Community Health Needs Assessment (CHNA): Chester County

Conducted by:
Jackson-Madison County General Hospital
Department of Business Development and Planning
Victoria S. Lake
Jocelyn D. Hodge
Megan Carefoot

January 2012

In fulfillment of the requirements of the Patient Protection and Affordable Care Act Pub.L. No.111-148, 124 Stat. 119, enacted March 23, 2010.

RESOLUTION OF THE BOARD OF TRUSTEES
OF

JACKSON-MADISON COUNTY GENERAL HOSPITAL DISTRICT
AND
HUMBOLDT GENERAL HOSPITAL, INC.
AND
GIBSON GENERAL HEALTHCARE CORPORATION
AND
CAMDEN GENERAL HOSPITAL, INC.
AND
BOLIVAR GENERAL HOSPITAL, INC.
AND
MILAN GENERAL HOSPITAL, INC.
AND
PATHWAYS OF TENNESSEE, INC.

COMMUNITY HEALTH NEEDS ASSESSMENT APPROVAL

WHEREAS, the Patient Protection and Affordable Care Act, enacted March 10, 2010, required public and not-for-profit hospitals to perform a Community Health Needs Assessment for each hospital; and

WHEREAS, the staff of the District has conducted such an Assessment and prepared the report as required for each of its hospitals; and

WHEREAS, the Assessments were prepared in accordance with IRS issued Notice 2011-52 Notice Regarding Community Health Needs Assessments for Tax Exempt Hospitals; and

WHEREAS, the Board finds that the Assessments substantially meet the requirements of the of the Patient Protection and Affordable Care Act and the IRS Issued Notice 2011-52, and that the Implementation Strategies set forth in the Assessments shall be implemented in accordance with Management recommendations.

NOW, THEREFORE, BE IT RESOLVED, that the Community Health Needs Assessments given to the Board are approved and adopted.

ADOPTED, this the 25th day of September, 2012.

PHIL BRYANT, Chairman

Exhibit

Patient Protection and Affordable Care Act-Required Community Health Needs Assessments

Conducted By: West Tennessee Healthcare Department of Business Development and Planning

- Conducted to fulfill requirements of the Patient Protection and Affordable Care Act enacted March 10, 2010.
- Required for all public and not-for-profit hospitals only
- Procedures followed and information provided in the reports meet requirements in IRS issued Notice 2011-52 Notice Regarding Community Health Needs Assessments for Tax Exempt Hospitals
- Hospital organizations with multiple hospitals must conduct community needs assessment for each hospital.

- Assessments conducted for the following counties:
- Camden General Hospital-Benton County
- Bolivar General Hospital-Hardeman County
- Gibson General Hospital-Gibson County
- Humboldt General Hospital-Gibson County
- Milan General Hospital-Gibson County
- Jackson-Madison County General Hospital-Madison, Crockett, Chester Counties
- Pathways of Tennessee-Crockett, Dyer, Gibson, Hardeman, Haywood, Henderson, Lake, Madison, Obion, Weakley Counties

- Assessment must include the following:
 - Description of the community and how "community was determined"
 - Description of the process and methods used, including sources and dates of data collection, analytical methods used, information gaps, collaborating organizations
 - Report has 10 organizational goals, committee at each facility that worked on assessments, secondary data that was reviewed that included at least 3 years of trend data for each health issue, analytical method (Hanlon Method), information gaps, collaborating organizations
 - Description of how hospital considered input from persons representing broad interests of the community
 - Each county had a committee of community representatives who participated in data collection & process of prioritizing health issues

 Community surveys distributed throughout each county requesting information on perceptions of health issues facing the area

Number of returned surveys:

	Madison County:	1,099
•	Gibson County:	387
•	Benton County:	158
	Hardeman County:	425
	Chester County:	145
	Crockett County:	148
•	Pathways:	263

- Description of prioritizing health needs:
 - community committee input
 - · Hospital staff use of Hanlon Method that considers size, seriousness, and effectiveness in prioritizing health issues

- Each report contains listing of health resources for each county.
- Community committee had reps from county health department, agencies serving low income & minorities
- Implementation strategies must be identified for each prioritized health issues
- Pathways of Tennessee identified health issues:
 - · Chronic mental health
 - Depression
 - · Domestic violence/anger management
 - · Co-occurring (mental health and substance abuse)
 - · Alcohol, illegal drugs, prescription drug use

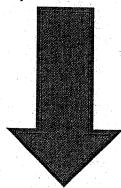
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- Implementation Strategies for Hospitals:
 - Use of HealthAwares with follow-up for those identified through risk assessment
 - Alice and Carl Kirkland Cancer Center services
 - · LIFT wellness center and primary care clinics
 - Disease management
 - Local health screenings
 - Local exercise programs
 - Local health education classes
 - Numerous mental health, substance abuse outreach programming
- Assessments must be updated and revised very three (3) years

Burden of Chronic Disease

Heart disease, high blood pressure, obesity, diabetes, some cancers



LIFESTYLE FACTORS

Poor dietary choices, physical inactivity

Initiatives to Address Chronic Diseases

- LIFT Wellness Center
 - · Medical fitness, clinical integration programs
 - · Joint replacement, phase 3 cardiac rehab, bariatrics
- Healthy Heights Employee Wellness Program
 - WTH employees
 - Turn-key product available to other employers
- Disease Management Program
 - Diabetes, congestive heart failure (CHF)
 - Referred by physicians, employer groups, at hospital discharge, self-enroll

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Executive Summary

Chester County Community Health Needs Assessment Executive Summary

Under the leadership of Jackson-Madison County General Hospital, a community health needs assessment of Chester County, Tennessee was conducted in fulfillment of the requirements of the Patient Protection and Affordable Care Act Pub.L. No.111-148, 124 Stat. 119, enacted March 23, 2010. The designated "community" for the needs assessment is Chester County, Tennessee. Chester County, Tennessee does not have a hospital. However, Chester County is in the primary service area of the Jackson-Madison County General Hospital. According to the Tennessee Hospital Association inpatient market share data (2009), Jackson-Madison County General Hospital had 71.6 percent of the inpatient market share consisting of 1,132 discharges. The mission of the Community Health Needs Assessment is to evaluate and improve the health status and wellbeing of the residents of Chester County, Tennessee with an emphasis on preventive measures. The community health needs assessment process was a blending of citizen perceptions of health issues facing the community with secondary data on the actual extent of particular problems.

Community input on the perception of health issues facing the area was accomplished through a survey administered throughout the Chester County community. A total of 145 completed surveys were returned. The completed surveys were analyzed focusing on what percentage of the respondents thought a health issue "was not a problem," "not sure," or "was a problem" for the community. Community input was also considered from a diverse group of community representatives. The community committee narrowed a large list of health issues on the survey to nine (9). These 9 health issues were:

Arthritis Diabetes
Allergies High Blood Pressure

Cancer Obesity Tobacco Use/Alcohol and Drug Use

Heart Conditions

Teenage Pregnancy

Further research was conducted by hospital staff to provide information on the size, seriousness, and available community resources for each of the 8 health issues identified by the community committee. Chester County needs were prioritized by a team of Hospital staff using a mathematical algorithm called the Hanlon Method. The Hanlon Method, developed by Felix, Burdine and Associates, was used to assign numerical values to rate the size, seriousness, and effectiveness of available interventions for each health issue. Consistent and common resources identified for each health issue include the Chester County Health Department, the Chester County School System, local physician clinics, local churches, community and senior centers, civic clubs, local non-profit agencies, American Heart Association, American Cancer Society, American Diabetes Association, and American Association of Retired Persons.

As a result of reviewing secondary data on the size, seriousness, available community resources and utilizing the Hanlon Method algorithm, the hospital committee identified five priority health issues from the nine identified by the community committee. The five priority health issues:

Heart Conditions High Blood Pressure

Cancer Obesity Diabetes

Chester County has developed a strategy for addressing heart conditions, high blood pressure, cancer, and diabetes that focuses on early detection, risk assessment screening, consultations, referral to physician or healthcare professional, and development of an individualized program plan. Freed Hardeman University offers a comprehensive exercise program which includes access to their walking track, blood pressure checks, and body mass index are monitored regularly. Free cholesterol screenings are offered as incentives for those participants that reach milestones in miles walked, blood pressure and BMI reduced. Chester County conducts breast, prostate and skin cancer screenings at local health fair locations including the Chester County Senior Citizens Center and local churches. Patients with abnormal finding are referred to their primary care physician or other healthcare providers for follow-up. Freed Hardeman University offers access to their campus walking track and exercise/weight room. In addition the county has a public walking trail available for resident to utilize. Aqua Therapies Exercise is seasonally available to residents that have difficulty with traditional exercise due to joint problems. The program is offered two days per week at Freed Hardeman University. Diabetes education classes are available to residence through their Primary Care Physician or Family Nurse Practitioner. Patients learn how to better manage their disease through increased exercise, healthy eating and blood glucose testing.

Final Report

Introduction

Under the leadership of Jackson-Madison County General Hospital a community health needs assessment of Chester County, Tennessee was conducted in fulfillment of the requirements of the Patient Protection and Affordable Care Act Pub.L. No.111-148, 124 Stat. 119, enacted March 23, 2010. The community health needs assessment process was a blending of citizen perceptions of health issues facing the community with secondary data on the actual extent of particular problems. Community input on the perception of health issues facing the area was accomplished through a survey administered throughout the Chester County community. Community input was also considered from a diverse group of community representatives. Chester County needs were prioritized by a team of community leaders using a mathematical algorithm called the Hanlon Method. A prioritized list of needs, implementation activities and associate community resources are provided.

Description of the Hospital and Community

The designated "community" for the needs assessment is Chester County, Tennessee. Chester County, Tennessee does not have a hospital. However, Chester County is in the primary service area of the Jackson-Madison County General Hospital. According to the Tennessee Hospital Association inpatient market share data (2009), Jackson-Madison County General Hospital had 71.6 percent of the inpatient market share consisting of 1,132 discharges. With a 2010 population of 16,106, Chester County is located in the rural Southwest Tennessee approximately 89 miles East of Memphis and 134 miles West of Nashville. The population is 88 percent Caucasian, 9 percent African American, and 3 percent Other races. According to the American Community Survey (2005-2009), 15.3 percent of the population is below the Federal poverty level. The per capita personal income level is \$17,770. The population under 65 years of age represents 86 percent while the over age 65 population is 14 percent of the total. About 25 percent of the population age 25 and older does not have a high school diploma or GED; 37 percent have a high school diploma; 24 percent have some college, and 14 percent have a Bachelor's degree or higher.

Chester County has a wide range of industries that employ individuals living in and around the county. Chester County is home to manufacturers or businesses such as: Premier Manufacturing Corp. which specializes in wire products (150 employees), Neo Products where hose couplings are made (93 employees), Henderson Stamping & Prod. Inc., which conducts metal stamping (93 employees), Anvil International which is concerned with multi-purposed production (85 employees), Quality Metal Stamping , LLC (35 employees) which focuses on tools, dies, jigs, and metal stamping, M.K.D. Manufacturing Co. an apparel company (25

employees), United Marble Products (25 employees), and Preferred Seating which is geared towards stadium seating (23 employees). The community has one major college or university, Freed Hardeman University which employs approximately 132 faculty.

The county seat of Chester County is Henderson, Tennessee. The City of Henderson, Chester County Government, and the Chester County School System are all located in Chester County. The public school system has six schools and serves approximately 2,438 students.

Description of the Community Health Needs Assessment Survey Process

The mission of the Community Health Needs Assessment is to evaluate and improve the health status and wellbeing of the residents of Chester County, Tennessee with an emphasis on preventive measures. The community health needs assessment of Chester County, Tennessee was a blending of citizen perceptions of health issues facing the community with secondary data on the actual extent of particular problems.

The Community Health Needs Assessment had ten (10) organizational goals.

- To form alliances between West Tennessee Healthcare, non-profit organizations, and the community at large to assess, improve, and promote the community health of Chester County, Tennessee.
- To identify internal resources already available to assist in improving community health.
- To assist in identifying available community health resources.
- To define "health" as it pertains to Chester County, Tennessee.
- To identify collaborative participants.
- To educate and gain formal support of the West Tennessee Healthcare leadership team, the Board of Trustees, community leaders, and others.
- To assist in establishing baseline health status assessment of Chester County by
 collecting and reviewing available data and statistics on residents' perceptions of
 health issues facing the community and secondary data on such health issues.
- To assist in determining the standards against which to measure the current and future health status of the community.

- To assist in the communitywide establishment of health priorities and in facilitating collaborative planning, actions, and direction to improve the community health status and quality of life.
- To promote the need for ongoing evaluation of the community health assessment process to learn results, establish new goals and encourage further community action and involvement.

The first step in the community health needs assessment process was to identify a committee of Chester County Community Leaders to organize the process, facilitate data collection, review and analyze the results. Community Members of the Chester County Committee were:

Charles Corely

Physical Education Director-Freed Hardeman University

Mark Barber

Quinco Mental Health Administrator

Patty Kitty

Chester County Health Department

Jackson- Madison County General Hospital staff assisted with the development of an anonymous survey instrument that was used to collect input from a broad range of community interests. The survey instrument included questions on the perceptions of the respondents relative to communicable diseases, chronic health problems, family health concerns, access to health resources, community concerns, and demographics of age, race, education level, insurance, and residence. Respondents were asked on the survey to indicate whether they thought a particular health issue was "1=not a problem," "2=not sure," or "3=is a problem" for the Chester County community. Locations to distribute the survey throughout the community were also suggested and discussed by committee members.

Upon completion of the survey instrument, a committee of community representatives was formed to review the survey instrument for completeness and assistance with interpretation of the results. An invitation to serve on the community committee was sent to prospective members from Jackson-Madison County General Hospital CEO/President October 20, 2011. A copy of this letter is included in Attachment A. Members of the committee represented a broad range of community interests in Chester County. Members of the community committee were:

Charles Corely Lindsey Ferrell Amy Ferrell Connie Beecham Patty Kitty

Troy Kilzer
Amy Rogers

Physical Education Director-Freed Hardeman University

UT Extension Agency Agent Senior Citizens Center Director

Chester County School System Guidance Counselor

Chester County Health Department Educator

City Hall Mayors Office

UT Extension Agency Educator

Dr. Paul Schwartz Mark Barber Main Street Family Medicine
Quinco Mental Health Administrator

Membership on the community committee included Patty Kitty, Administrator for the Chester County Health Department. Mrs. Kitty has special knowledge of public health issues of influenza, sexually transmitted diseases, teenage pregnancy, HIV/AIDS, Hepatitis C, and access to health resources.

An introductory meeting of the community committee was held on November 1, 2011. At this meeting the process for conducting the community health needs assessment was reviewed and discussed. The draft survey instrument to collect citizen perception of health issues facing Chester County was also reviewed and suggested changes and modifications were given by committee members. Locations to distribute the anonymous survey throughout the community were also suggested and discussed by committee members.

The survey instrument was finalized and then distributed by hand throughout the Chester County community. Attachment B contains a copy of the survey instrument. Table 1 contains a list of locations, dates, and number of returned surveys from the survey process.

Table 1 Community Health Assessment Survey Information

Location

Freed Hardeman University
Senior Citizens Center
Chester County Bank
Church Health Fair
Chester County School System Faculty/Staff

All Surveys in Gibson County were Distributed on 11/1/2011.

A total of 145 completed surveys were returned by November 22, 2011. The completed surveys were analyzed focusing on what percentage of the respondents thought a health issue "was not a problem," "not sure," or "was a problem" for the community.

Community Health Needs Assessment Prioritization Process Size, Seriousness, Effectiveness & Available Community Resources

The survey results and a summary page were provided to the community committee which met on November 22, 2011 to review the data and results. The community committee was asked to narrow the list of 54 health issues on the survey instrument to a more manageable number. To assist with this process, hospital staff provided a summary page that highlighted health issues where at least 50 percent of the respondents indicated a health issue "was a problem" for the community. Attachment C contains the survey summary. For the following list of health issues, at least 50 percent of the respondents indicated it "was a problem" for the community.

Heart Conditions High Blood Pressure Breast Cancer

Arthritis

Obesity Asthma Diabetes Allergies

Teenage Pregnancy

Tobacco Use

Alcohol and Drug Abuse

Using the 50 percent threshold as a guide the community committee narrowed the list of health issues on the survey to nine (9). These 9 health issues were:

Arthritis Heart Condition

High Blood Pressure

Cancer Obesity Diabetes Allergies

Teenage Pregnancy

Tobacco Use/Alcohol and Drug Abuse

The Chester County Community Committee was reconvened on November 22, 2011 to prioritize the list of 9 health issues identified by the community committee for further research. The Hospital staff used a mathematical algorithm called the Hanlon Method, developed by Felix, Burdine and Associates, to assign numerical values to rate the size, seriousness, and effectiveness of available interventions for each health issue. The Hanlon Method algorithm is as follows:

Opportunity= (A + 2B)C

A=size of the identified health problem
B=seriousness of the identified health problem
C=effectiveness of available interventions for the identified health problem

A=Size

Size is defined by the prevalence of a condition, characteristic, or disease in an entire population (or among a specific sub-group population). The numerical scoring for the size of a health issue is:

Percent of population with health problem	Score
25%+	9-10
10-24%	7-8
1-9%	5-6
0.1-0.9%	3-4
0.01-0.09%	1-2

B=Seriousness

Seriousness is defined by urgency to intervene, severity (leads to death?), disproportionate among vulnerable populations, or economic impact. The numerical scoring for seriousness of a health issue is:

<u>How serious</u>	<u>Score</u>
Very Serious	9-10
Serious	6-8
Moderately Serious	3-5
Not Serious	0-2

C=Effectiveness of Available Interventions

Effectiveness of available interventions is defined by the "best real world" expectations for Jackson-Madison County General Hospital to be effective in addressing a health issue based on, in part, available community resources. The numerical scoring for effectiveness of available interventions is:

<u>Effectiveness</u>	Score
Very Effective (80%+)	10
Relatively Effective (60-79%)	8-9
Effective (40-59%)	6-7
Moderately Effective (20-39%)	4-5
Relatively Ineffective (<20%)	0-3

Information on the Hanlon Method is found in Attachment D.

Further research was then conducted by hospital staff to provide information on the size, seriousness, and available community resources for each of the 9 health issues identified by the community committee. Attachment E has data on the size of the health issues and Attachment F lists available community resources for each of the 9 identified health issues. Consistent and common resources identified for each health issue in Attachment F include the Chester County Health Department, the Chester County School System, local physician clinics, local churches,

community and senior centers, civic clubs, local non-profit agencies, American heart Association, American Cancer Society, American Diabetes Association, and American Association of Retired Persons

Table 2 contains the Hanlon Method scoring for each identified health issue.

Table 2

Har	nion Me	thod Scoring Results		
Issue	A=	B=	C=	Total
	Size	Seriousness	Effectiveness	(A+2B)C
Arthritis	1	1		2
Heart Condition	8	8	8	192
High Blood Pressure	9	8	8	200
Cancer	8	8	6	144
Obesity	10	10	9	270
Diabetes	9	9	8	216
Allergies	8	1	1	10
Teenage Pregnancy	5	5	5	75
Tobacco Use/Alcohol & Drug Abuse	8	8	1	24

As a result of reviewing secondary data on the size, seriousness, available community resources and utilizing the Hanlon Method algorithm, the hospital committee identified five priority health issues from the 9 identified by the community committee. The five priority health issues:

Heart Conditions

High Blood Pressure

Cancer

Obesity

Diabetes

Implementation Strategies

Chester County has developed a strategy for addressing heart conditions, high blood pressure, cancer, and diabetes that focuses on early detection, risk assessment screening, consultations, referral to physician or healthcare professional, and development of an individualized program plan.

Heart Conditions and High Blood Pressure

Freed Hardeman University offers a comprehensive exercise program which includes access to their walking track, blood pressure checks, and body mass index are monitored regularly. Free cholesterol screenings are offered as incentives for those participants that reach milestones in miles walked, blood pressure and BMI reduced.

Cancer

Chester County conducts breast, prostate and skin cancer screenings at local health fair locations including the Chester County Senior Citizens Center and local churches. Patients with abnormal finding are referred to their primary care physician or other healthcare providers for follow-up.

Obesity

Freed Hardeman University offers access to their campus walking track and exercise/weight room. In addition the county has a public walking trail available for resident to utilize. Aqua Therapies Exercise is seasonally available to residents that have difficulty with traditional exercise due to joint problems. The program is offered two days per week at Freed Hardeman University.

Diabetes

Diabetes education classes are available to residence through their Primary Care Physician or Family Nurse Practitioner. Patients learn how to better manage their disease through increased exercise, healthy eating and blood glucose testing.

Conclusion

The Chester County Community Health Needs Assessment was presented to the West Tennessee Healthcare Quality Council on July 3, 2012. The document was approved for submission to the West Tennessee Healthcare Board of Trustees. A presentation was made to the Board of Trustees on September 25, 2012, and the Chester County Community Health Needs Assessment was approved on this date. The Plan will be updated every three years.

Attachment A

Attachment A Invitation Letter to Community Committee



620 Skyline Drive • Jackson, Tennessee 38301 • 731-541-5000 • www.wth.org

MEMORANDUM

DATE:

October 20,2011

TO:

Chester County Health Assessment Committee

FROM:

Bobby Arnold CEO/ President, Jackson-Madison County General Hospital

RE:

Chester County Community Health Assessment Community Committee

Chester County, Tennessee is in the primary services area of the Jackson-Madison County General Hospital. As part of our hospital service area we have provided a wide range of community health activities that include medical screenings, health fairs, health education classes, sponsorships, and other activities.

In past years Jackson-Madison County General Hospital has conducted needs assessment to ensure that the health activities conducted meet identified community needs. In addition, the recent Federal Patient Protection and Affordable Care Act (Health Care Reform) requires non-profit hospitals to conduct community needs assessment every three years.

We are beginning the process of assessing the community health needs in Chester County that will be a blending of residents' perception of the health issues facing us with health status and vital statistics on our community. We will distribute a survey throughout the community and the collect data on issues identified from the survey.

We invite you to be a member of the Chester County Community Committee that will help us review the survey data, and narrow that list of health issues to a manageable number by focusing on the size, seriousness, and the effectiveness of interventions. We anticipate this process will take three months and will in five (5) one hour meetings.

- Ayers Children's Medical Center
- Bolivar General Hospital
- **Bradford Family Medical Center**
- · Camden Family Medical Center
- · Camden General Hospital
- CardioThoracic Surgery Center
- · East Jackson Family Medical Center
- Gibson General Hospital
- Humboldt General Hospital

Medical Center Home Health

- Jackson-Madison County General Hospital
- Kirkland Cancer Center Medical Center EMS
- · Kiwanis Center for Child Development
- · Medical Center Laboratory
- · Medical Center Medical Products
- · Medical Clinic of Jackson
- · MedSouth Medical Center

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- · Milan General Hospital Pathways Behavioral Health Services
- · Physician Services
- West Tennessee Women's Center
- . Wark Darmare
- West Tennessee Healthcare Foundation • West Tennessee Imaging Center
- West Tennessee Neurosciences
- West Tennessee OB/GYN Services
- West Tennessee Rehabilitation Center
- West Tennessee Surgery Center



620 Skyline Drive • Jackson, Tennessee 38301 • 731-541-5000 • www.wth.org

We ask you to attend the first introductory meeting of the Community Committee. The meeting will be held Tuesday, November 1, 2011 at Freed Hardeman University in the Physical Education Conference Room. The meeting will start at 11:00 a.m. and will be concluded by 12:30 p.m. Lunch will be served.

Please contact Jocelyn Hodge, Community Health Licensure Coordinator of your attendance plans. She may be reach at 731-984-2161 or Jocelyn.hodge@wth.org. We appreciate you participation in this important process for Hardeman County.

- Ayers Children's Medical Center
- Bolivar General Hospital
- **Bradford Family Medical Center**
- · Camden Family Medical Center
- · Camden General Hospital
- CardioThoracic Surgery Center
- · East Jackson Family Medical Center

- · Gibson General Hospital
- · Humboldt General Hospital
- Jackson-Madison County General Hospital
- Kirkland Cancer Center · Kiwanis Center for Child Development
- Medical Center EMS
- · Medical Center Home Health
- · Medical Center Laboratory
- · Medical Center Medical Products
- Medical Clinic of Jackson
- · MedSouth Medical Center
- Milan General Hospital · Pathways Behavioral Health Services
- · Physician Services
- Sports Plus Rehab Centers
- West Tennessee Healthcare Foundation
- West Tennessee Imaging Center
- West Tennessee Neurosciences
- · West Tennessee OB/GYN Services West Tennessee Rehabilitation Center
- West Tennessee Surgery Center
- West Tennessee Women's Center
- Work Partners

Attachment B

Chester County

Attachment B Survey Instrument

Community Health Assess

We realize there are many health-related problems in the community. We need your help in defining the priority health programs in our community. We would like you to take a few minutes to answer some questions relating to your views on health problems facing West Tennessee. We appreciate

your time and effort.		
What area of Chester County do you live?		
O Deanburg O Enville	O Henderson	O Jacks Creek
O Milledgeville O Silerton		
The following is a list of problems experienc problem you feel each of these is for the Weyour choice as not a problem, not sure, or is Communicable Diseases	est Tennessee area, includi	Please indicate how much of a ng Chester County. Indicate
Response Definition: 1=Not a Problem 2=Not Sure 3=Is	a Problem	1 2 3
1. Tuberculosis (TB)		1 2 3
2. Influenza (Flu)		
3. Sexually Transmitted Diseases		
4. HIV/AIDS		
5. Hepatitis C		
Chronic Health Problems		
6. Emphysema (chronic obstructed pulmonary dis	sease)	
7. Heart Conditions		
8. High Blood Pressure		
9. Skin Cancer		
10. Colon Cancer		
11. Lung Cancer		
12. Breast Cancer		
13. Prostate Cancer		
14. Arthritis		
15. Obesity		
16. Asthma		
17. Diabetes		
18. Allergies		
19. Osteoporosis		
20. Dementia/Alzheimer's		
71. Hearing loss		
Cataracts		
23. Glaucoma		
24. Macular Degeneration		
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Chester County Community Health Assessment

Family Health Concerns	
Response Definition: 1=Not a Problem 2=Not Sure 3=Is a Problem	
25. Intimate partner violence	1 2 3
26. Child abuse	
27. Motor vehicle accidents	
그리고 아도는 젊은 그림은 그 사람들이 있었다면, 하는 것들이 가입니다고요? 그 일반 그림이 없다.	
28. Falls or fall-related injuries29. Residential fires	
30. Dental care	
31. Leisure accidents	
32. Infant deaths	
33. Teenage pregnancy Access to Health Resources	
Response Definition: 1=Not a Problem 2=Not Sure 3=Is a Problem	
Response Demintion. 1-Not a Froblem 2-Not Sure 3-15 a Froblem	1 2 3
34. Access to adult daycare	
35. Access to home health care	
_6. Access to home care (sitter service)	
37. Access to care for special needs children	
38. Lack of financial resources for medical care	
39. Access to healthy foods	
40. Access to leisure time physical activity	
41. Access to transportation to health care	
42. Access to nursing home care	
43. Access to a primary care provider	
44. Access to medical specialist	
45. Access to medications	
46. Access to education on wellness	
47. Access to education on healthy lifestyles	
48. Access to education on prevention	
49. Access to facilities for exercise	
50. Access to parks for recreation	

Chester County Community Health Assessment

Community Concerns:	
Response Definition: 1=Not a Problem 2=Not Sure 3=Is a Problem	
51. Illiteracy52. Tobacco use53. Violent crime54. Alcohol and Drug Abuse	
55. Do you consider yourself: ☐ Overweight ☐ Underweight ☐ Obese ☐ Ju	st Right
56. Age range: ☐ 18 - 24 ☐ 25 - 34 ☐ 35 - 44 ☐ 45 - 54	□ 55 - 64 □ 65 +
57. Are you: ☐ Male ☐ Female	
58. Race: Caucasian Asian/Pacific Islander Description: Other	☐ Native American
59. School: ☐ Less than high school ☐ Associate degree ☐ Bachelors degree	☐ Some college☐ Advanced degree
60. What type of insurance do you have? ☐ Medicare ☐ TennCare ☐ Private Insurance ☐	☐ Other ☐ No Insurance
Comments	

Attachment C

CHESTER COMMUNITY HEALTH ASSESSMENT SURVEY RESULTS

Freed Hardeman University, Senior Citizen Center, Chester County Bank, Church Health Fair, Chester County Schools System Faculty/Staff

N= 145

	N=	145		
What area of Hardeman County do you live?			•	
Deanburg	6	4%		
Enville	5			9.5
Henderson	93			
Jacks Creek	24			
Milledgeville	1 1	1%		
Silerton	7	5%		
		0,0		. , vi
(How much of a problem do you feel the health is:	l Sues list	ed below	l Mare for Chaster Count	. .
COMMUNICABLE DISEASE	1			.y.
Tuberculosis	1	i i	1	
Not a problem	90	68%		
Not sure	38	29%		
ls a problem	4	3%		
**Influenza (flu)		0 70		
Not a problem	36	27%		
Not sure	36	27%		
ls a problem	61	46%		
Sexually Transmitted Diseass		10 /0		
Not a problem	39	29%		
Not sure	47	35%		
Is a problem	47	35%		
HIV/AIDS	''	0070		
Not a problem	51	38%		
Not sure	53	40%		
Is a problem	29	22%		
Hepatitis C		/		
Not a problem	46	35%		
Not sure	57	43%		
ls a problem	29	22%		
CHRONIC HEALTH PROBLEMS		/0		
Emphysema	1	1		
Not a problem	42	32%		
Not sure	52	39%		٠.,
ls a problem	38	29%	•	
**Heart Conditions				
Not a problem	32	24%		
Not sure	21	15%		
Is a problem 👢 🔭 📜 🔻 🔭	83	61%		
**High Blood Pressure		1		
Not a problem	28	21%		
Not sure	18	13%		
is a problem.	90	66%		
Skin Cancer				
Not a problem	43	21%		
Not sure	48	36%		
Is a problem	43	32%		
· •				

Colon Cancer		
Not a problem	47	35%
Not sure	45	33%
Is a problem	44	32%
Lung Cancer		
Not a problem	44	33%
Not sure	36	27%
Is a problem	55	41%
**Breast Cancer		
Not a problem	40	30%
Not sure	32	24%
is a problem.	63	50%
Prostate Cancer		
Not a problem	42	32%
Not sure	41	31%
Is a problem	50	38%
**Arthritis		000/
Not a problem	30	22%
Not sure	27	20%
is a problem of the state of th	177	57%
**Obesity		070/
Not a problem	36	27%
Not sure	15	11%
is a problem if	83	62%
**Asthma	24	0004
Not a problem	31	23%
Not sure	32 72	24%
Is a problem to the second of	14	-53%
**Diabetes	29	22%
Not a problem	22	17%
Not sure	82	62%
Is a problem and the second of	-04	- UZ./U
**Allergies	20	15%
Not a problem Not sure	16	12%
Is a problem	98	73%
Osteoporosis		
Not a problem	38	28%
Not sure	47	35%
Is a problem	50	37%
Dementia/Alzheimers		
Not a problem	37	27%
Not sure	52	39%
Is a problem	46	34%
Hearing loss		
Not a problem	41	31%
Not sure	37	28%
Is a problem	56	42%
Cataracts		
Not a problem	50	38%
Not sure	49	37%
ls a problem	34	26%

Glaucoma		
Not a problem	50	37%
Not sure	56	41%
is a problem	29	21%
Macular Degeneration		
Not a problem	54	41%
Not sure	62	47%
Is a problem	17	13%
FAMILY HEALTH CONCERNS		
Intimate partner violence		
Not a problem	48	36%
Not sure	39	29%
Is a problem	47	35%
Child abuse		
Not a problem	37	28%
Not sure	45	34%
Is a problem	51	38%
Motor vehicle accidents		
Not a problem	39	29%
Not sure	47	35%
ls a problem	47	35%
Falls or fall related injuries		
Not a problem	45	34%
Not sure	41	31%
Is a problem	46	35%
Residential fires		
Not a problem	57	43%
Not sure	47	35%
is a problem	30	22%
**Dental care		
Not a problem	50	37%
Not sure	38	28%
ls a problem	46	34%
Leisure accidents		
Not a problem	47	36%
Not sure	58	44%
is a problem	27	20%
Infant deaths		
Not a problem	54	41%
Not sure	57	43%
is a problem	22	17%
**Teenage Pregnancy		
Not a problem	32	23%
Not sure	27	20%
Is a problem	-75	56%
ACCESS TO HEALTH RESOURCES		
Access to adult daycare		
Not a problem	53	39%
Not sure	48	36%
ls a problem	34	25%
Access to home health care		
Not a problem	60	44%

Not sure	43	32%
Is a problem	32	24%
Access to home care (sitter service)		
Not a problem	60	45%
Not sure	47	35%
ls a problem	27	20%
Access to care for special needs children		
Not a problem	52	39%
Not sure	42	31%
ls a problem	41	30%
**Lack of financial resources for medical care		
Not a problem	41	30%
Not sure	48	36%
ls a problem	44	33%
Access to healthy foods	1	
Not a problem	66	49%
Not sure	14	10%
Is a problem	54	40%
Access to leisure time physical activity		
Not a problem	77	58%
Not sure	24	18%
ls a problem	32	24%
Access to transportation to health care	"-	
Not a problem	67	50%
Not sure	38	28%
Is a problem	29	22%
Access to nursing home care		/0
Not a problem	83	62%
Not sure	28	21%
Is a problem	22	17%
Access to a primary care provider	~~	.,,
Not a problem	80	61%
Not sure	27	20%
Is a problem	25	19%
Access to medical specialist	20	1070
Not a problem	75	56%
Not sure	37	27%
Is a problem	23	17%
Access to medications	20	1.70
Not a problem	85	63%
Not sure	25	19%
ls a problem	25	19%
Access to education on wellness	20	10 70
Not a problem	54	41%
Not sure	40	30%
	39	29%
Is a problem	39	2370
Access to education on healthy lifestyles	49	37%
Not a problem Not sure	48	36%
	35	27%
is a problem	33	<i>←1 /0</i>
Access to education on prevention	48	36%
Not a problem	40	30%

Not sure	47	35%
Is a problem	39	29%
Access to facilities for exercise	l .	
Not a problem	70	53%
Not sure	23	17%
Is a problem	40	30%
Access to parks and recreation		
Not a problem	86	64%
Not sure	20	15%
ls a problem	28	21%
COMMUNITY CONCERNS		
Illiteracy	60	45%
Not a problem	38	29%
Not sure	34	26%
Is a problem		
**Tobacco use		
Not a problem	21	16%
Not sure	17	13%
s a problem Violent Crimes	94	71%
Not a problem	44	33%
Not sure	43	33%
Is a problem	45	34%
**Alcohol and Drug Abuse		
Not a problem	21	16%
	i-	
Not sure	20	16%
Not sure	20 87	16% . 68%
is a problem : 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
is a problem a substitution of the substitutio	87	68% 39% 6%
Is a problem Did you consider yourself : Overweigtht	87 52 8 5	39% 6% 4%
Did you consider yourself : Overweight Underweight	87 52 8	68% 39% 6%
Did you consider yourself : Overweight Underweight Obese	52 8 5 67	39% 6% 4% 51%
Did you consider yourself: Overweight Underweight Obese Just Right Age range:	52 8 5 67 40	39% 6% 4% 51%
Did you consider yourself : Overweight Underweight Obese Just Right Age range: 18-24 25-34	52 8 5 67 40 14	39% 6% 4% 51% 31% 11%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44	52 8 5 67 40 14 14	39% 6% 4% 51% 31% 11%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44	52 8 5 67 40 14 14 25	39% 6% 4% 51% 31% 11% 11% 19%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64	52 8 5 67 40 14 14 25 26	39% 6% 4% 51% 31% 11% 11% 19% 20%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64 65+	52 8 5 67 40 14 14 25	39% 6% 4% 51% 31% 11% 11% 19%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64 65+ Are you:	52 8 5 67 40 14 14 25 26 11	39% 6% 4% 51% 31% 11% 19% 20% 8%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64 65+ Are you: Male	52 8 5 67 40 14 14 25 26 11	39% 6% 4% 51% 31% 11% 11% 20% 8%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64 65+ Are you:	52 8 5 67 40 14 14 25 26 11	39% 6% 4% 51% 31% 11% 19% 20% 8%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64 65+ Are you: Male Female	52 8 5 67 40 14 14 25 26 11	39% 6% 4% 51% 31% 11% 11% 20% 8%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64 65+ Are you: Male Female Race:	52 8 5 67 40 14 14 25 26 11 44 84	39% 6% 4% 51% 31% 11% 11% 20% 8% 34% 66%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64 65+ Are you: Male Female Race: Caucasian	52 8 5 67 40 14 14 25 26 11 44 84	39% 6% 4% 51% 31% 11% 19% 20% 8% 34% 66%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64 65+ Are you: Male Female Race: Caucasian African American	52 8 5 67 40 14 14 25 26 11 44 84	39% 6% 4% 51% 31% 11% 19% 20% 8% 34% 66%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64 65+ Are you: Male Female Race: Caucasian African American Native American	52 8 5 67 40 14 14 25 26 11 44 84 100 22 3	39% 6% 4% 51% 31% 11% 19% 20% 8% 34% 66%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64 65+ Are you: Male Female Race: Caucasian African American Native American Asian/Pacific Islander	52 8 5 67 40 14 14 25 26 11 44 84 100 22 3 1	39% 6% 4% 51% 31% 11% 19% 20% 8% 34% 66% 76% 17% 2% 1%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64 65+ Are you: Male Female Race: Caucasian African American Native American Asian/Pacific Islander Other	52 8 5 67 40 14 14 25 26 11 44 84 100 22 3	39% 6% 4% 51% 31% 11% 19% 20% 8% 34% 66%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64 65+ Are you: Male Female Race: Caucasian African American Native American Asian/Pacific Islander Other School	52 8 5 67 40 14 14 25 26 11 44 84 100 22 3 1 66	39% 6% 4% 51% 31% 11% 19% 20% 8% 34% 66% 76% 17% 2% 1% 5%
Did you consider yourself: Overweight Underweight Obese Just Right Age range: 18-24 25-34 35-44 45-44 55-64 65+ Are you: Male Female Race: Caucasian African American Native American Asian/Pacific Islander Other	52 8 5 67 40 14 14 25 26 11 44 84 100 22 3 1	39% 6% 4% 51% 31% 11% 19% 20% 8% 34% 66% 76% 17% 2% 1%

Some college	38	29%	
Associate degree	4	3%	
Bachelors degree	18	14%	
Advanced degree	24	18%	
What type of insurance do you have?	i j	- 1	
Medicare	18	14%	٠.
Tenncare	14	11%	
Private Insurance	56	42%	
Other	34	26%	
No Insurance	10	8%	

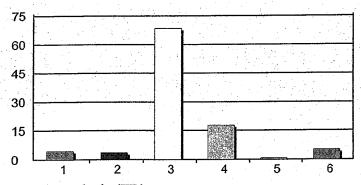
hester County Community Health Assessment

reation Date: 11/21/2011

Time Interval: 11/2/2011 to 11/2/2011

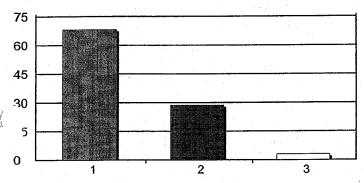
Total Respondents: 145

What area of Chester County do you live?



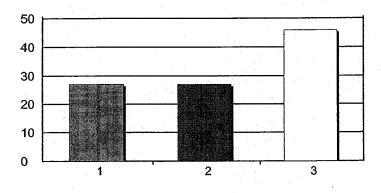
1. Deanburg	1.	6	4%
2. Enville		5	4%
3. Henderson		93	68%
4. Jacks Creek		24	18%
5. Milledgeville		1	1%
6. Silerton		7	5%
Total Responses:		136	
Mean: 3.22 Standard Deviation: 0.92			

1. Tuberculosis (TB)



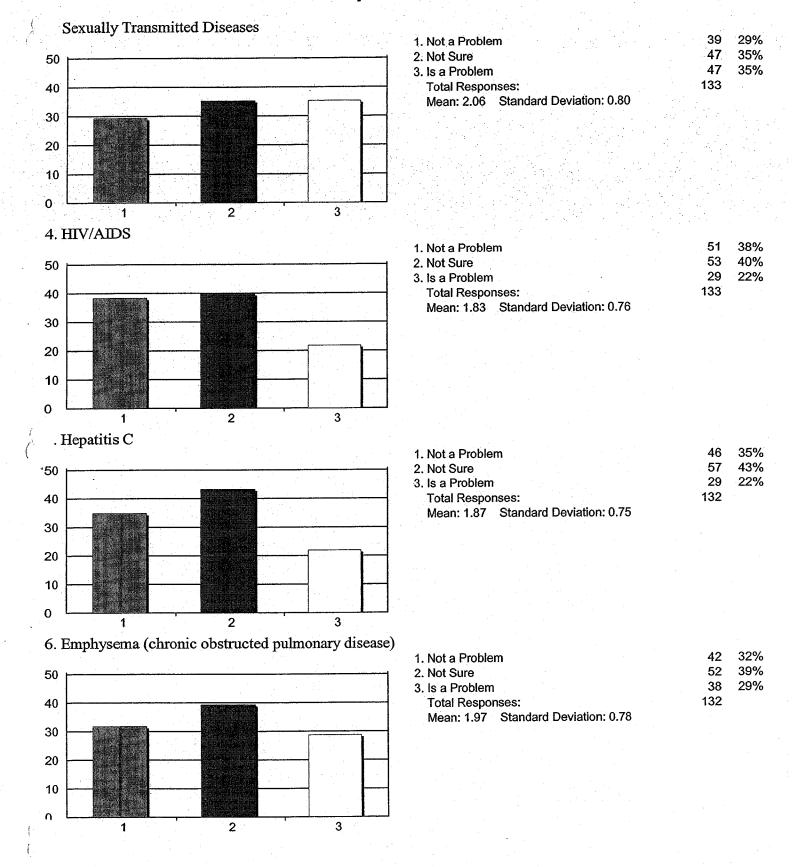
1. Not a Problem		90	68%
2. Not Sure		38	29%
3. Is a Problem		4	3%
Total Responses:	1.	32	
Mean: 1.35 Standard Deviation: 0.54			

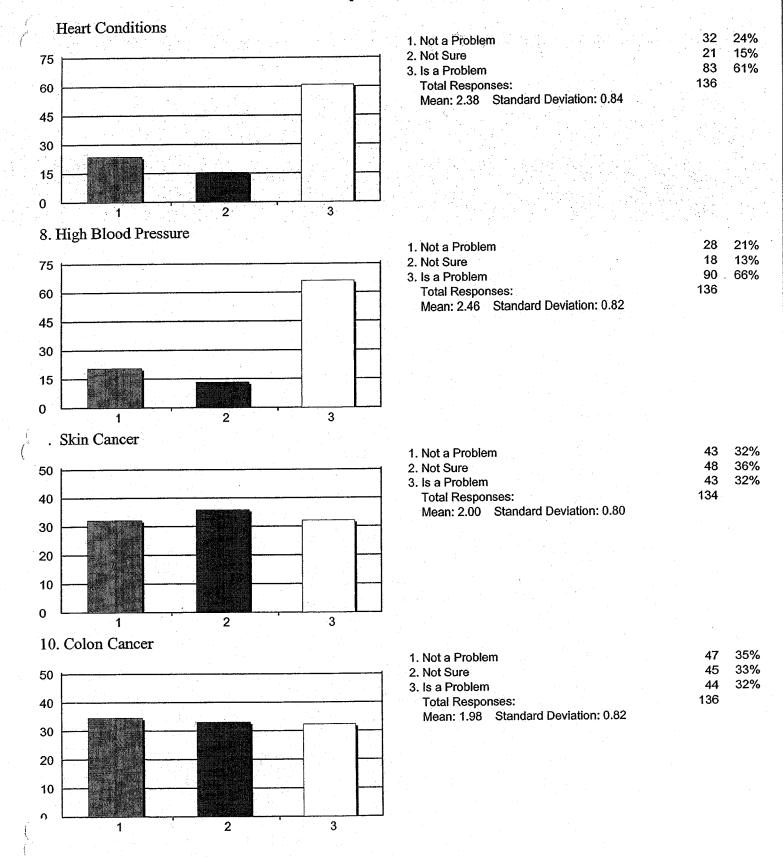
2. Influenza (Flu)

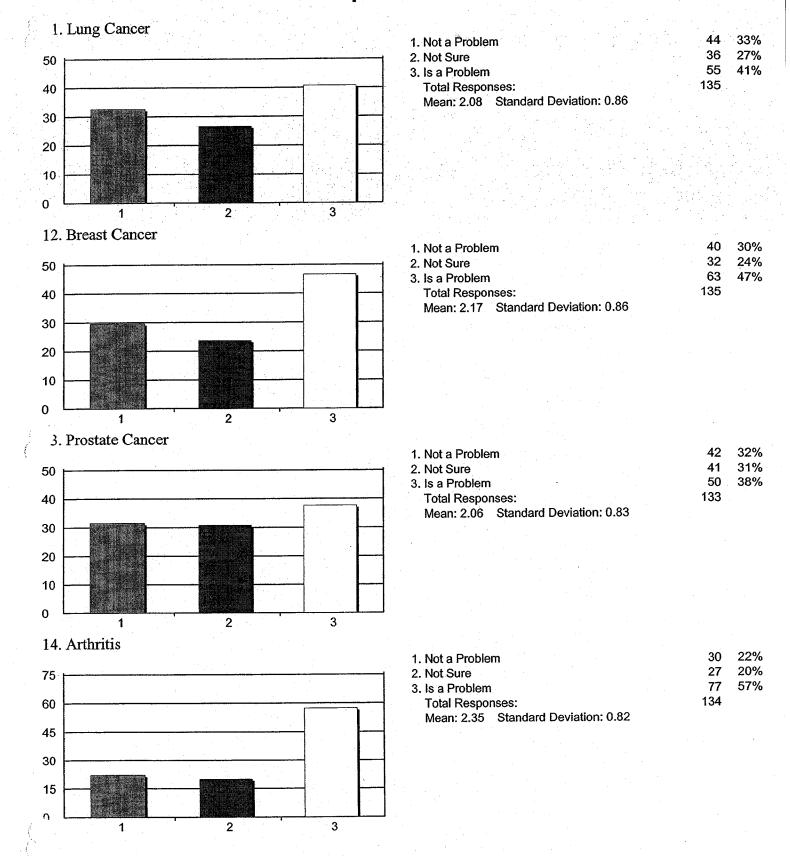


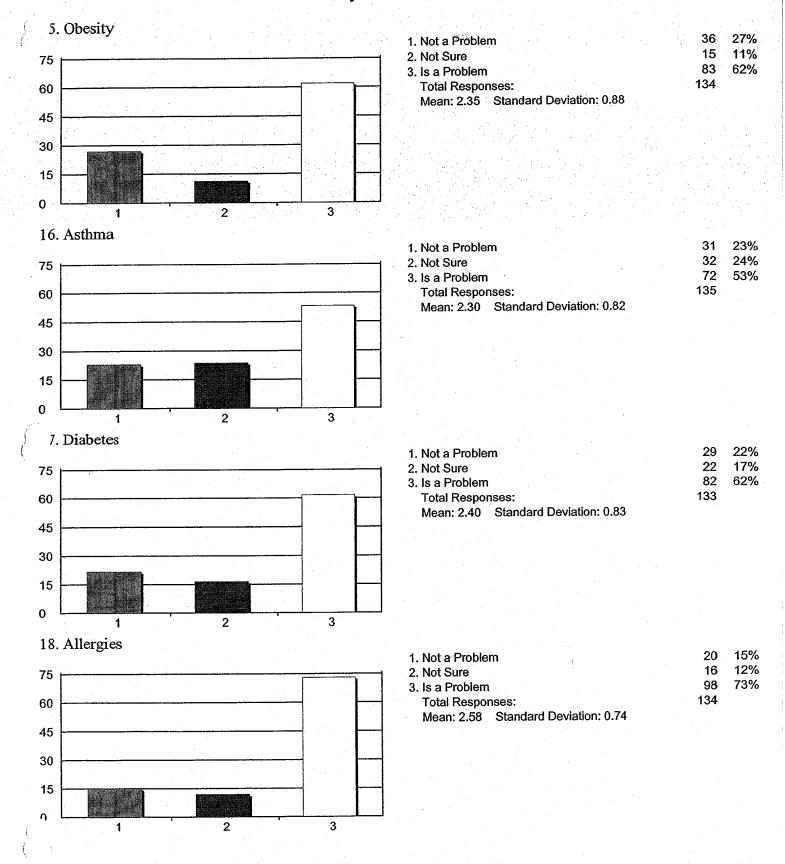
1. Not a Problem	36	27%
2. Not Sure	36	27%
3. Is a Problem	61	46%
Total Responses:	133	

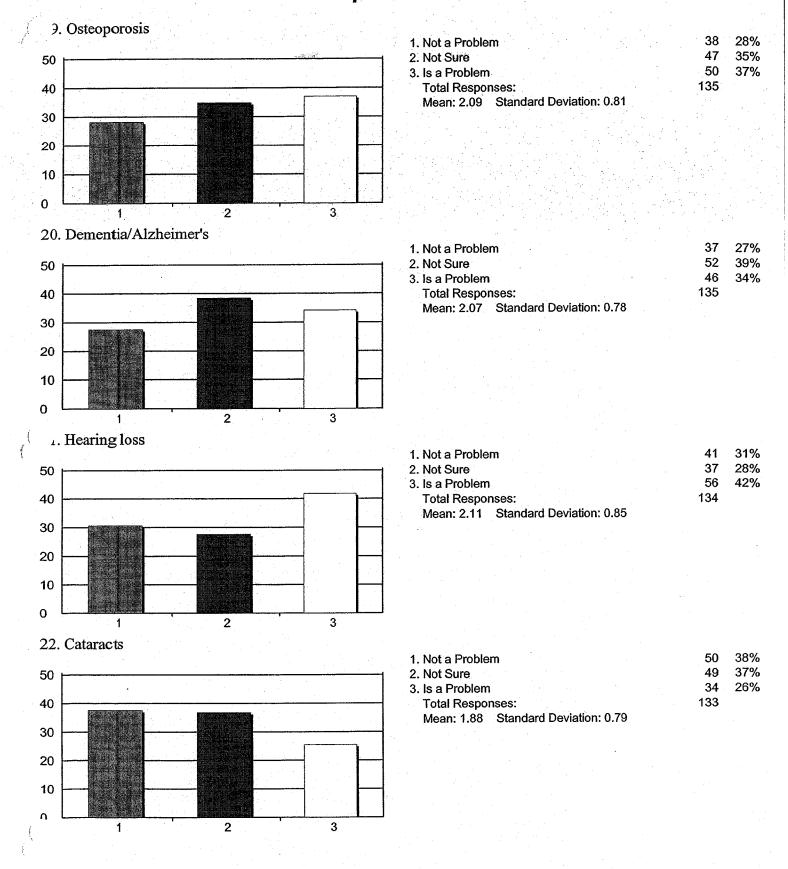
Mean: 2.19 Standard Deviation: 0.84

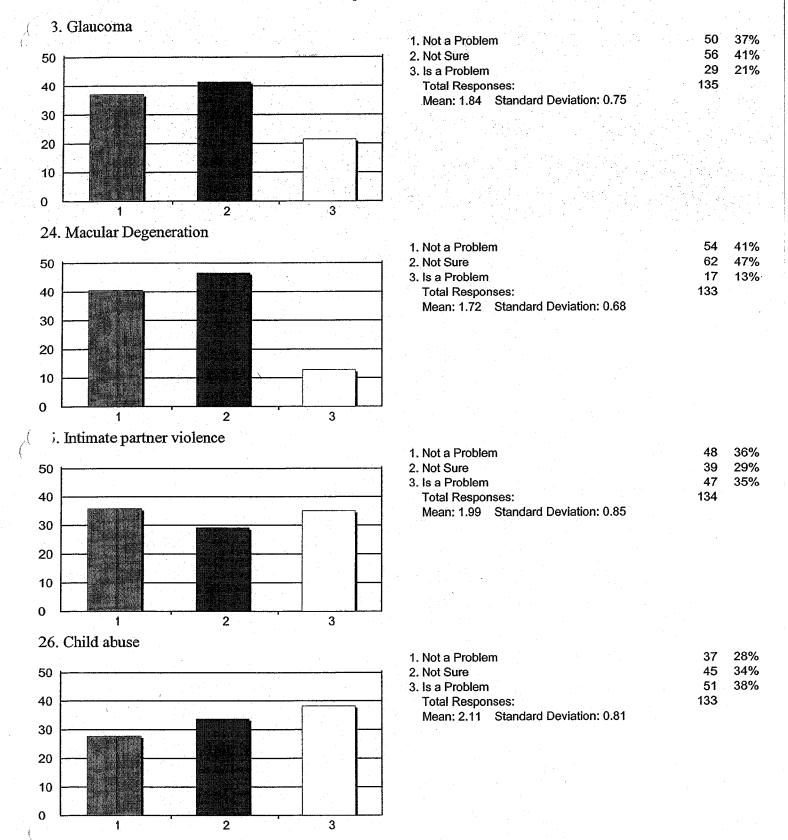




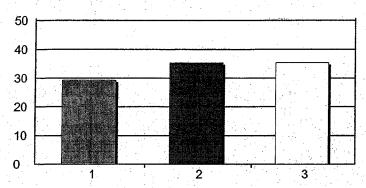


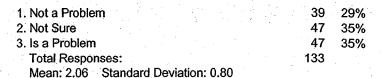




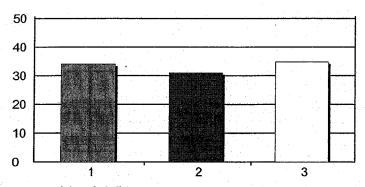


7. Motor vehicle accidents



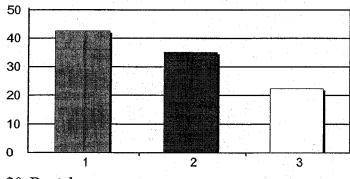


28. Falls or fall-related injuries



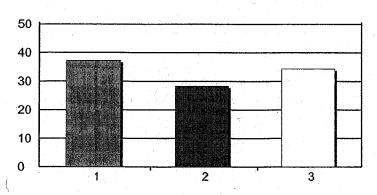
1. Not a Problem	45	34%
2. Not Sure	41	31%
3. Is a Problem	46	35%
Total Responses:	132	
Mean: 2.01 Standard Deviation: 0.83		

). Residential fires



1. Not a Problem	57	43%
2. Not Sure	47	35%
3. Is a Problem	30	22%
Total Responses:	134	
Mean: 1.80 Standard Deviation: 0.78		

30. Dental care

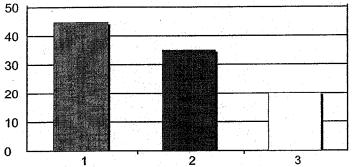


1. Not a Problem	50	37%
2. Not Sure	38	28%
3. Is a Problem	46	34%
Total Responses:	134	
Mean: 1.97 Standard Deviation: 0.85		

1. Leisure accidents 1. Not a Problem 36% 2. Not Sure 58 50 44% 3. Is a Problem 27 20% 40 Total Responses: 132 Mean: 1.85 Standard Deviation: 0.74 30 20 10 32. Infant deaths 1. Not a Problem 50 2. Not Sure 57 43% 3. Is a Problem 22 17% 40 Total Responses: 133 Mean: 1.76 Standard Deviation: 0.72 30 20 10 0 3. Teenage pregnancy 1. Not a Problem 23% 2. Not Sure 75 27 20% 3. Is a Problem 75 56% 60 Total Responses: 133 Mean: 2.33 Standard Deviation: 0.83 45 30 15 34. Access to adult daycare 1. Not a Problem 39% 50 2. Not Sure 36% 48 25% 3. Is a Problem 34 40 Total Responses: 135 Mean: 1.86 Standard Deviation: 0.79 30 20 10

5. Access to home health care 50 40 30 20 10 0 1 2 3 36. Access to home care (sitter service)



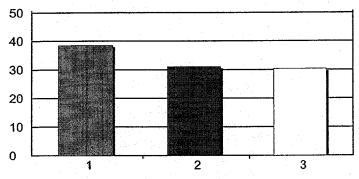


1. Not a Problem		60	45%
2. Not Sure		47	35%
3. Is a Problem		27	20%
Total Responses:		134	

Standard Deviation: 0.77

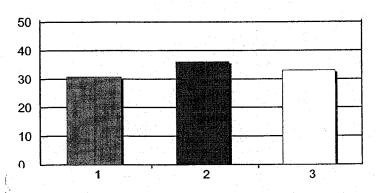
Mean: 1.75

7. Access to care for special needs children



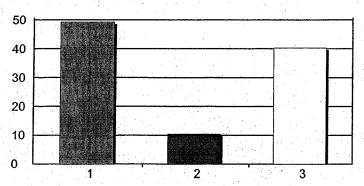
1. Not a Problem	52	39%
2. Not Sure	42	31%
3. Is a Problem	41	30%
Total Responses:	135	
Mean: 1.92 Standard Deviation: 0.83		

38. Lack of financial resources for medical care



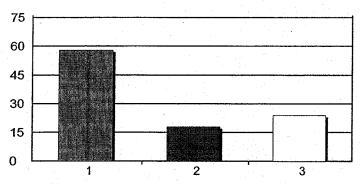
1. Not a Problem	41	31%
2. Not Sure	48	36%
3. Is a Problem	44	33%
Total Responses:	133	
Mean: 2.02 Standard Deviation: 0.80	•	

9. Access to healthy foods



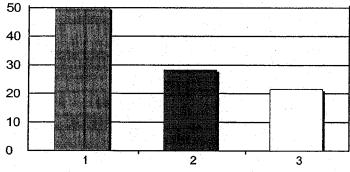


40. Access to leisure time physical activity



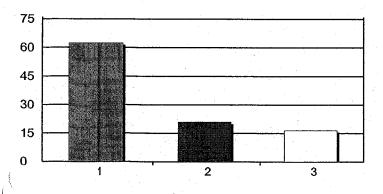
1. Not a Problem	77	58%
2. Not Sure	24	18%
3. Is a Problem	32	24%
Total Responses:	133	
Mean: 1.66 Standard Deviation: 0.84		

1. Access to transportation to health care

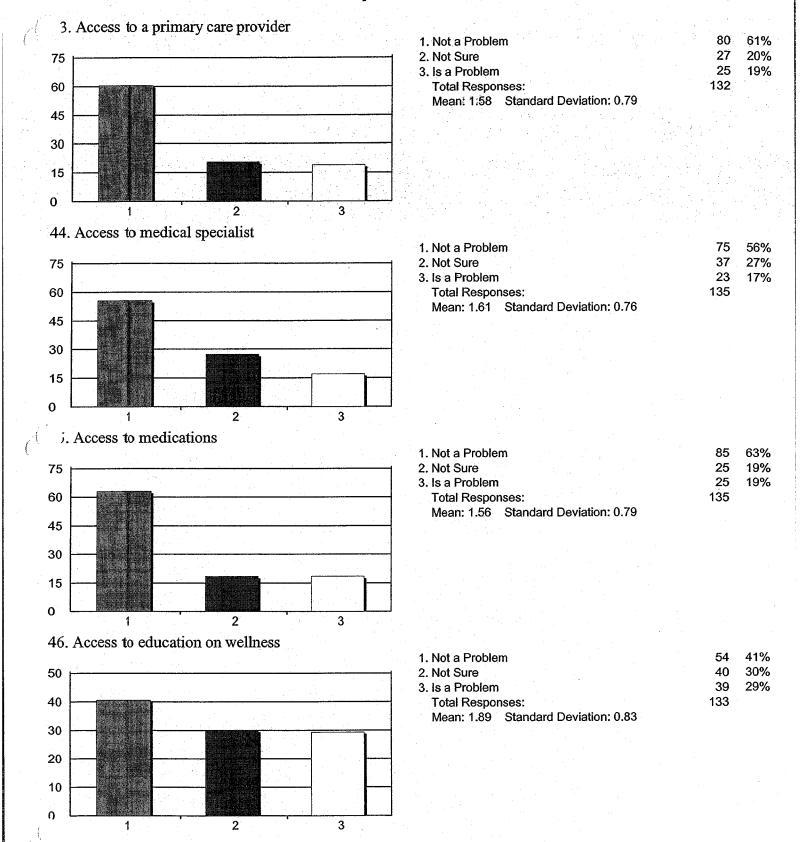


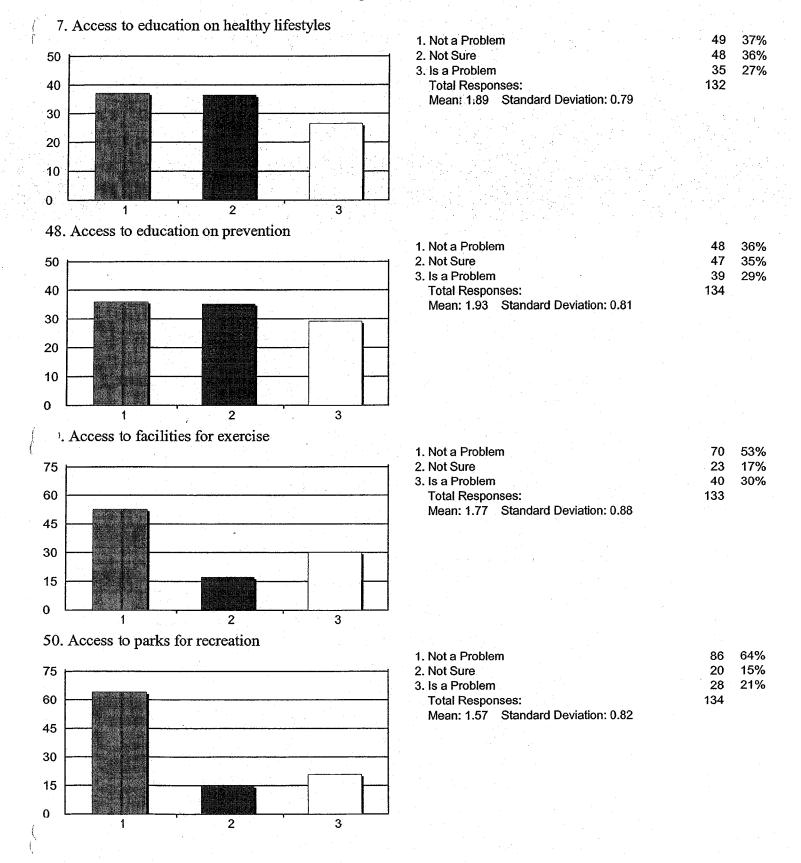


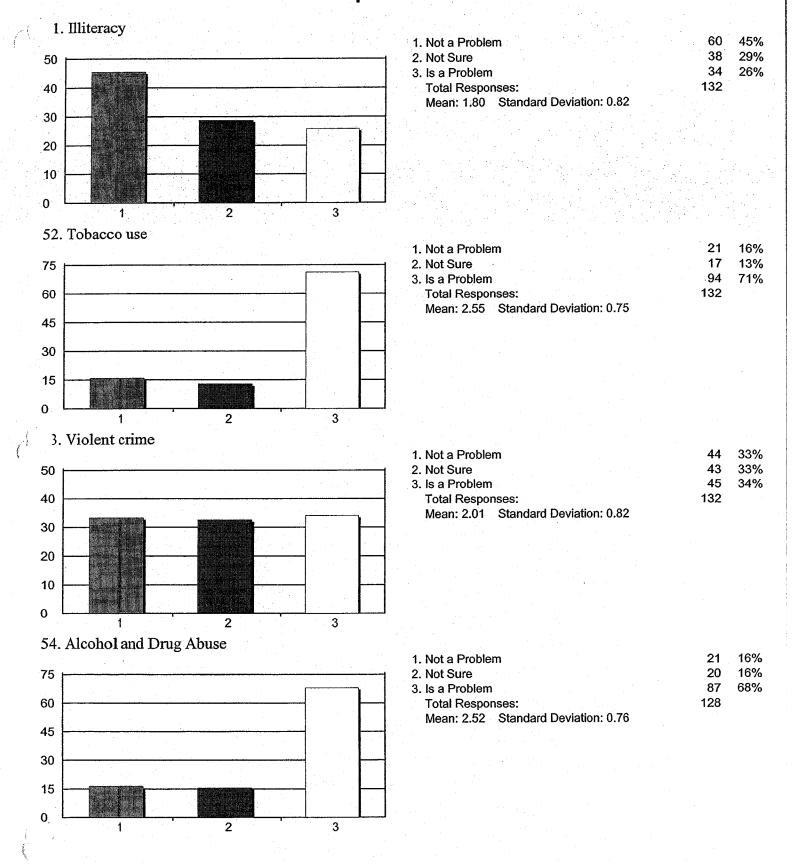
42. Access to nursing home care



1. Not a Problem	83	62%
2. Not Sure	28	21%
	20	21/0
3. Is a Problem	22	17%
Total Responses:	133	
Mean: 1.54 Standard Deviation: 0.76		



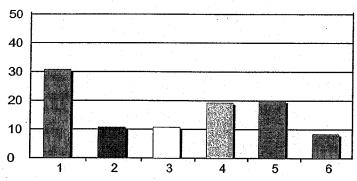




75. Do you consider yourself: 75 60 45 30 15

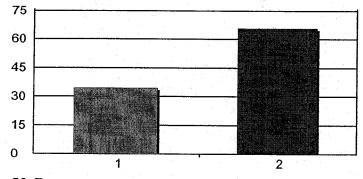
1. Overweight	52	39%
2. Underweight	8	6%
3. Obese	. 5	4%
4. Just Right	67	51%
Total Responses:	132	
Mean: 2 66 Standard Deviation: 1 43		

56. Age range:



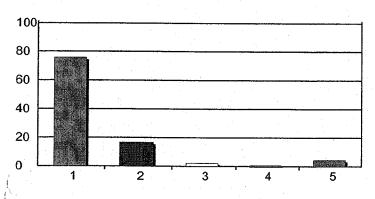
1. 18 - 24	40	31%
2. 25 - 34	14	
	14	11%
3. 35 - 44	14	11%
4. 45 - 54	25	19%
5. 55 - 64	26	20%
6. 65 +	11	8%
Total Responses:	130	
Mean: 3.12 Standard Deviation: 1.76		

7. Are you:



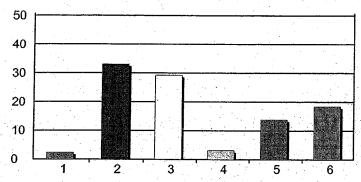
1. Male		44	34%
2. Female		84	66%
Total Respo	nses:	128	
Mean: 1.66	Standard Deviation: 0.48		

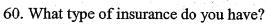
58. Race:

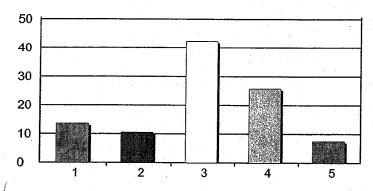


1. Caucasian	100	76%
2. African American	22	17%
3. Native American	3	2%
4. Asian/Pacific Islander	1	1%
5. Other	6	5%
Total Responses:	132	
Mean: 1.42 Standard Deviation: 0.94		

9. School:







1. Less than high school	3	2%
2. High school graduate/GED	43	33%
3. Some college	38	29%
4. Associate degree	4	3%
5. Bachelors degree	18	14%
6. Advanced degree	24	18%
Total Responses:	130	
Mean: 3.48 Standard Deviation: 1.57		

1. Medicare	18	14%
2. TennCare	14	11%
3. Private Insurance	56	42%
4. Other	34	26%
5. No Insurance	10	8%
Total Responses:	132	
Mean: 3.03 Standard Deviation: 1.10		

Attachment D

Setting Priorities for Health Status Improvement

nIon Method:

Opportunity=(A+2B)C

Size of Problem
Seriousness of Problem
Effectiveness of Interventions

A=Size

Usually defined by prevalence of a condition, characteristic, or disease in entire population (but can be among sub-groups)

Percent of population with health problem

25% +

10-24%

1-9%

0.1-0.9%

0.01-0.09%

<u>Score</u>

9-10

7 - 8

5 - 6

3 - 4

1 - 2

B=Seriousness

Isually defined by urgency to intervene, severity (leads death?), disproportionate among vulnerable opulations, and/or economic impact.

ow Serious	<u>Score</u>
ery Serious	9-10
erious	6 - 8
oderately Serious	3 - 5
ot Serious	0 - 2

C=Effectiveness of Available Interventions

Jsually defined by "best real world" expectations based on outcome evaluations of successful interventions in similar communities including: effectiveness and efficiency (in light of available resources)

đ	Para Para	ं स्री			
ı	TTA	CTI	MA	na	CC
1		VII	VU		JJ

/ery Effective (80%+)

Relatively Effective (60-79%)

Effective (40-59%)

Inderately Effective (20-39%)

'elatively Ineffective (<20%)

<u>Score</u>

10

8 - 9

6 - 7

4-5

0 - 3

I PATTE THE WAY IN THE WORLD

S 6 - V

27 - 2

(n)

Attachment E

Chester County Community Health Assessment Prioritization of Health Issues Size of Health Issues

Heart Co	ondition	
Deaths fi	rom Diseases of the Heart	
	<u>Chester</u>	<u>TN</u>
2007	352.1	233.2
2008	300.1	238.2
2009	248.7	228.0

Heart disease is the leading cause of death and a major cause of disability nationally.

Source: Department of Health

High Blood Pressure

Tennessee Behavioral Risk Factor Surveillance Survey

Have you ever been told that you had high blood pressure?

	Southwest IN	<u>TN</u>
2005	35.6	30.2
2007	30.2	higher
2009	36.4	32.6

Are you taking blood pressure medication?

	Southwest TN	TN
2005	91.3	83.4
2007	89.0	84.0
2009	83.3	81.8

Deaths from Cerebrovascular Disease Per 100,000

İ	<u>Chester</u>	<u>TN</u>
2007	61.8	56.3
2008	67.4	56.3
2009	48.5	50.6

The mortality rate for high blood pressure rose by 12% over the last ten years in TN. Inpatient charges for high blood pressure were \$136.2 million in 2006 statewide.

Source: Tennessee Department of Health

<u>Cancer</u>

Deaths from Malignant Neoplasms Per 100,000

	<u>Chester</u>	<u>TN</u>
2007	234.7	215.3
2008	147.0	213.3
2009	206.3	216.2

One of four deaths in America is cancer related.

In years 2003-2007, cancer affected 143,657 individuals in Tennessee.

Source: Tennessee Department of Health

Arthritis

Tennessee Behavioral Risk Factor Surveillance Survey

During the Past 30 Days Have You Had Any Pain, Aching, or Stiffness in the Joint?

	•	Southwest TN	<u>TN</u>
2005		48.3%	45.2%
2007		47.2%	44.7%

Have You Ever Been Told By a Health Professional That You Had Some Form of Arthritis?

	Southwest TN	<u>TN</u>
2005	33.6%	29.7%
2007	40.4%	34.0%
2009	27.7%	25.9%

Are You Limited Because of Arthritis or Joint Symptoms?

	Southwest TN	<u>TN</u>
2005	40.0%	37.7%
2007	40.7%	39.5%

Source: Tennessee Department of Health

Arthritis affects 1 in 3 adults in TN

Arthritis affects 1 in 2 adults over 65

Juvenile rheumatoid arthritis is one of the most common chronic diseases in children

Approximately 294,000 children under the age of 18 are affected by pediatric arthritis or rheumatologic conditions

Arthritis is the most common cause of a disability

Source: Tennessee Department of Health; Centers for Disease Control and Prevention

Obesity

30.2 percent of adults in Tennessee are considered obese- 4th highest state in US 36.5 percent of children are obese and overweight- 5th highest state in US

Tennessee Behavior Risk Factor Surveillance Survey

Adults Who Have a Body Mass Index Greater than 25 (Overweight or Obese)

	<u>Southwest TN</u>	<u>TN</u>
2007	75.3%	67.4%
2008	70.5%	68.0%
2009	69.9%	69.0%

Adult Obesity

Adults Who Have a Body Mass Index Greater Than 30

	Chester		TN
2011	33%		31%

Source: County Health Rankings

Asthma

Have you been told by a doctor, nurse, or other health professional that you had asthma?

	<u>Southwest T</u>	<u>N</u>	<u>TN</u>
2008	9.4		12.6
2009	10.9		11.9
2010	8.7		9.3

Each year, nationwide, asthma accounts for more than 10 million outpatient visits and 500,000 hospitalizations.

Asthma is the third-ranking cause of hospitalization of children.

The annual cost of asthma is estimated to be nearly \$18 billion.

Source: Asthma and Allergy Foundation

Diabetes

Tennessee Behavioral Risk Factor Surveillance Survey

Have you ever been told by a doctor that you had diabetes?

	Southwest TN	<u>TN</u>
2007	12.1	11.9
2008	11.1	10.4
2009	11.3	10.3

Deaths from Diabetes Per 100,000

	<u>Chester</u>	<u>TN</u>
2007	37.1	27.8
2008	67.4	28.2
2009	48.5	28.2
Source: Tennessee Depart	tment of Health	

Allergies

1 in 5 people suffer from allergies.

It is the 5th leading chronic disease in the US for all ages, races, and sexes. It is the 3rd most common chronic disease in those under 18.

Allergies account for 17 million outpatient visits a year nationally.

The annual cost of allergies is \$7 billion. Source: Asthma and Allergy Foundation

Teenage Pregnancy

Live Births to Ages 10-14

	<u>Chester</u>	<u>TN</u>
2007		0.8
2008	3.8	0.8
2009		0.6

Live Births to Ages 15-17

•	<u>Chester</u>	TN
2007	23.7	27.8
2008	16.9	27.3
2009	27.1	24.0

Source: Tennessee Department of Health

Tobacco Use Alcohol and Drug Abuse

29.5% of child maltreatment investigations in Tennessee were driven by reported drug exposure.

Source: Tennessee Chapter of Children's Advocacy Center

33% report excessive drinking in Chester County.

Source: County Health Rankings

There were 31 alcohol related traffic crashes in 2007 in Chester County.

Source: Tennessee Highway Patrol

Tennessee Behavioral Risk Factor Surveillance Survey

Binge drinkers (males having five or more drinks and females having four or more drinks on one occasion)

	Southwest TN	<u>TN</u>
2007	4.7	higher
2008	12.7	10.5
2009	8.5	6.8

26.7% adults reported being current smokers in Tennessee in 2005 which is above the national average. Children are twice as likely to be influenced by cigarette marketing.

Tennessee ranks 46th for prevalence of adult smokers and 47th among states for minors between 12-17. Cigarette smoking accounts for one third of cancer deaths.

87% of all lung cancer deaths are caused by smoking.

3,000 secondhand smoke deaths occur each year nationally.

\$406.3 million is spent on health care expenditures in Tennessee related to tobacco use on average.

Source: Tennessee Department of Health; Centers for Disease Control and Prevention

Chester County Community Health Assessment Prioritization of Health Issues Effectiveness of Interventions

The following is a list of community resources for each health issue identified by the community committee. The list contains community agencies and public entities that specifically work with a particular health issue as well as potential agencies that can become partners with Chester County Community Hospital for specific health issues.

Heart Condition

American Heart Association
Physician Clinics
Local churches
Community Senior Centers
American Association of Retired Persons

High Blood Pressure

American Heart Association American Stroke Association Physician Clinics Community Senior Centers

Cancer

American Cancer Society
Physician Clinics
Local Churches
Community Senior Centers
American Association of Retired Persons

Arthritis

Arthritis Foundation
Physician Clinics
Local Fitness Centers
American Association of Retired Persons
Community Senior Centers

Obesity

American Heart Association
American Diabetes Association
American Stroke Association
Physician Clinics
Community Senior Centers
Chester County School System
Chickasaw State Park
Local Health and Fitness Clubs
Local Churches
Afterschool Programs
Local Retirement and Nursing Homes

Asthma

Asthma and Allergy Foundation Physician Clinics Chester County School System Diabetes

Allergies

Asthma and Allergy Foundation Physician Clinics Local Pharmacists

Teenage Pregnancy

Chester County Health Department
Chester County School System
Tennessee Department of Children's Services
Hardeman County Juvenile Court
Exchange Club Carl Perkins
Local Churches
Afterschool Programs

Tobacco Use Alcohol and Drug Abuse

American Cancer Society
Physician Clinics
Chester County School System
City and County Government
Chester County Sheriff
Henderson Police Department
Chester County Circuit Court
Tennessee Department of Correction
Alcoholics Anonymous/Al-Anon
Quinco Chester County Center

Attachment F

Chester County Community Health Assessment Prioritization of Health Issues Effectiveness of Interventions

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Arthritis

Arthritis Foundation
Physician Clinics
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American Association of Retired Persons
Community Senior Centers

Obesity

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American Diabetes Association
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Physician Clinics
Community Senior Centers
Chester County School System
Chickasaw State Park
Local Health and Fitness Clubs
Local Churches
Afterschool Programs
Local Retirement and Nursing Homes

<u>Asthma</u>

Asthma and Allergy Foundation Physician Clinics Chester County School System Diabetes

Allergies

Asthma and Allergy Foundation Physician Clinics Local Pharmacists

Teenage Pregnancy

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