its residents, as well as the resources that are currently available or are needed to positively address those needs.

Wake County is home to a large and diverse community within its twelve municipalities. The county is also home to numerous colleges and universities, three major hospital systems, and is the capital of North Carolina. Wake County is consistently ranked as one of the best places in which to live, work, play, and learn.

Wake County Economic Development has compiled a list of Wake County and Raleigh Rankings (see <http://raleigh-wake.org/news-and-media/news-and-rankings>). These rankings include, but are not limited to, the following:

- #2 Best Place for Business and Careers (Raleigh, NC) Forbes | October 2018
- #8 Best City for Jobs 2018 (Raleigh, NC) Glassdoor | October 2018
- #2 Best Place to Live in America (Raleigh, NC) Money Magazine | September 2018
- #5 Best Place to Live in America (Cary, NC) Money Magazine | September 2018
- #6 Best City to Raise a Family (Raleigh, NC) Zumper | August 2018
- #1 Fastest Growing Suburb in the U.S. (Apex, NC) Realtor.com | July 2018
- #1 Least Severely Housing Cost-Burdened City in the U.S. (Cary, NC) SmartAsset | June 2018
- #5 Least Severely Housing Cost-Burdened City in the U.S. (Raleigh, NC) SmartAsset | June 2018
- Top 15 Places to Live in the U.S. (Raleigh, NC) U.S. News & World Report | April 2018
- #1 Best Place to Rent in America (Research Triangle, NC) Forbes | April 2018
- Top 10 Fastest Cities for Job Growth in 2017 (Raleigh, NC) New Geography | March 2018
- #4 Best Cities in the U.S. for Physicians Assistants (Raleigh-Durham, NC) SpareFoot | April 2018

In addition, Wake County was recognized as the healthiest county in North Carolina by the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute's 2018 County Health Rankings. Wake County has earned this recognition for the past three years.

2019 Community Health Needs Assessment Overview

From March 2018 through April 2019, over 100 agency and community partners in Wake County collaborated to complete the 2019 Community Health Needs Assessment (CHNA). The 2019 CHNA examines the overall health needs of the residents of Wake County and allows the county to continuously evaluate how best to improve and promote the health of the community. The overarching goals of the 2019 CHNA are to:

- Evaluate the impact of implementation strategies and action plans that resulted from the 2016 CHNA;
- Collect and analyze primary (new) and secondary (existing) data to identify areas of need within the county;
- Report findings to the residents of Wake County, hospitals, community agencies, and the North Carolina Department of Health and Human Services;
- Engage the community to determine the priorities to be addressed; and,
- Develop a community-based action plan to address the priorities.

To avoid the development of multiple CHNAs and the duplication of efforts among agencies in Wake County, a joint CHNA has been developed through the collaborative efforts of nine organizations, including Advance Community Health, Alliance Health, Duke Raleigh Hospital, UNC REX Healthcare, United Way of the Greater Triangle, Wake County Human Services, Wake County Medical Society Community Health Foundation, WakeMed Health and Hospitals, and Youth Thrive.

As outlined through this document, a significant amount of data and information have been reviewed and incorporated in this process, and the planning partners have been careful to ensure that a variety of sources were leveraged to develop a truly comprehensive report. Assessment methods included both existing statistical data as well as new data that were collected directly from the community throughout this process.

There are ten phases in the CHNA process. Results of the first seven phases are discussed throughout this assessment and the development of community health action plans and subsequent phases will take place in the near future.



Summary of Wake County Priority Areas

As discussed previously, Wake County truly is a great place to live and is currently considered to be the healthiest county in North Carolina.¹ While it is clearly important to recognize those truths, the individuals and organizations that dedicated time and resources to this assessment are continuing to strive for further improvements to provide residents of our county with tailored resources to meet their greatest needs.

Based on the data findings and the input gathered from community organizations and residents, the following five focus areas have been identified as county-wide priorities for the 2019 CHNA:

- Transportation Options and Transit
- Employment
- Access to Care

¹ Based on the 2018 University of Wisconsin Population Health Institute’s County Health Rankings, Wake County is the healthiest county in North Carolina.

- Mental Health/Substance Use Disorders²
- Housing and Homelessness

The details of the process used to prioritize findings in this assessment are discussed later in the report. These five priority areas will be addressed through community health improvement planning initiatives over the next three years. It is important to note that health, healthcare, and associated community needs rarely exist in a vacuum. Instead they are very much interrelated with each other, with improvements in one need area driving advancements within another. As such, although it was necessary for this process to separate the various areas for purposes of measuring need, the interrelationship should be acknowledged as we consider improvement initiatives going forward.

A high-level summary of each priority area is included below. More detailed findings and supporting data have been included in the full report.

Transportations Options and Transit

The Transportation Options and Transit priority includes information related to how people get around for work, school, and play as well as public transportation and other transportation choices.

Key themes from new data (focus groups, community telephone surveys, community Internet-based surveys, and key leader Internet-based surveys) included the following:

- Focus group participants mentioned that this area remains a concern since the 2016 CHNA and is an area that has worsened over the last five years.
- Focus group participants also noted that:
 - Provider and healthcare access are limited due to many residents needing to travel across the county to receive care.
 - The county has low walkability for those who wish to travel via walking/biking or do not have a vehicle.
 - Concerns exist regarding whether the new transit plans embrace expanding areas and whether it can keep up with expected growth.
- Access to public transit (buses, commuter rail, etc.) and the availability of alternative transportation options (biking, walking, carpooling, etc.) were noted as areas needing improvement within the community via all three surveys.

In addition, Wake County performed more than five percent worse than applicable benchmarks, targets, or peer counties on the following four existing data measures:

- Percentage of workforce driving alone to work;

² Please note that although mental health and substance use disorders were viewed separately through the data collection process, the CHAT has decided to combine these two focus areas as the fourth priority for Wake County overall and will view these together for purposes of action planning and implementation.

- Percentage of workforce that commute more than 30 minutes in their car alone;
- Percentage of workforce commuting by public transportation; and,
- Percentage of workforce who walk to work.

Employment

The Employment priority includes data related to how many people have jobs, what types of jobs they have, and whether people feel they can get a good job in Wake County.

Key themes from new data included the following:

- Survey respondents noted a lack of employment and economic opportunities as a concern as well as employment being a top factor impacting the health of the community.
- Unemployment and underemployment were both issues noted by focus group participants.
- The need for additional employment-related programs that include self-employment opportunities and employment for those who have previously been incarcerated were discussed during focus groups sessions.
- Opportunities for employment was also noted as a need that may vary among various sub-groups of the population.

In addition, Wake County performed more than five percent worse than applicable benchmarks, targets, or peer counties when analyzing the unemployment rate (percent of population age 16+ unemployed).

Access to Care

The Access to Care priority includes data pertaining to how and why people use or do not use healthcare, how many people have health insurance, how much healthcare there is in the community, and how much information there is about healthcare.

Key themes from new data revolved around the following:

- Focus group participants mentioned that access to care and health insurance coverage remain top concerns since the 2016 CHNA and that access related to insurance coverage has worsened over the last five years.
- The need for additional community education related to the importance of seeking care and the availability of existing community resources were also noted as areas for improvement.
- Access to care may vary by geographical location throughout the county as well as by population sub-group.
- Survey participants noted that access to care is limited due to a lack of availability of various providers, a lack of providers accepting Medicare and Medicaid insurances, and a lack of bilingual providers.

Wake County also performed more than five percent worse than applicable benchmarks, targets, or peer counties on 14 existing data measures related to:

- Population to healthcare provider ratios;
- Beds per population ratios;
- ED visit rates for mental health conditions; and,
- Percentage of population uninsured.

Mental Health/Substance Use Disorders³

The Mental Health priority includes data related to mental health disease (like depression, Alzheimer's, and Schizophrenia), poor mental health days, and hurting oneself; the Substance Use Disorders priority includes data related to alcohol, opioid, and illegal drug use as well as data related to overdoses.

Key themes from new data included the following:

- Focus group participants mentioned that mental health/substance use disorders remain a concern since the 2016 CHNA and is an area that has worsened over the last five years.
- Not only are both mental health and substance use disorders growing areas of concern for the overall population, each is also increasingly impacting residents at a younger age.
- Persons with mental health and substance use issues were frequently noted as being an overlooked and/or particularly vulnerable population.
- A lack of current resources to adequately address mental health and substance use concerns were noted as areas for future improvement.
- Survey participants noted that drug overdose attempts and deaths are health outcomes that are impacting the community.

Wake County also performed more than five percent worse than applicable benchmarks, targets, or peer counties on nine existing data measures related to:

- Suicide mortality rate (per 100,000 population);
- Poor mental health days (avg number in past 30 days age-adjusted);
- Alcohol-impaired driving deaths;
- Drug poisoning deaths and hospitalizations; and,
- Opioid Pills Dispensed, rate per 10,000 population.

³ Please note that although mental health and substance use disorders were viewed separately through the data collection process, the CHAT has decided to combine these two focus areas as the fourth priority for Wake County overall and will view these together for purposes of action planning and implementation.

Housing and Homelessness

The Housing and Homelessness priority contains information related to the cost of housing, housing choices, and how many people are homeless.

Key themes from new data included the following:

- Focus group participants mentioned that a lack of affordable housing, increased gentrification, and a lacking sense of community (primarily because people cannot both work and live within the same area) are all negatively impacting Wake County residents.
- It was also noted that what is often promoted as being “affordable” housing is not realistically financially feasible for residents.
- Access to affordable housing and reducing homelessness were frequently noted as areas needing improvement within the community by respondents of all three surveys.
- Housing and homeless was also frequently mentioned as an area that impacts of the health of the community by respondents of all three surveys.

In addition, Wake County performed more than five percent worse than applicable benchmarks, targets, or peer counties on the following four existing data measures:

- Severe housing problems (percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities);
- Percentage of people spending more than 30% of their income on rental housing;
- Median monthly housing costs, owner-occupied housing units with a mortgage; and,
- Crowded households (more than 1 person per room).

Changes since the 2016 CHNA

Much work has been done since the completion of the 2016 Wake County CHNA to positively impact the previously identified priority areas, which included:

- Health Insurance Coverage
- Transportation
- Access to Health Services
- Mental Health and Substance Abuse

Various efforts and programs have been established to address these priority areas in recent years; however, room for continued improvement still exists. As evidenced by the priority findings discussed throughout this assessment, some of the needs identified in 2016 are still applicable today. In other cases, needs that were not highly prioritized in 2016 are now being increasingly discussed and identified as a priority.

Next Steps

The next and final step in the CHNA process is to develop community-based health improvement strategies and action plans to address the five priorities identified for Wake County in this assessment. The CHNA partners will be reaching out to invite members of the community and community organizations to a community action planning meeting to discuss the best ways to address these priorities. The most effective strategies will be those that have the collaborative support of community organizations and residents. We strongly encourage you to get involved! Ways to get involved include:

- Checking the <http://www.wakegov.com/wellbeing> website for the date, time, and location of the CHNA strategy and action planning meetings.
- Plan to attend the community action planning meetings that will be held throughout the county.
- Encourage your family, neighbors, co-workers, and community organizations to read the CHNA and get involved in the planning process as well.