Community Health Needs Assessment (CHNA): Gibson County

Conducted by:
Jackson-Madison County General Hospital
Department of Business Development and Planning
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For:
Gibson General Hospital
Humboldt General Hospital
Milan General Hospital

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

Community Health Needs Assessments

- 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.

Community Health Needs Assessments

- 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

Community Health Needs Assessments

▸ 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 Health Needs Assessments

- 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

Community Health Needs Assessments

- 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
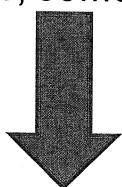
Community Health Needs Assessments

	Identified Health issues By County					
	Benton	Chester	Crockett	Gibson	Hardeman	Madison
	X	X	X	X	X	X
Heart Conditions	X	X	X	X	X	X
High Blood Pressure	X	X		X	X	X
Cancer	X	X	X	X	X	X
Obesity	X	X	X	X	X	X
Diabetes	X	X	X	X	X	X
Tobacco Use/Alcohol/Drug Use			X			

Community Health Needs Assessments

- ▶ 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

Gibson County Community Health Needs Assessment
Executive Summary

Under the leadership of Milan General Hospital, Humboldt General Hospital, and Gibson General Hospital a community health needs assessment of Gibson 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 Gibson County community. Community input was also considered from a diverse group of community representatives. Gibson County needs were prioritized by a team of Hospital staff using a mathematical algorithm called the Hanlon Method.

Community input on the perception of health issues facing the area was accomplished through a survey administered throughout the Gibson County community. A total of 387 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:

Heart Conditions	High Blood Pressure	Cancer
Obesity	Asthma	Diabetes
Dementia/Alzheimer's	Arthritis	Allergies

Further research was 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. Gibson 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 Gibson County Health Department, the Gibson County School Systems, 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**	
Obesity	**Diabetes**	**Cancer**

Gibson General Hospital, Humboldt General Hospital, and Milan General Hospital have developed implementation strategies to address the five health issues identified through the community health needs assessment. The strategies emphasize preventive screenings, education, and collaboration with other community agencies. The hospitals in Gibson County are addressing heart conditions and high blood pressure using a threefold approach. First, the three hospitals, offer screening blood pressure screenings throughout the county at local events and health fairs. Blood pressure screenings are offered at industry health fairs, church health fairs, non-profit community agency health fairs, school health fairs, and community events such as the TeaPot Festival, Healthy Kids Day at the YMCA, and in-service days for the local school system. Second, the three hospitals all offer free blood pressure checks at their emergency rooms 24 hours a day/7 days a week free of charge. The free availability at any time of day or night of blood pressure screenings supervised by a health professional in a hospital setting is a major preventive strategy. Third, the three hospitals in Gibson County have also collaborated with the Jackson-Madison County General Hospital for a strategy to address has developed a strategy for addressing heart conditions and high blood pressure that focuses on early detection, risk assessment screening, consultation, referral to physician or healthcare professional, and development of an individualized program plan. This strategy is called HealthAware. The three hospitals in Gibson County conduct various cancer screenings throughout the community during the year. Breast cancer screenings are offered during the month of October. Prostate and skin cancer screenings are offered throughout the year at various community locations. Milan General Hospital is collaborating with the ACHIEVE Program of the Milan YMCA. The ACHIEVE program is a collaborative model that brings together community agencies to work together is define a healthier community. A two hour diabetic education class is offered on a rotating basis at Gibson General Hospital, Humboldt General Hospital, and Milan General Hospital.

Introduction

Under the leadership of Milan General Hospital, Humboldt General Hospital, and Gibson General Hospital a community health needs assessment of Gibson 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 Gibson County community. Community input was also considered from a diverse group of community representatives. Gibson County needs were prioritized by a team of Hospital staff 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

Gibson County, Tennessee has three hospitals all owned by the Jackson-Madison County General Hospital District. All three hospitals are members of the American Hospital Association, the Tennessee Hospital Association, and are accredited by The Joint Commission. All three hospitals also have been approved by the U.S. Department of Health and Human Services for participation in Medicare and Medicaid Programs. The service area for all three hospitals in Gibson, County, Tennessee.

Licensed for 77 acute care beds, Gibson General Hospital was purchased by the Jackson-Madison County General Hospital District in October 1994. The Hospital provides inpatient and outpatient services, emergency services 24 hours a day/7 days a week, an accredited laboratory that operates 24 hours a day, general medicine services, pharmacy, physical therapy, general surgery, radiology (computerized axial tomography, mammography, ultrasound, and diagnostic X-ray), internal medicine, and respiratory care and 10 swing beds. Gibson General Hospital is located in Trenton, Tennessee.

Humboldt General Hospital became part of the Jackson-Madison County General Hospital District in October 1989. Licensed for 62 beds, Humboldt General Hospital provides medical/surgical services, a recently renovated emergency department that is open 24 hours a day/7 days a week, respiratory care, physical therapy, radiology (computerized axial tomography, mammography, ultrasound, nuclear medicine, and diagnostic X-ray), pathology, laboratory, blood bank, social work services, and other ancillary services and 10 swing beds. The Hospital is located in Humboldt, Tennessee.

Milan General Hospital is licensed for 70 acute beds and was acquired by the Jackson-Madison County General Hospital District in 1997. Located in Milan, Tennessee, the Hospital provides general medical, outpatient rehabilitation services, general surgery, internal medicine, a medical/surgical nursing unit, a critical care unit, pathology and laboratory department, radiology (computerized axial tomography, mammography, ultrasound, and diagnostic X-ray), 24 hour/7 days a week emergency services, and social services and 12 swing beds.

The designated "community" for the needs assessment is Gibson County, Tennessee. With a 2010 population of 48,586, Gibson County is located in the rural Northwest Tennessee approximately 99 miles East of Memphis and 154 miles West of Nashville. The population is 79 percent Caucasian, 19 percent African American, and 2 percent Other races. According to the American Community Survey (2005-2009), 19 percent of the population is below the Federal poverty level. The per capita personal income level is $20,005. The population under 65 years of age represents 83 percent while the over age 65 population is 17 percent of the total. About 22 percent of the population age 25 and older does not have a high school diploma or GED; 38 percent have a high school diploma; 25 percent have some college, and 15 percent have a Bachelor's degree or higher.

Gibson County has a wide range of industries that employ individuals living in and around the county. Gibson County is home to manufacturers such as: Kiesel Enterprises Inc., Consolidated Grain and Barge, Redco, Smith Farms, Wolff Farms, All-Weather Products, Federal Assembly, Gibson County Coal, Gibson Co. Warehousing, Hansen Corporation, Heritage Custom Fabrication, Highway Machine Company, Inc, Holzmeyer Die & Mold, Hurst Manufacturing, Industrial Concepts, Industrial Contractors, Midstates, Midwest Mechanical Services, Millenium Steel, Mission Manufacturing, Orion America, Peabody Energy, Riley Equipment Co., TMMI, Toyota Logistics, Toyota Tsusho, Toyota Boshuku America, and Vuteq.

The community has two colleges and universities: Bethel College (this is located in McKenzie) and Dyersburg State Community College.

The county seat of Gibson County is Trenton, Tennessee. The county has five special school districts: Humboldt City Schools (1,193 students), Milan City Schools (2,087 students), Trenton Special School District (1,337 students), Gibson County Schools (3,586 students), and Bradford Special School District (543 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 Gibson County, Tennessee with an emphasis on preventive measures. The community health needs assessment of Gibson 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 Milan General Hospital, Humboldt General Hospital, Gibson General Hospital, non-profit organizations, and the community at large to assess, improve, and promote the community health of Gibson 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 Gibson 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 Gibson 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 an internal committee of hospital staff to organize the process, facilitate data collection, review and analyze the results. Members of Milan General Hospital, Humboldt General Hospital, and Gibson General Hospital staff committee were:

Sherry Scruggs   Gibson General Hospital Administrator

John Carruth   Humboldt General Hospital Assistant Administrator & Director of Nursing

Linda Wheelock   Milan General Hospital Director of Nursing

Hospital staff committee 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 Gibson 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 the Hospital Administrators of Milan General Hospital, Humboldt General Hospital, and Gibson General Hospital on January 10, 2011. A copy of this letter is included in Attachment A. Members of the committee represented a broad range of community interests in Gibson County. Members of the community committee were:

Mayor Chris Crider, City of Milan
Julianne Hart, City Recorder
Tim Wright, City of Milan Police Chief
Chief Chad Lowery, Medina Police
Karen Welch, BST Instructor
Steve Maloan, South Gibson County Middle School
Cheri Childress, City of Milan
Rex Tatum, Retired
Dr. Gina Dieudonne, Rainbow Pediatric Clinic
Chief Chester Owens, City of Milan Fire Department
Janeice Frisbee, Bancorp South

Steve Bayko, Department of Education
Major Allen Barker, City of Humboldt
Dr. Keith Kirby, Jackson Clinic
Ann Elliott, Gibson Health Department
Doug Lockard, Trenton Housing Authority
Pam Dethloff, Bradford Senior Citizen Center
Harry Adcock, Patterson Center
Tim McBride, Tennessee Department of Human Services
Kellie Carroll, Gibson Special School District
Dana Garner, Bradford Special School District
Lisa Phillips, Trenton Special School District
Peggy Davis, Trenton Adult Education/GED
Julie Griggs, Dyersburg State Community College
Rita Alexander, Gibson Electric Membership
Mayor Tony Burris, City Government
Allison Horner, Gibson Utility Gas District

Membership on the community committee included Ann Elliott, Health Educator for the Gibson County Health Department. Mrs. Elliott 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 January 10, 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 Gibson 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 Gibson County community. Attachment B contains a copy of the survey instrument. The survey was distributed at the following locations on June 15, 2011.

Locations
BancorpSouth Banks
Bradford Senior Citizen Center
Gibson Electric Company
Milan General Hospital
Gibson General Hospital
Humboldt General Hospital
Exchange Club Meeting
Patterson Training Center
Local Churches
Health Fair

Schools

A total of 387 completed surveys were returned by September 1, 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 March 17, 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
Breast Cancer
Obesity
Diabetes
Teenage Pregnancy
Tobacco Use

High Blood Pressure
Arthritis
Asthma
Allergies
Lack of financial resources for medical care
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:

Heart Condition
Asthma
Arthritis
Allergies
Dementia/Alzheimers

High Blood Pressure
Cancer
Obesity
Diabetes

The internal hospital staff committee was reconvened on September 1, 2011 to prioritize the list of nine 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:

How serious	Score
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 Milan General Hospital, Humboldt General Hospital, and Gibson 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:

Effectiveness	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 nine 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 nine identified health issues. Consistent and common resources identified for each health issue in Attachment F include the Gibson County Health Department, the Gibson 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 1 contains the Hanlon Method scoring for each identified health issue.

Table `
Hanlon Method Scoring Results

Issue	A= Size	B= Seriousness	C= Effectiveness	Total (A+2B)C
Heart Condition	8	8	8	192
High Blood Pressure	9	9	8	216
Asthma	4	3	2	20
Cancer	8	8	6	144
Arthritis	8	2	2	64
Obesity	10	10	9	270
Allergies	9	2	2	26
Diabetes	9	9	6	162
Dementia/Alzheimers	8	2	2	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 nine identified by the community committee. The five priority health issues:

Heart Conditions

High Blood Pressure

Cancer

Obesity

Diabetes

Implementation Strategies

Gibson General Hospital, Humboldt General Hospital, and Milan General Hospital have developed implementation strategies to address the five health issues identified through the community health needs assessment. The strategies emphasize preventive screenings, education, and collaboration with other community agencies.

Heart Conditions and High Blood Pressure

The hospitals in Gibson County are addressing heart conditions and high blood pressure using a threefold approach. First, the three hospitals, offer screening blood pressure screenings throughout the county at local events and health fairs. Blood pressure screenings are offered at industry health fairs, church health fairs, non-profit community agency health fairs, school health fairs, and community events such as the TeaPot Festival, Healthy Kids Day at the YMCA, and in-service days for the local school system. Second, the three hospitals all offer free blood pressure checks at their emergency rooms 24 hours a day/7 days a week free of charge. The free availability at any time of day or night of blood pressure screenings supervised by a health professional in a hospital setting is a major preventive strategy.

Third, the three hospitals in Gibson County have also collaborated with the Jackson-Madison County General Hospital for a strategy to address has developed a strategy for addressing heart conditions and high blood pressure that focuses on early detection, risk assessment screening, consultation, referral to physician or healthcare professional, and development of an individualized program plan. This strategy is called HealthAware.

HealthAware creates a transformational experience that compels unknowing victims of heart disease or hypertension to change behavior and commit to extend their health and lives. Participation in HealthAware is a five phase experience:

1. Outreach & Marketing
2. High-risk Patient Enrollment
3. Nurse Consultation
4. Triage
5. Intervention

HealthAware assesses the public, individual by individual, making them conscious of their risk for heart disease or hypertension. From the assessment a determination is made on the need to engage the participant's primary care physician. Goals are set to modify controllable risks. HealthAware provides an opportunity to treat the disease (as an episode) before an uncontrolled, catastrophic event occurs. Through HealthAwares, Gibson General Hospital, Humboldt General Hospital, and Milan General Hospital in collaboration with Jackson-Madison

County General Hospital are resources for wellness not just sickness. Figure 1 contains an example of a personalized risk assessment report from the HeartAware Program.   As shown in Figure 1, the risk assessment indicates the low, medium, high, or critical rating for cardiac risk factors of smoking, weight, blood pressure, cholesterol, diabetes, and family history. After the risk assessment is completed, the risk assessment report is generated. When risk is determined through the assessment, lab work and a nurse consultation is scheduled. Figure 2 contains a page from the consultation report reviewed by the nurse.

Figure 1

Risk Assessment Report
(Available to <u>everyone</u> that takes the online assessment)

Figure 2

The Tennessee Heart and Vascular Center at Jackson-Madison County General Hospital has developed proactive assessment processes for identifying individuals in the community at risk of heart disease and stroke. Gibson General Hospital, Humboldt General Hospital, and Milan General Hospital have worked with Jackson-Madison County General Hospital to implement this proactive assessment process in Gibson County. HeartAware and StrokeAware are free online or paper risk assessments that can be completed by an individual either through the West Tennessee Healthcare website, www.wth.org, or at a community event or health fair. Completing HeartAware or StrokeAware takes five to seven minutes. Persons age 34 or younger who present with four risk factors and persons over the age of 35 who present with two risk factors are eligible for free lab work including glucose and cholesterol blood tests and a one hour consultation with a registered nurse. Risk factors include age, gender, presence of diabetes, weight, physical activity, presence of high blood pressure, cholesterol, family history and tobacco use. A free personalized risk factor profile is created for each person completing the risk assessment.

During the free follow-up consultation with a registered nurse, lab test results are reviewed with the individual. Height, weight, blood pressure, waist circumference, and body mass index

are taken. The Clinical Information Management System (CIMS) program is utilized, which includes demographics, medical history with an emphasis on cardiovascular data, family history, and lifestyle information. Symptoms, past and present, are addressed. When a patient presents with particular vascular concerns, an Ankle Brachial Index (ABI) doppler assessment may be performed.

A Consultation Record Report is made by the nurse that includes a discussion of alternatives, medical information, and lifestyle choices for an individualized plan of intervention. Education consists of setting goals with the individual and encouraging further discussion with a primary care physician. When no existing relationship is available, individuals are provided information on clinics, health providers, and the public health department; although no certain individual or group is recommended. Further educational components include verbal instruction, written materials, online resources, and open discussion. Most appointments last one hour. The patient receives the contact number for the Aware office. A follow-up call is made close to one month past the appointment to assess progress towards specific goals.

HeartAware and StrokeAware are utilized extensively at health fairs, church events, in conjunction with the Mature Advantage Club, and events throughout Gibson County. Industry, employee wellness, and physician offices are also sites for conducting these risk assessments. Attachment G contains complete examples of personalized risk profiles and lab results for HeartAware and StrokeAware.

The Tennessee Heart and Vascular Center provides numerous blood pressure checks and access to HeartAware throughout the community especially during Heart Month each February.

Cancer

The three hospitals in Gibson County conduct various cancer screenings throughout the community during the year. Breast cancer screenings are offered during the month of October. Prostate and skin cancer screenings are offered throughout the year at various community locations.

Obesity

Milan General Hospital is collaborating with the ACHIEVE Program of the Milan YMCA. The ACHIEVE program is a collaborative model that brings together community agencies to work together is define a healthier community.

Diabetes

A two hour diabetic education class is offered on a rotating basis at Gibson General Hospital, Humboldt General Hospital, and Milan General Hospital.

Conclusion

The Gibson 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 Gibson County Community Health Needs Assessment was approved on this date. The Plan will be updated every three years.

West Tennessee Healthcare™

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MEMORANDUM

DATE: January 10, 2011

TO: Dr. Keith Kirby

FROM: John Carruth, Milan General Hospital
             Bill Kail, Humboldt General Hospital
             Sherry Scruggs, Gibson General Hospital

RE: Gibson County Community Health Assessment Community Committee

For many years, Milan General Hospital, Humboldt General Hospital, and Gibson General Hospital have served the residents of Gibson County. Over this period of time and especially in recent years, our hospitals 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 our hospitals have conducted needs assessments 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 are required to conduct community needs assessments every three years.

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

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

We ask you to attend the first introductory meeting of the Community Committee. The meeting will be held on Monday, February 7, 2011 at Humboldt General Hospital. The meeting will begin at 11:30 a.m. and will be concluded by 1:00 p.m. Lunch will be served.

Please contact Vicki Lake, Director of Market Research and Community Development of your attendance plans. She may be reached at 984-2160 or vicki.lake@wth.org. We appreciate your participation in this important process for Gibson County.

Gibson County
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 Gibson County do you live?

- ○ Medina
- ○ Yorkville
- ○ Bradford
- ○ Idlewild
- ○ Milan
- ○ Rutherford
- ○ Humboldt
- ○ Trenton
- ○ Dyer
- ○ Gibson
- ○ Kenton

The following is a list of problems experienced by many communities. Please indicate how much of a problem you feel each of these is for the West Tennessee area, including Gibson County. Indicate your choice as not a problem, not sure, or is a problem.

Communicable Diseases

Response Definition: 1=Not a Problem 2=Not Sure 3=Is a Problem

	1	2	3
1. Tuberculosis (TB)	☐	☐	☐
2. Influenza (Flu)	☐	☐	☐
3. Sexually Transmitted Diseases	☐	☐	☐
4. HIV/AIDS	☐	☐	☐
Hepatitis C	☐	☐	☐

Chronic Health Problems

	1	2	3
6. Emphysema (chronic obstructed pulmonary disease)	☐	☐	☐
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	☐	☐	☐
.. Hearing loss	☐	☐	☐
22. Cataracts	☐	☐	☐
23. Glaucoma	☐	☐	☐

24. Macular Degeneration ☐ ☐ ☐

Family Health Concerns

Response Definition: 1=Not a Problem   2=Not Sure   3=Is a Problem

	1	2	3
25. Intimate partner violence	☐	☐	☐
26. Child abuse	☐	☐	☐
27. Motor vehicle accidents	☐	☐	☐
28. Falls or fall-related injuries	☐	☐	☐
29. 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

	1	2	3
34. Access to adult daycare	☐	☐	☐
35. Access to home health care	☐	☐	☐
36. 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	☐	☐	☐

Gibson County
Community Health Assessment

Response Definition: 1=Not a Problem   2=Not Sure   3=Is a Problem

	1	2	3
51. Illiteracy	☐	☐	☐
52. Tobacco use	☐	☐	☐
53. Violent crime	☐	☐	☐
54. Alcohol and Drug Abuse	☐	☐	☐

55. Do you consider yourself:

☐ Overweight   ☐ Underweight   ☐ Obese   ☐ Just Right

56. Age range:

☐ 18 - 24   ☐ 25 - 34   ☐ 35 - 44   ☐ 45 - 54   ☐ 55 - 64   ☐ 65 +

57. Are you:

☐ Male   ☐ Female

58. Race:

☐ Caucasian   ☐ African American   ☐ Native American
☐ Asian/Pacific Islander   ☐ Other

59. School:

☐ Less than high school   ☐ High school graduate/GED   ☐ Some college
☐ Associate degree   ☐ Bachelors degree   ☐ Advanced degree

60. What type of insurance do you have?

☐ Medicare   ☐ TennCare   ☐ Private Insurance   ☐ Other   ☐ No Insurance

Comments

GIBSON COMMUNITY HEALTH ASSESSMENT SURVEY RESULTS

Bancorp Banks, Gibson Senior Citizen, Gibson Electric, Gibson, Milan, and Humbold Hospital Staff,
School Faculty/Staff, Exchange Club, Patterson Training Center, Health Fair

	N=	387
What area of Gibson County do you live?		
Medina	17	5%
Yorkville	5	1%
Bradford	29	8%
Idlewild	1	0%
Milan	107	30%
Rutherford	10	3%
Humboldt	47	13%
Trenton	113	31%
Dyer	11	3%
Gibson	12	3%
Kenton	9	2%

(How much of a problem do you feel the health issues listed below are for Gibson County.

COMMUNICABLE DISEASE		
Tuberculosis		
Not a problem	212	56%
Not sure	148	39%
Is a problem	16	4%
Influenza (flu)		
Not a problem	86	23%
Not sure	109	29%
Is a problem	184	49%
Sexually Transmitted Diseass		
Not a problem	66	17%
Not sure	155	41%
Is a problem	157	42%
HIV/AIDS		
Not a problem	89	24%
Not sure	229	61%
Is a problem	60	16%
Hepatitis C		
Not a problem	92	24%
Not sure	235	62%
Is a problem	49	13%
CHRONIC HEALTH PROBLEMS		
Emphysema		
Not a problem	74	20%
Not sure	173	46%
Is a problem	130	34%
**Heart Conditions		
Not a problem	49	13%
Not sure	77	20%
Is a problem	257	67%
**High Blood Pressure		
Not a problem	34	9%
Not sure	57	15%
Is a problem	290	76%

Skin Cancer

Not a problem	65	17%
Not sure	178	47%
Is a problem	134	36%

Colon Cancer

Not a problem	64	17%
Not sure	172	45%
Is a problem	148	38%

Lung Cancer

Not a problem	67	18%
Not sure	147	39%
Is a problem	167	44%

**Breast Cancer

Not a problem	61	16%
Not sure	102	27%
Is a problem	215	57%

Prostate Cancer

Not a problem	62	16%
Not sure	145	38%
Is a problem	172	45%

**Arthritis

Not a problem	40	11%
Not sure	81	21%
Is a problem	259	68%

**Obesity

Not a problem	41	11%
Not sure	52	14%
Is a problem	290	76%

**Asthma

Not a problem	55	15%
Not sure	112	30%
Is a problem	212	56%

**Diabetes

Not a problem	43	11%
Not sure	66	17%
Is a problem	271	71%

**Allergies

Not a problem	40	11%
Not sure	58	15%
Is a problem	282	74%

Osteoporosis

Not a problem	66	17%
Not sure	170	45%
Is a problem	142	38%

Dementia/Alzheimers

Not a problem	63	17%
Not sure	140	37%
Is a problem	177	47%

Hearing loss

Not a problem	71	19%
Not sure	180	47%
Is a problem	129	34%

Cataracts

Not a problem	65	17%
Not sure	196	52%
Is a problem	117	31%

Glaucoma

Not a problem	79	21%
Not sure	225	59%
Is a problem	75	20%

Macular Degeneration

Not a problem	23	16%
Not sure	106	73%
Is a problem	16	11%

FAMILY HEALTH CONCERNS

Intimate partner violence

Not a problem	65	17%
Not sure	179	47%
Is a problem	134	35%

Child abuse

Not a problem	67	18%
Not sure	136	36%
Is a problem	177	47%

Motor vehicle accidents

Not a problem	82	22%
Not sure	138	36%
Is a problem	159	42%

Falls or fall related injuries

Not a problem	75	20%
Not sure	187	49%
Is a problem	117	31%

Residential fires

Not a problem	116	31%
Not sure	192	51%
Is a problem	72	19%

Dental care

Not a problem	78	21%
Not sure	138	36%
Is a problem	164	43%

Leisure accidents

Not a problem	103	27%
Not sure	225	59%
Is a problem	52	14%

Infant deaths

Not a problem	106	28%
Not sure	220	58%
Is a problem	53	14%

****Teenage Pregnancy**

Not a problem	51	13%
Not sure	62	16%
Is a problem	268	70%

ACCESS TO HEALTH RESOURCES

Access to adult daycare

Not a problem	102	27%

Not sure	171	45%
Is a problem	108	28%
Access to home health care		
Not a problem	161	42%
Not sure	144	38%
Is a problem	75	20%
Access to home care (sitter service)		
Not a problem	115	30%
Not sure	170	45%
Is a problem	96	25%
Access to care for special needs children		
Not a problem	111	29%
Not sure	166	44%
Is a problem	101	27%
**Lack of financial resources for medical care		
Not a problem	56	15%
Not sure	113	30%
Is a problem	210	55%
Access to healthy foods		
Not a problem	152	40%
Not sure	94	25%
Is a problem	133	35%
Access to leisure time physical activity		
Not a problem	176	46%
Not sure	103	27%
Is a problem	101	27%
Access to transportation to health care		
Not a problem	135	36%
Not sure	158	42%
Is a problem	86	23%
Access to nursing home care		
Not a problem	169	45%
Not sure	150	40%
Is a problem	60	16%
Access to a primary care provider		
Not a problem	168	44%
Not sure	133	35%
Is a problem	77	20%
Access to medical specialist		
Not a problem	152	40%
Not sure	127	34%
Is a problem	97	26%
Access to medications		
Not a problem	183	48%
Not sure	93	25%
Is a problem	103	27%
Access to education on wellness		
Not a problem	158	42%
Not sure	126	33%
Is a problem	96	25%
Access to education on healthy lifestyles		

Not a problem	150	40%
Not sure	126	34%
Is a problem	100	27%
Access to education on prevention		
Not a problem	148	39%
Not sure	137	36%
Is a problem	93	25%
Access to facilities for exercise		
Not a problem	190	50%
Not sure	101	27%
Is a problem	86	23%
Access to parks and recreation		
Not a problem	246	65%
Not sure	85	22%
Is a problem	49	13%

COMMUNITY CONCERNS

Illiteracy		
Not a problem	68	18%
Not sure	139	38%
Is a problem	162	44%
**Tobacco use		
Not a problem	35	10%
Not sure	48	14%
Is a problem	266	76%
Violent Crimes		
Not a problem	64	18%
Not sure	138	40%
Is a problem	146	42%
**Alcohol and Drug Abuse		
Not a problem	30	9%
Not sure	41	12%
Is a problem	271	79%
Did you consider yourself :		
Overweigtht	189	54%
Underweight	7	2%
Obese	22	6%
Just Right	134	38%
Age range:		
18-24	14	4%
25-34	61	17%
35-44	84	24%
45-44	91	26%
55-64	72	21%
65+	27	8%
Are you:		
Male	96	28%
Female	250	72%
Race:		
Caucasian	285	78%
African American	66	18%
Native American	7	2%

Asian/Pacific Islander	1	0%
Other	6	2%
School		
Less than high school	48	13%
High school graduate/GED	64	17%
Some college	44	12%
Associate degree	27	7%
Bachelors degree	80	21%
Advanced degree	110	29%
What type of insurance do you have?		
Medicare	30	9%
Tenncare	16	5%
Private Insurance	218	63%
Other	64	18%
No Insurance	18	5%

Report Title
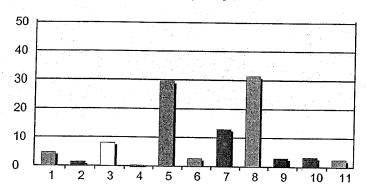
Gibson, Humbolt, and Milan General Hospitals/Gibson County Community Health Assessment
Creation Date: 11/21/2011
Time Interval: 5/27/2011 to 6/15/2011
Total Respondents: 387
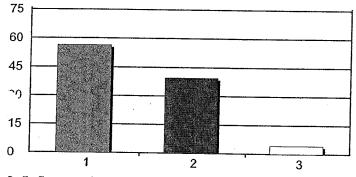
What area of Gibson County do you live?

1. Medina	17	5%
2. Yorkville	5	1%
3. Bradford	29	8%
4. Idlewild	1	0%
5. Milan	107	30%
6. Rutherford	10	3%
7. Humboldt	47	13%
8. Trenton	113	31%
9. Dyer	11	3%
10. Gibson	12	3%
11. Kenton	9	2%
Total Responses:	361	
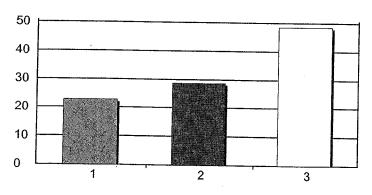
Mean: 6.27   Standard Deviation: 2.28

1. Tuberculosis (TB)

1. Not a Problem	212	56%
2. Not Sure	148	39%
3. Is a Problem	16	4%
Total Responses:	376	

Mean: 1.48   Standard Deviation: 0.58

2. Influenza (Flu)

1. Not a Problem	86	23%
2. Not Sure	109	29%
3. Is a Problem	184	49%
Total Responses:	379	

Mean: 2.26   Standard Deviation: 0.80

Report Title

3. Sexually Transmitted Diseases

1. Not a Problem	66	17%
2. Not Sure	155	41%
3. Is a Problem	157	42%
Total Responses:	378	
Mean: 2.24 Standard Deviation: 0.73		

4. HIV/AIDS

1. Not a Problem	89	24%
2. Not Sure	229	61%
3. Is a Problem	60	16%
Total Responses:	378	
Mean: 1.92 Standard Deviation: 0.62		

ɔ. Hepatitis C

1. Not a Problem	92	24%
2. Not Sure	235	62%
3. Is a Problem	49	13%
Total Responses:	376	
Mean: 1.89 Standard Deviation: 0.60		

6. Emphysema (chronic obstructed pulmonary disease)

1. Not a Problem	74	20%
2. Not Sure	173	46%
3. Is a Problem	130	34%
Total Responses:	377	
Mean: 2.15 Standard Deviation: 0.72		

Report Title
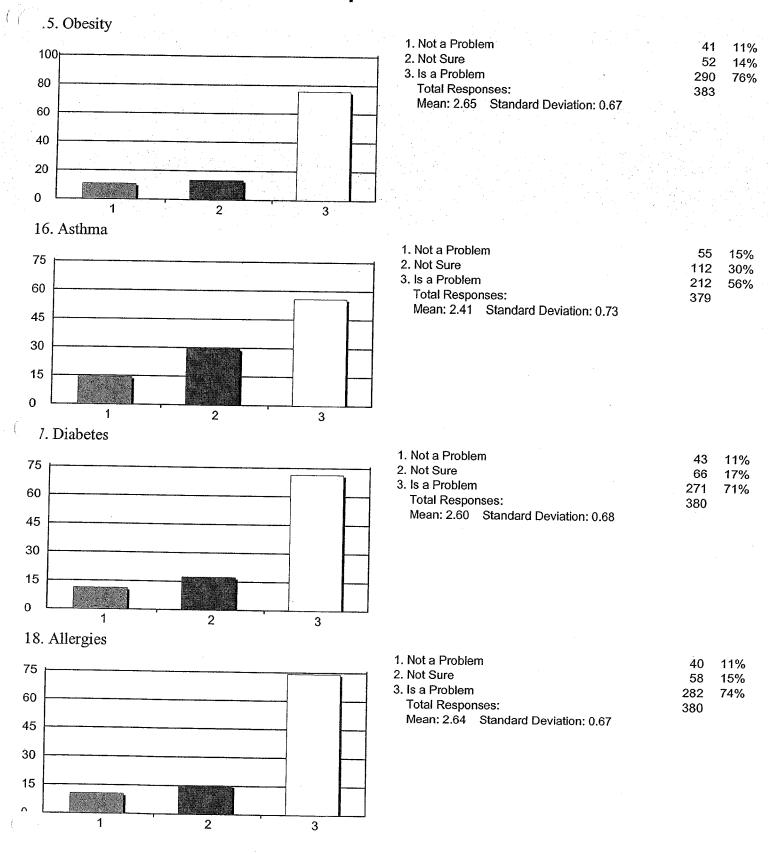
7. Heart Conditions

1. Not a Problem	49	13%
2. Not Sure	77	20%
3. Is a Problem	257	67%
Total Responses:	383	
Mean: 2.54 Standard Deviation: 0.71		

8. High Blood Pressure

1. Not a Problem	34	9%
2. Not Sure	57	15%
3. Is a Problem	290	76%
Total Responses:	381	
Mean: 2.67 Standard Deviation: 0.63		

. Skin Cancer

1. Not a Problem	65	17%
2. Not Sure	178	47%
3. Is a Problem	134	36%
Total Responses:	377	
Mean: 2.18 Standard Deviation: 0.70		

10. Colon Cancer

1. Not a Problem	64	17%
2. Not Sure	172	45%
3. Is a Problem	143	38%
Total Responses:	379	
Mean: 2.21 Standard Deviation: 0.71		

Report Title

11. Lung Cancer

1. Not a Problem	67	18%
2. Not Sure	147	39%
3. Is a Problem	167	44%
Total Responses:	381	

Mean: 2.26   Standard Deviation: 0.74

12. Breast Cancer

1. Not a Problem	61	16%
2. Not Sure	102	27%
3. Is a Problem	215	57%
Total Responses:	378	

Mean: 2.41   Standard Deviation: 0.75

_3. Prostate Cancer

1. Not a Problem	62	16%
2. Not Sure	145	38%
3. Is a Problem	172	45%
Total Responses:	379	

Mean: 2.29   Standard Deviation: 0.73

14. Arthritis

1. Not a Problem	40	11%
2. Not Sure	81	21%
3. Is a Problem	259	68%
Total Responses:	380	

Mean: 2.58   Standard Deviation: 0.68

Report Title

5. Obesity

1. Not a Problem	41	11%
2. Not Sure	52	14%
3. Is a Problem	290	76%
Total Responses:	383	

Mean: 2.65   Standard Deviation: 0.67

16. Asthma

1. Not a Problem	55	15%
2. Not Sure	112	30%
3. Is a Problem	212	56%
Total Responses:	379	

Mean: 2.41   Standard Deviation: 0.73

7. Diabetes

1. Not a Problem	43	11%
2. Not Sure	66	17%
3. Is a Problem	271	71%
Total Responses:	380	

Mean: 2.60   Standard Deviation: 0.68

18. Allergies

1. Not a Problem	40	11%
2. Not Sure	58	15%
3. Is a Problem	282	74%
Total Responses:	380	

Mean: 2.64   Standard Deviation: 0.67

Report Title

19. Osteoporosis

1. Not a Problem	66	17%
2. Not Sure	170	45%
3. Is a Problem	142	38%
Total Responses:	378	
Mean: 2.20 Standard Deviation: 0.71		

20. Dementia/Alzheimer's
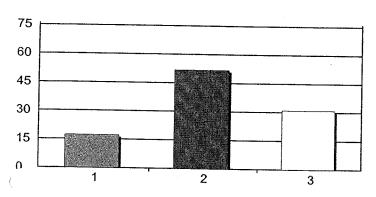
1. Not a Problem	63	17%
2. Not Sure	140	37%
3. Is a Problem	177	47%
Total Responses:	380	
Mean: 2.30 Standard Deviation: 0.74		

1. Hearing loss
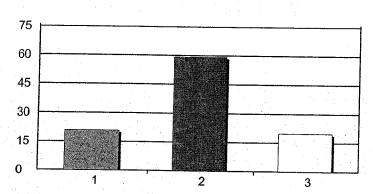
1. Not a Problem	71	19%
2. Not Sure	180	47%
3. Is a Problem	129	34%
Total Responses:	380	
Mean: 2.15 Standard Deviation: 0.71		

22. Cataracts
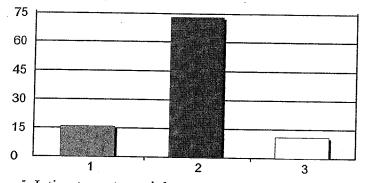
1. Not a Problem	65	17%
2. Not Sure	196	52%
3. Is a Problem	117	31%
Total Responses:	378	
Mean: 2.14 Standard Deviation: 0.68		

Report Title

23. Glaucoma
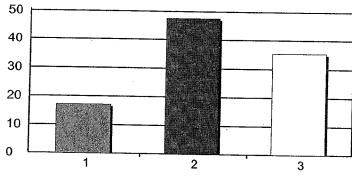
1. Not a Problem	79	21%
2. Not Sure	225	59%
3. Is a Problem	75	20%
Total Responses:	379	
Mean: 1.99 Standard Deviation: 0.64		

24. Macular Degeneration
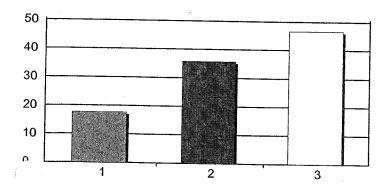
1. Not a Problem	23	16%
2. Not Sure	106	73%
3. Is a Problem	16	11%
Total Responses:	145	
Mean: 1.95 Standard Deviation: 0.52		

5. Intimate partner violence
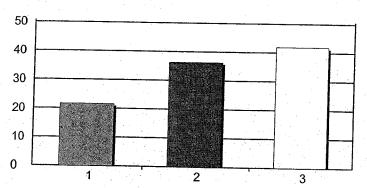
1. Not a Problem	65	17%
2. Not Sure	179	47%
3. Is a Problem	134	35%
Total Responses:	378	
Mean: 2.18 Standard Deviation: 0.70		

26. Child abuse
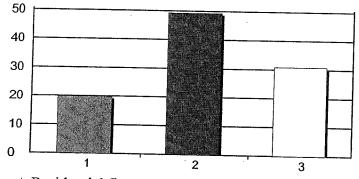
1. Not a Problem	67	18%
2. Not Sure	136	36%
3. Is a Problem	177	47%
Total Responses:	380	
Mean: 2.29 Standard Deviation: 0.75		

Report Title

27. Motor vehicle accidents
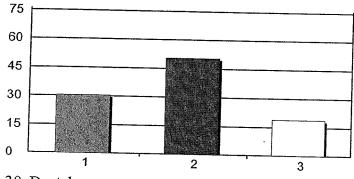
1. Not a Problem	82	22%
2. Not Sure	138	36%
3. Is a Problem	159	42%
Total Responses:	379	
Mean: 2.20 Standard Deviation: 0.77		

28. Falls or fall-related injuries
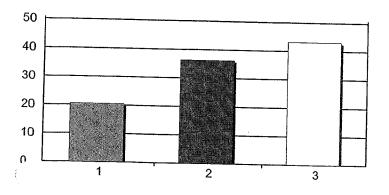
1. Not a Problem	75	20%
2. Not Sure	187	49%
3. Is a Problem	117	31%
Total Responses:	379	
Mean: 2.11 Standard Deviation: 0.70		

). Residential fires
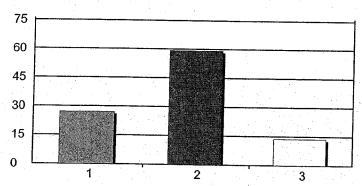
1. Not a Problem	116	31%
2. Not Sure	192	51%
3. Is a Problem	72	19%
Total Responses:	380	
Mean: 1.88 Standard Deviation: 0.69		

30. Dental care
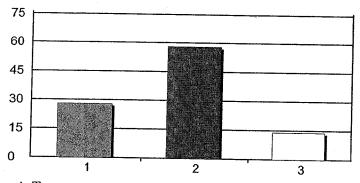
1. Not a Problem	78	21%
2. Not Sure	138	36%
3. Is a Problem	164	43%
Total Responses:	380	
Mean: 2.23 Standard Deviation: 0.77		

Report Title

31. Leisure accidents
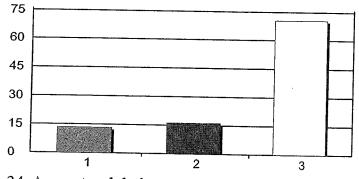
1. Not a Problem	103	27%
2. Not Sure	225	59%
3. Is a Problem	52	14%
Total Responses:	380	

Mean: 1.87   Standard Deviation: 0.63

32. Infant deaths
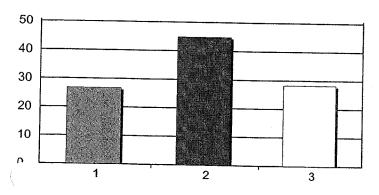
1. Not a Problem	106	28%
2. Not Sure	220	58%
3. Is a Problem	53	14%
Total Responses:	379	

Mean: 1.86   Standard Deviation: 0.63

33. Teenage pregnancy
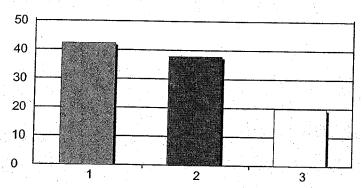
1. Not a Problem	51	13%
2. Not Sure	62	16%
3. Is a Problem	268	70%
Total Responses:	381	

Mean: 2.57   Standard Deviation: 0.72

34. Access to adult daycare
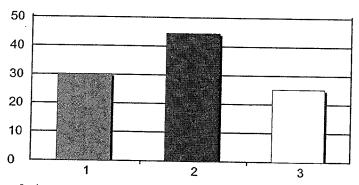
1. Not a Problem	102	27%
2. Not Sure	171	45%
3. Is a Problem	108	28%
Total Responses:	381	

Mean: 2.02   Standard Deviation: 0.74

Report Title

35. Access to home health care
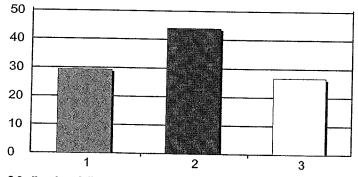
1. Not a Problem	161	42%
2. Not Sure	144	38%
3. Is a Problem	75	20%
Total Responses:	380	
Mean: 1.77 Standard Deviation: 0.76		

36. Access to home care (sitter service)
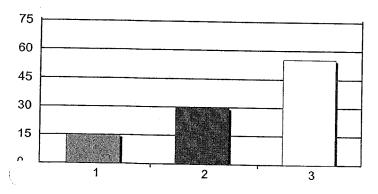
1. Not a Problem	115	30%
2. Not Sure	170	45%
3. Is a Problem	96	25%
Total Responses:	381	
Mean: 1.95 Standard Deviation: 0.74		

37. Access to care for special needs children
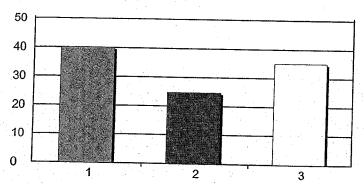
1. Not a Problem	111	29%
2. Not Sure	166	44%
3. Is a Problem	101	27%
Total Responses:	378	
Mean: 1.97 Standard Deviation: 0.75		

38. Lack of financial resources for medical care
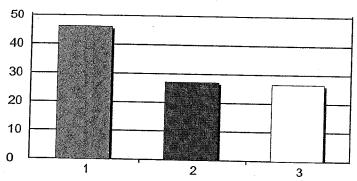
1. Not a Problem	56	15%
2. Not Sure	113	30%
3. Is a Problem	210	55%
Total Responses:	379	
Mean: 2.41 Standard Deviation: 0.73		

Report Title

39. Access to healthy foods
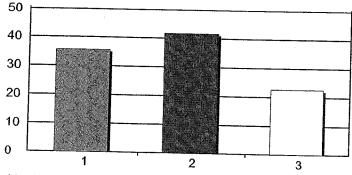
1. Not a Problem	152	40%
2. Not Sure	94	25%
3. Is a Problem	133	35%
Total Responses:	379	

Mean: 1.95   Standard Deviation: 0.87

40. Access to leisure time physical activity
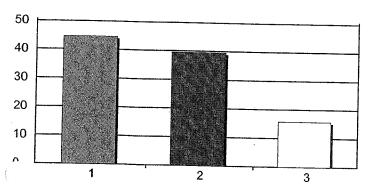
1. Not a Problem	176	46%
2. Not Sure	103	27%
3. Is a Problem	101	27%
Total Responses:	380	

Mean: 1.80   Standard Deviation: 0.83
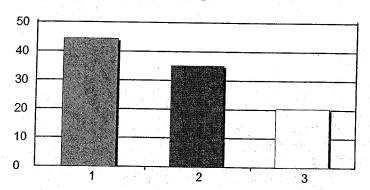
1. Access to transportation to health care

1. Not a Problem	135	36%
2. Not Sure	158	42%
3. Is a Problem	86	23%
Total Responses:	379	

Mean: 1.87   Standard Deviation: 0.75

42. Access to nursing home care

1. Not a Problem	169	45%
2. Not Sure	150	40%
3. Is a Problem	60	16%
Total Responses:	379	
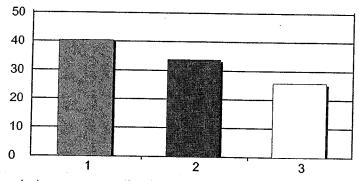
Mean: 1.71   Standard Deviation: 0.72

Report Title

13. Access to a primary care provider
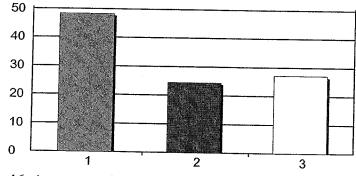
1. Not a Problem	168	44%
2. Not Sure	133	35%
3. Is a Problem	77	20%
Total Responses:	378	

Mean: 1.76   Standard Deviation: 0.77

44. Access to medical specialist
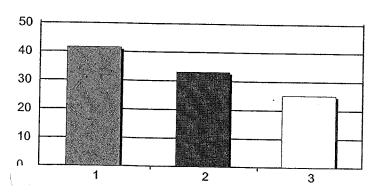
1. Not a Problem	152	40%
2. Not Sure	127	34%
3. Is a Problem	97	26%
Total Responses:	376	

Mean: 1.85   Standard Deviation: 0.80

5. Access to medications
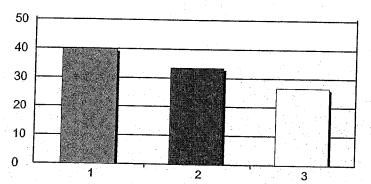
1. Not a Problem	183	48%
2. Not Sure	93	25%
3. Is a Problem	103	27%
Total Responses:	379	

Mean: 1.79   Standard Deviation: 0.84
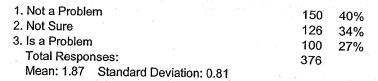
46. Access to education on wellness
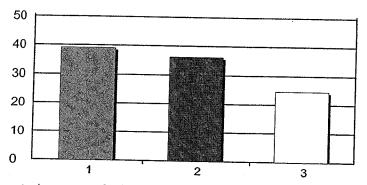
1. Not a Problem	158	42%
2. Not Sure	126	33%
3. Is a Problem	96	25%
Total Responses:	380	

Mean: 1.84   Standard Deviation: 0.80

Report Title

47. Access to education on healthy lifestyles

1. Not a Problem	150	40%
2. Not Sure	126	34%
3. Is a Problem	100	27%
Total Responses:	376	
Mean: 1.87 Standard Deviation: 0.81		
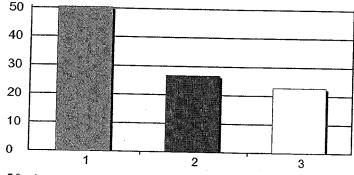
48. Access to education on prevention
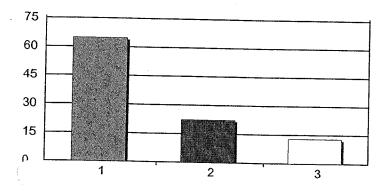
1. Not a Problem	148	39%
2. Not Sure	137	36%
3. Is a Problem	93	25%
Total Responses:	378	
Mean: 1.85 Standard Deviation: 0.79		

). Access to facilities for exercise
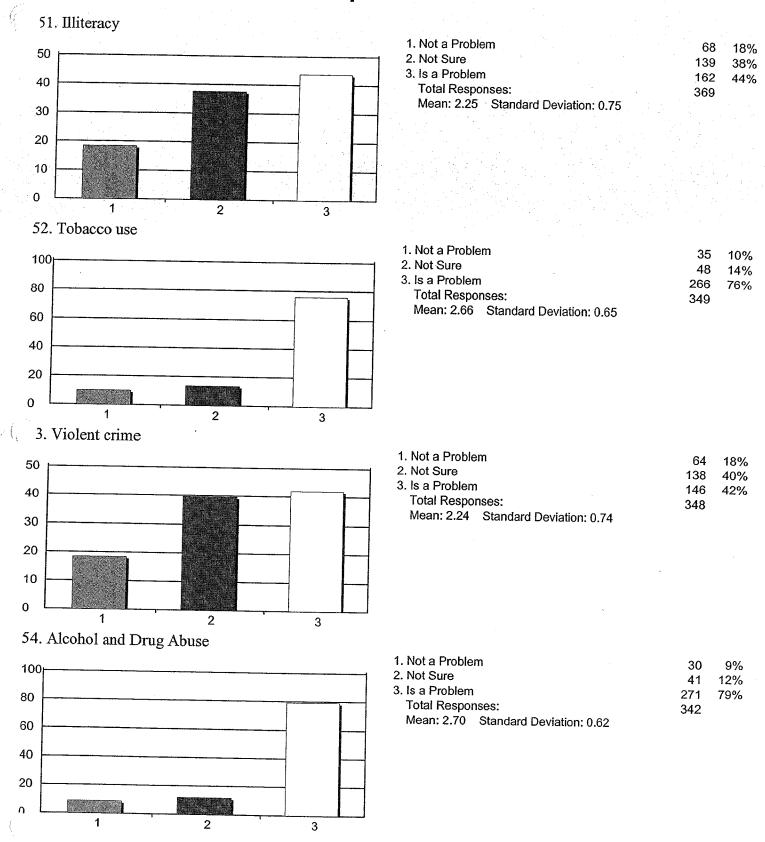
1. Not a Problem	190	50%
2. Not Sure	101	27%
3. Is a Problem	86	23%
Total Responses:	377	
Mean: 1.72 Standard Deviation: 0.81		
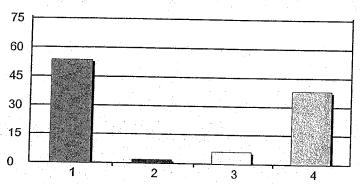
50. Access to parks for recreation

1. Not a Problem	246	65%
2. Not Sure	85	22%
3. Is a Problem	49	13%
Total Responses:	380	
Mean: 1.48 Standard Deviation: 0.71		

Report Title

51. Illiteracy

1. Not a Problem	68	18%
2. Not Sure	139	38%
3. Is a Problem	162	44%
Total Responses:	369	

Mean: 2.25   Standard Deviation: 0.75

52. Tobacco use

1. Not a Problem	35	10%
2. Not Sure	48	14%
3. Is a Problem	266	76%
Total Responses:	349	

Mean: 2.66   Standard Deviation: 0.65

3. Violent crime

1. Not a Problem	64	18%
2. Not Sure	138	40%
3. Is a Problem	146	42%
Total Responses:	348	

Mean: 2.24   Standard Deviation: 0.74

54. Alcohol and Drug Abuse

1. Not a Problem	30	9%
2. Not Sure	41	12%
3. Is a Problem	271	79%
Total Responses:	342	

Mean: 2.70   Standard Deviation: 0.62

Report Title

55. Do you consider yourself:

1. Overweight	189	54%
2. Underweight	7	2%
3. Obese	22	6%
4. Just Right	134	38%
Total Responses:	352	
Mean: 2.29 Standard Deviation: 1.43		

56. Age range:
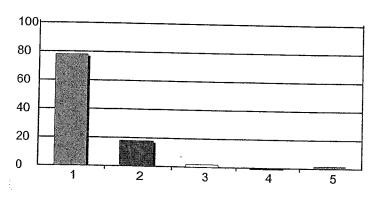
1. 18 - 24	14	4%
2. 25 - 34	61	17%
3. 35 - 44	84	24%
4. 45 - 54	91	26%
5. 55 - 64	72	21%
6. 65 +	27	8%
Total Responses:	349	
Mean: 3.65 Standard Deviation: 1.30		

7. Are you:
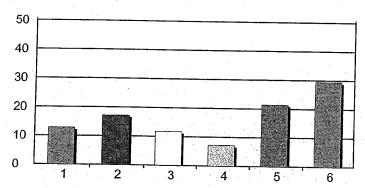
1. Male	96	28%
2. Female	250	72%
Total Responses:	346	
Mean: 1.72 Standard Deviation: 0.45		

58. Race:
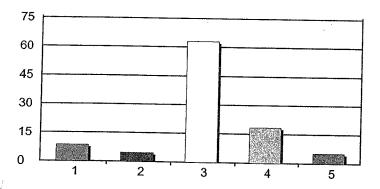
1. Caucasian	285	78%
2. African American	66	18%
3. Native American	7	2%
4. Asian/Pacific Islander	1	0%
5. Other	6	2%
Total Responses:	365	
Mean: 1.29 Standard Deviation: 0.68		

Report Title

59. School:

1. Less than high school	48	13%
2. High school graduate/GED	64	17%
3. Some college	44	12%
4. Associate degree	27	7%
5. Bachelors degree	80	21%
6. Advanced degree	110	29%
Total Responses:	373	

Mean: 3.96   Standard Deviation: 1.83

60. What type of insurance do you have?

1. Medicare	30	9%
2. TennCare	16	5%
3. Private Insurance	218	63%
4. Other	64	18%
5. No Insurance	18	5%
Total Responses:	346	

Mean: 3.07   Standard Deviation: 0.89

Setting Priorities for Health Status Improvement

anlon 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	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

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

How Serious	Score
Very Serious	9-10
Serious	6 - 8
Moderately Serious	3 - 5
Not Serious	0 - 2

C=Effectiveness of Available Interventions

Usually 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)

Effectiveness	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

Opportunity = (A + 2B)C

Smoking

A = 9.5

B = 9.5

C = 4.5

128.25

AIDS

A = 3.5

B = 9.5

C = 4.5

101.25

Illiteracy

A = 7.5

B = 7.5

C = 8.5

191.25

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

<u>**Heart Condition in Gibson County**</u>
Deaths Per 100,000

	Gibson	TN
2000-2006	525-562	513

Hospitalizations per 1,000

	Gibson	TN
2000-2006	80.69-83.88	67.81-127.13

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

Source: Center for Disease Control and Prevention

<u>**High Blood Pressure in Northwest Tennessee**</u>
Stroke death rates Ages 35+

	Gibson	TN
2000-2006	138	129

Have you ever been told by a doctor, nurse, or other health professional that you have high blood pressure?

	Northwest TN	TN
2009	39.3	32.6
2007	39.1	33.8

Are you currently taking medicine for your blood pressure?

	Northwest TN	TN
2009	85.7	81.8
2007	86.1	84.0

Uncontrolled high blood pressure increases risk of heart attack and stroke.
The average hospitalization cost for a stroke in persons 65 and older ranged between $8,706-17,034 in 2000-2006.
High cholesterol, diabetes, obesity, tobacco and alcohol use, and age are risk factors.

- Numbers reflect weighted risk within sample. Source: Tennessee Department of Health; Mayo Clinic; Center for Disease Control

Asthma in Northwest Tennessee

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

	Northwest TN	TN
2009	14.6	11.9
2008	16.6	12.6

Source: Tennessee Department of Health

2002-2007 Childhood Hospitalizations in Northwest TN

Inpatient hospitalizations per 100,000	200
Average annual emergency room visit rate	828
Average visit rate per inpatient visit	$5,845
Average rate for outpatient visits	$800

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: Tennessee Department of Health; Asthma and Allergy Foundation of America

Cancer in Gibson County

Deaths from Malignant Neoplasms Per 100,000

	Gibson	TN
2004	318.78	217.27
2005	316.08	221.39
2006	319.83	219.22

Gibson County fell within the top ten highest county cancer death rates contrasted with all other Tennessee counties from 2003-2007.
Cancer is the 2nd leading cause of death in children.
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 in Northwest Tennessee

Have you been told by a doctor or other health professional that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?

	Northwest TN	TN
2009	29.3	25.9
2007	37.0	34.0

Arthritis continued

Are you limited in any way of your usual activities because of your arthritis or joint symptoms?

	Northwest TN	TN
2007	43.5	39.5
2005	36.9	37.7

Source: Tennessee Department of Health

46 million Americans are affected by arthritis.
Age is a risk factor for arthritis.
60% who develop arthritis are female, and females develop some of the more common forms.

Source: Arthritis Foundation

Obesity in Gibson County

	Gibson	TN
2011	34%	31%

- Obesity defined as >30 BMI index. Source: County Health Rankings

Prevalence of Obesity in Total Population 1999-2009 in TN

	TN
2009	69.0
2008	68.0
2007	67.4

- Obesity defined as >25 BMI index. Source: Tennessee Department of Health

Prevalence of No Physical Activity for Total Population, 1999-2009

	TN
2009	31
2008	28.9
2007	31.5

Source: Tennessee Department of Health

Allergies

1 in 5 Americans suffer from all types of allergies.
Allergy has increased in prevalence since the 1980s across age, sex, and racial groups.
Approximately 50 million people experience allergies.
Allergies are the 5th leading chronic disease among all ages.

Source: Asthma and Allergy Foundation of America

Diabetes in Northwest Tennessee
Deaths From Endocrine, Nutritional, and Metabolic Disorders Per 100,000

	Gibson	TN
2004	83.34	44.80
2005	79.02	44.44
2006	76.35	39.53

Percentage of Population Over 20 Diagnosed with Diabetes

	Gibson	TN
2008	11.7	10.4

Have you ever been told by a doctor that you have diabetes not including gestational diabetes?

	Northwest TN	TN
2009	12.2	10.3
2008	11.6	10.4

Has your doctor ever told you that diabetes has affected your eyes or that you had retinopathy?

	Northwest TN	TN
2009	39.8	27.4
2008	16.1	21.0

Are you now taking insulin?

	Northwest TN	TN
2009	39.7	30.4
2008	36.5	32.1

Source: Tennessee Department of Health

Dementia and Alzheimer's in Gibson County
Persons over the age of 65

	Gibson	TN
2010	16.7%	13.4%

Alzheimer's is the 5th leading cause of death in those 65 and older.
It is the only disease that cannot be cured or slowed in its progression.
Unpaid hours of care add up to a total of $202.6 billion in labor equivalent.
60% of caregivers rate the experience of stress as high or very high, and one-third report depression.

Source: US Census Data; Alzheimer's Association

Illiteracy in Gibson County
The estimated NCE (normal curve equivalent) gain in language arts and reading is below the growth standard for one standard error in Gibson County.

Source: Tennessee Report Card

Illiteracy continued

9,946 have no high school diploma in a population of 49,683.

Tennessee is below the national mean of people aged 25 and over who have completed high school or more education relative to the national mean by state.

One of the potential benefits of educational attainment is economic success.

Source: Community Health Status; US Census Data.

Lack of Financial Resources to Access Medical Care in Gibson County

Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?

	Northwest TN	TN
2009	25.2	17.5
2008	17.5	15.9

Unemployment

	Gibson	TN
2011	14.8%	9.1%

Source: County Health Rankings; Labor and Workforce Development

Percentage of People Below Poverty Level

	Gibson	TN	National
2010	17.3	17.2	14.3

1,967 were unemployed according to the Community Health Status;
1,767 were work disabled
14.5% were uninsured in 2009

Source: US Census Data; Center for Disease Control

Tobacco, Alcohol, and Substance Abuse in Northwest Tennessee

Are you a current smoker?

	Northwest TN	TN
2009	29.0	22.0
2008	24.2	23.1

Rates of underage smoking were above the national average.

During the past 30 days have you had at least one drink—beer, wine, malt beverage, liquor?

	Northwest TN	TN
2009	21.1	25.1
2008	22.8	33.6

Have you had five or more drinks on one occasion?

	Northwest TN	TN
2009	4.5	6.8
2008	8.0	10.5

40% of all roadway deaths in TN are alcohol-related.

Tobacco, Alcohol, and Substance Abuse continued

Alcohol fatalities per 100 million vehicle miles (VMT) were .58 for TN and .45 for US.

Alcohol is the most abused substance in the US.

In 2005-2006, the rate of unmet needs for drug treatment for adolescents was above the national average.

Tennessee was in the top ten states rated for addiction by adolescents to pain killers.

There were 1,432 meth lab seizures in Tennessee in 2009.

3,581 were recent drug users in Gibson County within a month period according to Community Health Status.

Source: Tennessee Department of Health; The Tennessean; National Survey on Drug Use and Health

Child Abuse

Rate of Children Subject of Maltreatment Response per 10,000

	Gibson	TN
2007-2008	44.6	37.2

Rate of Victim Reports of Neglect per 10,000

	Gibson	TN
2007-2008	1.0	2.2

Rate of Victim Reports of Physical Abuse per 10,000

	Gibson	TN
2007-2008	0.7	1.3

Rate of Victim Reports of Sexual Abuse per 10,000

	Gibson	TN
2007-2008	0.0	0.0

Nearly 3 million cases of abuse reported nationally each year.

4 children die as a result of child abuse, 3 of those 4 are under the age of 4.

In the State of Tennessee there were over 11,072 severe abuse allegations.

Carl Perkins Center addressed 6,000 cases in West Tennessee.

Source: Carl Perkins Center; Department of Children's Services

Teenage Pregnancy

Live Births with Age Specific Fertility Rates Ages 10-14 By Race

	Gibson		TN
	Caucasian	African-American	Total
2009	0.7	2.9	0.6
2008	0.0	0.0	0.8

Live Births with Age Specific Fertility Rates Ages 15-17 By Race

	Gibson		TN
	Caucasian	African-American	Total
2009	13.6	29.9	24.0
2008	15.1	45.3	27.3

Violent Crime

Percentage of People Affected by Violent Crime

	Gibson	TN
2011	.88	.76

Crime Rate Per 100,000 in TN

	TN
Violent Crime	667.7
Murder and nonnegligent manslaughter	7.3
Forcible rape	31.7
Robbery	153.2
Aggravated assault	475.5

Source: Trulia Real Estate Search; Uniform Crime Reports

Gibson 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 **Humboldt General Hospital, Milan General Hospital and Gibson General Hospitals** on specific health issues.

Heart Condition
American Heart Association
West Tennessee Heart Network
Physician Clinics
Local Churches
Humboldt Senior Citizens Center
Milan Senior Citizens Center
Gibson Senior Citizens Center
Civic Clubs
American Association of Retired Persons

High Blood Pressure
Gibson County Health Department
American Heart Association
American Stroke Association
Physician Clinics
Community and Senior Centers
Civic Clubs

Asthma
Gibson County Health Department
Physician Clinics
Tennessee Department of Health: Maternal and Child Services
Milan Special School District
Humboldt City School District
Trenton Special School District

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

Arthritis

Arthritis Foundation
Physician Clinics
American Association of Retired Persons
Civic Clubs
Local Fitness Centers
YMCA

Obesity

Gibson County Health Department
Milan Special School District
Humboldt City School District
Trenton Special School District
American Heart Association
American Diabetes Association
American Stroke Association
Physician Clinics
Civic Clubs
Community and Senior Centers
Gibson County Parks and Recreation Department
Local Health and Fitness Clubs
Afterschool Programs
Local Churches
Local Retirement and Nursing Homes

Allergies

Asthma and Allergy Foundation
Physicians Clinics
Community and Senior Centers

Diabetes

Gibson County Health Department
American Diabetes Association
Physicians Clinics
Community and Senior Centers
Local Churches
Milan Special School District
Humboldt City School District
Trenton Special School District

Dementia and Alzheimer's
Assisted Living and Nursing Homes
Senior and Community Centers
Local Churches
Alzheimer's Association
Physician Clinics

Illiteracy
Gibson County Adult Literacy Council
Northwest Tennessee Career Center
Gibson County Adult Education
Local Libraries
Workforce Development Program
Even Start Program; Family Literacy and Adult Education
Milan Special School District
Humboldt City School District
Trenton Special School District
Gibson County Special School District

Lack of Financial Resources
Christian Endeavor N/P
Mustard Seed
Good Samaritan/Helping Hand, Inc.
Greater North Gibson Food Pantry
Habitat for Humanity
Social Security Administration
TennCare
Tennessee Department of Human Services
Gibson County Health Department
American Red Cross

Tobacco, Alcohol, and Substance Abuse
American Cancer Society
Milan Special School District
Humboldt City School District
Trenton Special School District
Gibson County Special School District
City and County Government
Carey Counseling Center, Inc.
Marc Milan Addiction Recovery Center
Pathways Gibson County Office
Trenton Police Department

Humboldt Police Department
City of Milan Police Department
Gibson County Courts
Gibson County Sheriff's Office
Physicians Clinics

Child Abuse
Milan Special School District
Humboldt City School District
Trenton Special School District
Gibson County Special School District
Exchange Club Carl Perkins Center
Local Churches
Afterschool Programs
Department of Human Services
Tennessee Department of Children's Services

Teenage Pregnancy
Gibson County Health Department
Milan Special School District
Humboldt City School District
Trenton Special School District
Gibson County Special School District
Gibson County Juvenile Court
Afterschool Programs
Tennessee Department of Children's Services
Local Churches
Birthchoice of Trenton

Violent Crime
Local Churches
Afterschool Programs
Trenton Police Department
Humboldt Police Department
City of Milan Police Department
Gibson County Courts
Gibson County Sheriff's Office

"Susie Test" Sample Profile
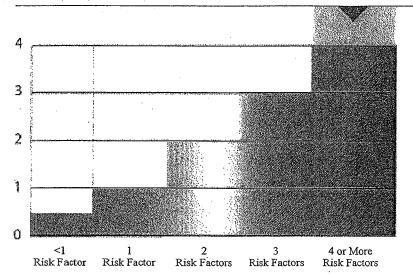
HEARTaware

Attachment G
HeartAware and Stroke Reports

ennessee Heart
J Vascular Center™
State of West Tennessee Healthcare

PERSONALIZED RISK FACTOR PROFILE

Summary

Using This Report To Improve Your Health

Congratulations. You have taken a good step toward improving your heart health. This report provides you with a summary of your results, isolates your key risk factors and helps you understand what you can do to improve your cardiovascular health. In addition to this summary, the report contains two other sections:

- **Information About Risk Factors:** This section of your report provides personalized information about each of the risk factors based on your answers to the questions. You will also find information outlining what you can do to reduce your risk of heart disease.
- **Improving Your Health:** This section gives you information on ways that **Jackson-Madison County General Hospital** and our affiliated physicians can help as you begin to reduce and manage your risk of heart disease.

Information About Risk Factors

Current Risk Factors

Age/Gender

Status: You are 70 years old.
Risk Level: VERY HIGH

Facts & Tips

- Contrary to popular belief, cardiovascular disease is not a male disease. This is a common misconception, not only with female patients, but also with some physicians and healthcare providers (as they often under-diagnose and under-treat female patients). Consider the following statistics:
    - o Each year, more women die from cardiovascular disease than men.
    - o Cardiovascular disease claims more lives than the next 6 causes of death combined.
    - o Cardiovascular disease is about 7 times more deadly than breast cancer.

Take an active interest in your heart health and do not discount cardiac-related symptoms. Work closely with your physician to manage your cardiac health from a female perspective, as many symptoms differ from those of a man.

Most people wait until a heart attack or stroke hits before modifying their lifestyle. In fact, roughly 50% of women are first diagnosed with cardiovascular disease upon arrival to the emergency room. Don't be a statistic. Start now on your road towards a more heart healthy lifestyle.

- Many people think of cardiovascular disease as something that affects only senior citizens. This is simply not true. 61% of people under the age of 65 already have one or more forms of cardiovascular disease. Also, 45% of heart attacks occur in people under 65. It is important to halt this disease process now. Any changes you make today will benefit you in the future because cardiovascular disease is a progressive disease; one that builds over time.

For women, menopause plays a significant role in increasing risk for coronary artery disease. Females are afforded protection from heart disease largely as a result of estrogen production. However, after going through menopause, a woman's risk of coronary artery disease increases 2-3 times that of women the same age prior to menopause.

While you have not reached menopause, and you may be young and healthy, it is never too soon to begin modifying your risk factors outlined in this report. Work closely with your physician to manage your cardiac health from a female perspective, as many symptoms differ from those of a man.

- As a woman who has reached menopause, it is especially important that you pay attention to the risk factors described in this report.
- Estrogen production affords women protection from heart disease. However, after menopause, a woman's risk of coronary artery disease increases 2-3 times that of a woman who is the same age prior to menopause.
- You have indicated that you are currently taking hormone replacement therapy (HRT). Recent findings from the American Heart Association and the National Heart, Lung, and Blood Institute show an increased overall health risk in women taking combined (estrogen and progestin) HRT. If you have not already done so, please ask your primary care physician if HRT is an appropriate therapy for you.
- Following menopause, a woman's risk of developing cardiovascular disease equals that of a man's.

Diabetes

Status You have Type II diabetes

Risk Level: VERY HIGH

Facts & Tips

- Talk to your physician if your glucose is 100 or more. A range of 100 - 125 is often referred to as pre-diabetes. A glucose level greater than 125 means you have diabetes. Diabetes is a serious condition which requires immediate attention by a physician.
- Being overweight significantly increases your odds of developing diabetes. In fact, 9 out of 10 newly-diagnosed people with Type 2 diabetes are overweight.
- Losing just 5% of your current weight can significantly lower blood glucose levels. If your glucose levels are high and/or you have

- Pay attention to symptoms that may suggest diabetes (thirst, increased urination, blurred vision, drowsiness, frequent skin infections or cuts that are slow to heal), especially if you are overweight. Having symptom(s) does not mean that you have diabetes, but you should talk to your physician about them.
- Your body mass index is above the normal range and places you at increased risk of developing diabetes. You should work with your physician to control your weight. He or she can recommend a nutritionist and/or a fitness expert who can help you to reduce your body mass and thus your chances of developing diabetes. It is equally important to have regular check-ups with your doctor to monitor your blood sugar levels so that you can avoid developing diabetes.
- If you have not already, take steps to control your weight. Even modest reductions can produce significant results. Consider the following clinical study published in The New York Times, 2001: Participants ate diets lower in fat than that which they were accustomed to, exercised just two-and-a-half hours per week, and shed a modest amount of weight (7%). The result: the incidence of at-risk adult-onset diabetes was cut in half. Furthermore, those individuals who utilized assistance of a nutritionist and fitness expert achieved the greatest long-term success.
- Diabetes significantly increases your risk of a heart attack or stroke. In fact, 2 out of every 3 diabetics will die of a coronary event. So, it is absolutely vital that you properly **MANAGE ALL OF YOUR RISK FACTORS** as described within this report.
- It is recommended that if you drink, as a woman, you should consume no more than one alcoholic beverage per day. (An alcoholic beverage equates to 12 ounces of beer, 4 ounces of wine, 1.25 ounces of 80-proof liquor, or 1 ounce of 100-proof spirits).
- Drink plenty of water - the American Heart Association recommends at least eight 8-oz glasses per day.
- A series of smaller meals throughout the day (rather than two or three large ones) will help you achieve a constant blood sugar level and improve your health.
- It is important to schedule regular check-ups with your doctor to manage your diabetes and control all other risk factors documented in this report.
- Your body mass index is above the normal range and places you at increased risk of developing diabetes. You should work with your physician to control your weight. He or she can recommend a nutritionist and/or a fitness expert who can help you to reduce your body mass and thus your chances of developing diabetes. It is equally important to have regular check-ups with your doctor to monitor your blood sugar levels so that you can avoid developing diabetes.

Weight

Status: You are obese.

Risk Level: VERY HIGH

Measurement (Weight in Pounds)
    Your Weight: 200 pounds.
    Ideal Weight: 108–146 pounds.
    BMI: 34.3.

Facts & Tips

- Your weight classifies you as overweight. Talk to your physician about weight loss options.
- Including 3 servings of non-fat or low fat milk products daily has been shown to enhance weight loss in some individuals.
- Eating a diet high in fiber lowers your risk of obesity. Choose rice,

3g fiber/serving and "whole grain" within the first three ingredients.
- Keep track of your food intake like you would a check book. Subtract calories, carbohydrates, protein or fats from your daily needs as you eat them. Use food labels or calorie-counting books to determine the nutrition facts.
- Change your mocha to a non-fat or sugar-free version, order small fries rather than large, or try reduced-fat salad dressing instead of the full fat version. Simple changes like these in your diet can help you shed a pound or more a week.
- A balanced diet is important, but do not forget to be physically active 30 minutes per day.
- It is essential that you start an aerobic exercise routine. Start slowly and do not overdo it; work with a fitness expert if necessary until you can comfortably exercise at least 3 times per week for 30 minutes per session. (Please see the Physical Activity risk factor information).
- Aerobically exercise more often. Exercising less than 3 times per week is not adequate.

Physical Activity

Status: You are sedentary.
Risk Level: VERY HIGH

Measurement (Times per week exercising aerobically for 20+ minutes)
Your Activity Level: 0 times per week.
Ideal: 5 or more times per week.

Facts & Tips

- Exercise is critical to reducing your chances of developing heart disease. Besides shedding those unwanted pounds, exercise lowers blood pressure and cholesterol levels, boosts energy levels, relieves stress and improves the way you look and feel. Furthermore, it sets a good example for your loved ones to exercise routinely.
- Do not underestimate the value of leading an active lifestyle. Some experts believe the risks related to physical inactivity, in some circumstances, equal that of smoking cigarettes. Please note: while anaerobic exercise, e.g. weight lifting, provides fitness advantages, it offers no cardiovascular benefits.
- 70% of the American population is not getting sufficient exercise.
- It is recommended that you exercise aerobically at least 3 times per week for 30 minutes each session. Aerobic exercise includes walking, jogging, swimming, cross-country skiing, etc.
- Schedule time during the day, as if it is an important appointment, for you to exercise.
- Take 10 minute walk breaks when your children are at practice.
- Turn up the music and dance while doing household chores.
- If you golf, walk instead of riding a cart.
- Take the elevator up, take the stairs down or vice versa.
- Take a yoga, pilates or Zumba class 2-3 times per week.

Blood Pressure

Status: You have moderately high blood pressure.
Risk Level: HIGH

Measurement (Systolic [top number]/Diastolic [bottom number])
Your reading: 150/87
Ideal: <120/<80

Facts & Tips

- Exercising (e.g. walking, biking, swimming, rowing, gardening, etc.) lowers blood pressure levels.

recommends less than 1,500 mg per day. 1 tsp of salt has 2400mg of sodium.
- Potassium in fruits and vegetables may help maintain a healthy blood pressure.
- Diets high in fiber can help lower blood pressure since these diets are typically lower in fat and calories.
- If your blood pressure is high, consult a physician. S/he can discuss other options including blood pressure-lowering medications.

Cholesterol

Status: You have very high cholesterol.

Risk Level: VERY HIGH

Measurement (in mg/dL)
   Your Total Cholesterol: 240 to 279
   Your HDL "Good" Cholesterol: 35 to 39
   Your LDL "Bad" Cholesterol: 191
   Ideals:
      Ideal Total Cholesterol: <200
      Ideal HDL Cholesterol: >60
      Ideal LDL Cholesterol: <100

Facts & Tips

- Cholesterol circulates in the bloodstream, and over time, its components build up in the arteries, forming plaque. Plaque blocks the flow of blood in the arteries, causing heart attacks and strokes.

   Total cholesterol is the sum of all the cholesterol in the blood. The higher your total cholesterol, the greater your risk of heart disease. Consider this statistic from the Archives of Internal Medicine: for every one point decrease in total cholesterol, there is a 2% reduction in risk of a coronary event.

   Not all cholesterol is bad. HDLs are referred to as "good cholesterol" because they aid in the removal of cholesterol from the blood stream. LDLs, on the other hand, are often referred to as "bad cholesterol" because they form the dangerous plaques.

   All measurements defined below are compared to the most up-to-date NCEP (National Cholesterol Education Program) III guidelines:

- Begin an "aerobic" exercise routine, (walking, biking, swimming, jogging, rowing, etc.) slowly building up to at least three days a week for thirty minutes.
- Quit smoking-smoking cigarettes can decrease your HDL level by as much as 15%.
- Limit consumption of animal food products (meat, fish, poultry, etc.) or any food products derived from animals (such as dairy products)
- Eat foods low in fat, especially saturated fats.
- Read the "Nutrition Facts" information provided on most food packages to monitor your diet.
- As your cholesterol is high, you should discuss with your physician possible medication treatments (if you have not already done so).

Family History

family history relating to these conditions.
Risk Level: VERY HIGH

<u>**Facts & Tips**</u>

- Studies show that people with an immediate family history of disease(s) are more likely to develop those disease(s) than are people with no family history.
- Medical science is still not certain why family history plays such an important role in the disease process. The fact is...it does. So, pay particular attention to all risk factors associated with your conditions noted above.

Smoking

Status: You are currently a smoker
Risk Level: VERY HIGH

<u>**Facts & Tips**</u>

- Cigarette smoking is the most preventable cause of premature death in the United States. There are few things that people can do that will have a greater negative effect on their bodies than to smoke cigarettes. It is one of the largest contributory factors for cardiovascular disease, many forms of cancer (notably lung), and emphysema.

  Quitting smoking is the single best behavioral change you can make for improved health. 1.3 million Americans do it every year. However, as a heavy smoker (more than a pack a day), you should seriously consider a smoking cessation program as opposed to trying to quit on your own. Studies have shown that heavy smokers are twice as likely to quit by joining a program.

  As an incentive to quit, consider the following statistics:
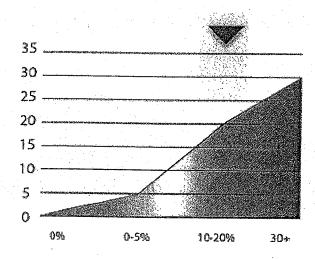
- Smokers have twice the risk of a heart attack.
- Smokers have three times the risk of developing cardiovascular disease.
- Smokers experience arterial thickening, adding the equivalent of 10 years of aging to their arteries.
- Smokers have a 70% greater incidence of cardiovascular disease.

Your Overall Cardiac Risk

You have a 17% chance or greater of developing cardiac disease within the next 10 years.

Explanation

- The scoring methodology is based on data collected over 40 years from the nationally recognized Framingham Heart Study.
- Your heart health risk is based on a combination of modifiable risks (factors you CAN change) and non-modifiable risks (factors you CANNOT change). Reducing these risk factors will greatly reduce your chances of developing heart disease.

- As you accumulate more Framingham risk points, your risk of developing heart disease grows **dramatically**. Why is this? Because having multiple risk factors compounds the negative effects to your circulatory system, i.e. smoking increases your heart risk, and at the same time, it raises your blood pressure and your cholesterol levels.

Improving Your Health

Discussing Your Results With A Healthcare Provider

Every 30 seconds, cardiovascular disease claims another life. It is the #1 killer in America and is expected to continue to grow at epidemic proportions. Unlike most diseases, cardiovascular disease is controllable and preventable. The key is proper education and awareness of what to do to reduce your risks. You have taken the first step by completing the risk assessment.

Contact Jackson-Madison County General Hospital to discuss your results. Jackson-Madison County General Hospital committed to assisting community members with their healthcare needs. So, please take advantage of our clinical expertise by contacting us at 866-949-6457 to discuss your results.

Learning More About Improving Your Health

Jackson-Madison County General Hospital offers continuing education, both online and at our facility. You may click here and check our calendar of events to view upcoming classes and programs offered by the hospital, or simply call for more information.

Our Heart and Vascular Services

To learn more about cardiovascular services at Jackson-Madison County General Hospital, visit http://www.wth.net/body.cfm?id=121. We provide a comprehensive array of heart and vascular services to help our community maintain and improve their cardiovascular health.

Thank you for participating in the HeartAware Risk Assessment. Please feel free to look to us as your resource for healthcare information both on- and off-line.

©2011 HealthAware
Patient ID: 3064350
Suzie Test

"Susie Test" Sample Report; faxed to PCP upon request

Tennessee Heart and Vascular Center
An affiliate of West Tennessee Healthcare

Consultation Record Report - Self-Reported Data

Please note: This screening consultation complements your care and it is not meant to replace nor assume client-patient relationship. If you have any questions, please do not hesitate to contact us at XXXXXX or XXXXXX. Thank You.

Risk Assessment Type: - HeartAware   Framingham Score: 17%

General Patient Information

Name: Suzie Q. Test
Address 1: JMCGH
Address 2:
City, State, Zip: Jackson, TN 38301

Phone: 000.000.0000
Email: N/A
Cardiologist: N/A
PCP: N/A

ID: 3064350
Age: 72
Gender: Female
Ethnicity: Caucasian
Birth: 1939-1-1

Medical Information

Conditions	Family History	Medications
Diabetes: Yes Type 2		

Cumulative Consultation Data

Self-Reported Data

Date: 2009-08-13

| BMI: **34.3** | Systolic: **150** | Diastolic: **87** | Blood Pressure Last Checked: **More than 1 year ago** | HDL Level: **37** | LDL Level: **>190** |

Cholesterol Last Checked: **More than 1 year ago** | Total Cholesterol: **260** | Triglycerides: **0** | Glucose: **0** | Body Fat%: **0** | Ft.: **5** | In.: **4**

WeightLbs.: **200** | Years Smoked: **1 to 9 Years** | Tobacco Use Per Day: **1 pack** | Menopausal: **Yes** | Estrogen Therapy: **Yes**

Aerobic Exercise Frequency: **None** | Leg Pain: **Yes** | When Leg Pain Present: **Both during exercise and at rest**

Current Goals

Blood Pressure

Consult	Recommended†	Goal
Systolic: 150 Diastolic: 87	Systolic: < 120 Diastolic: < 80	Systolic: 120 Diastolic: 80

Clinician	Date Added	Goal Date	Status	Note
Melissa Walls	2009-12-21	2010-01-21	In Progress	Encouraged pt. to discuss blood pressure with PCP.

Cholesterol

Consult	Recommended†	Goal
Total: 260 HDL: 37 LDL: >190	Total: < 200 HDL: 40+ LDL: < 100	Total: 195 HDL: 60 LDL: 95

Clinician	Date Added	Goal Date	Status	Note
Melissa Walls	2009-12-21	2010-01-21	In Progress	Encouraged pt. to see her PCP doctor about chol. levels and to begin exercise to increase HDL and watch dietary chol/sat. fats, trans fats to decrease LDL.

Smoking

Consult	Recommended†	Goal
Amount Smoked Per Day: 1 pack	Amount Smoked Per Day: None	Amount Smoked Per Day: None

Clinician	Date Added	Goal Date	Status	Note
Melissa Walls	2009-12-21	2010-01-21	In Progress	Encouraged pt. to stop smoking. Discussed some stop smoking ideas and brochure with teaching on it given.

Fitness

Consult	Recommended†	Goal
Exercise Frequency: None	Exercise Frequency: 5 or more times per week	Exercise Frequency: 3 to 4 times per week

Clinician	Date Added	Goal Date	Status	Note
Melissa Walls	2009-12-21	2010-01-21	In Progress	Encouraged to begin exercising with walking 3 times a week for 30 minutes per day.

Weight

Consult	Recommended†	Goal
Weight: 200 lbs.	Weight: 108-146 lbs.	Weight: 146 lbs.

Clinician	Date Added	Goal Date	Status	Note
Melissa Walls	2009-12-21	2010-01-21	In Progress	Pt. wants to lose weight. Weight loss packet given and teaching done with pt.

Clinician Notes

	Date Added	Clinician	Section	Note
1	08.13.2009	Melissa Walls		This is a test report for educational purposes only. Each PCP will receive a copy of this report via fax. Lipid Profile results will also be included.

†Source: American Heart Association and American Diabetes Association, March 2011