

2019

Community Health Needs Assessment

DeKalb County, Tennessee

Saint Thomas DeKalb Hospital



 Saint Thomas
Health

 Ascension

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Perspective/Overview

Creating a culture of health in the community



Action Cycle Source: the Robert Wood Johnson Foundation's County Health Rankings
website: <http://www.Countyhealthrankings.org/roadmaps/action-center>

The Community Health Needs Assessment (CHNA) uses a systematic, comprehensive data collection and analysis to define priorities for health improvement, creates a collaborative community environment to engage stakeholders, and an open and transparent process to listen and truly understand the health needs of DeKalb County, Tennessee.

About Saint Thomas DeKalb Hospital

About Saint Thomas Health

Saint Thomas Health (STH) is Middle Tennessee's faith-based, not-for-profit health care system united as one healing community. Saint Thomas Health is focused on transforming the healthcare experience and helping people live healthier lives, with special attention to the poor and vulnerable. The regional health system includes nine hospitals: Saint Thomas Midtown Hospital, Saint Thomas West Hospital and Saint Thomas Hospital for Specialty Surgery in Nashville, Saint Thomas Rutherford Hospital in Murfreesboro, Saint Thomas Hickman Hospital in Centerville, Saint Thomas Stones River Hospital in Woodbury, Saint Thomas Highlands Hospital in Sparta, Saint Thomas River Park Hospital in McMinnville and Saint Thomas DeKalb Hospital in Smithville. A comprehensive network of affiliated joint ventures, medical practices, clinics and rehabilitation facilities complements the hospital services. Saint Thomas Health is part of Ascension, a Catholic organization that is the largest not-for-profit health system in the United States.

About Saint Thomas DeKalb Hospital

Saint Thomas DeKalb Hospital is a 71-bed hospital located in Smithville, Tennessee. It provides emergency services and adult and geriatric behavioral health care.

About Ascension

Ascension is a faith-based healthcare organization dedicated to transformation through innovation across the continuum of care. As the largest non-profit health system in the U.S. and the world's largest Catholic health system, Ascension is committed to delivering compassionate, personalized care to all, with special attention to persons living in poverty and those most vulnerable. In FY2018, Ascension provided nearly \$2 billion in care of persons living in poverty and other community benefit programs. Ascension includes approximately 156,000 associates and 34,000 aligned providers. Ascension's Healthcare Division operates more than 2,600 sites of care – including 151 hospitals and more than 50 senior living facilities – in 21 states and the District of Columbia, while its Solutions Division provides a variety of services and solutions including physician practice management, venture capital investing, investment management, biomedical engineering, facilities management, clinical care management, information services, risk management, and contracting through Ascension's own group purchasing organization.

2019 Community Health Needs Assessment

Saint Thomas DeKalb Hospital as the sponsor of the assessment, engaged national leaders in community health needs assessments to assist in the project. Stratasan, a healthcare analytics and facilitation company based out of Nashville, Tennessee, provided the analysis of community health data, facilitated the focus group, conducted some interviews and facilitated a community health summit to receive community input into the priorities and brainstorm community assets and how they might assist with the top priorities.

This CHNA assesses health in DeKalb County, the primary service area of Saint Thomas DeKalb Hospital.



Starting on July 1, 2019 this report is made widely available to the community via Saint Thomas DeKalb Hospital's website and paper copies are available free of charge at Saint Thomas DeKalb Hospital, 520 West Main Street, Smithville, TN 37166 or by phone (615) 215-5000.

PROJECT GOALS

1

To continue a formal and comprehensive community health assessment process which allows for the identification and prioritization of significant health needs of the community to assist with resource allocation, informed decision-making and collective action that will improve health.

2

To continue a collaborative partnership between all stakeholders in the community by seeking input from persons who represent the broad interests of the community.

3

To support the existing infrastructure and utilize resources available in the community to instigate health improvement in the community.

“ We initiated the Community Health Needs Assessment with the goal to assess the health and needs of the community and create a coalition to address those needs. This process is an affirmation of what we’ve been doing and has increased awareness of available resources,” said Elizabeth Malmstrom, Director Community Benefit, Saint Thomas Health.

“The information gathered both from public health data and from community stakeholders provided the insight the community needed to set priorities for significant health issues and will be used by the community to inform and support our implementation plans,” added Brad Mullinax, CEO, Saint Thomas DeKalb Hospital.



Photo credit DeKalb County Chamber of Commerce website

Community

Input and Collaboration

Data Collection and Timeline

In January 2019, Saint Thomas DeKalb Hospital began a Community Health Needs Assessment for DeKalb County. Saint Thomas DeKalb Hospital sought input from persons who represent the broad interests of the community using several methods:

- 22 community members, not-for-profit organizations (representing medically underserved, low-income, minority populations, and the elderly), health providers, local government, businesses and clergy, participated in a focus group and individual interviews for their perspectives on community health needs and issues on December 17, 2018 and January 3 and 31, 2019.
- Information gathering, using secondary public health sources, occurred in January, 2019.
- An online community survey was conducted from October 22nd, 2018 - January 25th, 2019. 334 surveys were completed.
- A Community Health Summit was conducted on February 27th, 2019 with 19 community stakeholders. The audience consisted of healthcare providers, business leaders, government representatives, schools, not-for-profit organizations, employers and other community members.



Photo Credit Daily Chronicle



Photo Credit DeKalb County Schools Website

Participants

Thirty-eight individuals from twenty-one community and healthcare organizations collaborated to implement a comprehensive CHNA process focused on identifying and defining significant health needs, issues, and concerns of DeKalb County. In order to create a plan to improve the health of the community, Saint Thomas spent three months engaging stakeholders who represented broad interests, provided direction, and gave context to the needs of the community.

Participation by those Representing the Broad Interests of the Community

Participation in the focus groups and at the Community Health Summit creating the DeKalb County Community Health Needs Assessment and Improvement Plan included:

| Organization | Population Represented (kids, low income, minorities, those w/o access) | How Involved |
|--|---|---------------------|
| Congressman | All | Summit |
| Coordinated School Health | Youth | Focus Group |
| DeKalb County Drug Court | All | Focus Group |
| DeKalb County Health Department | Health Education | Summit |
| DeKalb County Mayor | All | Summit, Interview |
| DeKalb Prevention Coalition | Community drug prevention | Summit |
| Director of schools | Youth | Interview |
| Drug Court Coordinator | Community drug prevention | Focus Group |
| EMS director | All | Interview |
| Family Consumer Science Agent | All | Focus Group |
| Family Medical Center | All | Focus Group |
| Haven of Hope Counseling | Mental Health Community | Summit, Focus Group |
| HR department at Federal Mogul | All | Focus Group |
| Prospect Inc. | Aging, Special Needs | Summit |
| Recovery Court | Substance Abuse | Summit |
| Saint Thomas Health | All | Summit |
| Sheriff | All | Focus Group |
| Small business owner | All | Focus Group |
| TDH- Upper Cumberland Regional Office | Health Education | Summit |
| Upper Cumberland Human Resource Agency | Low income | Summit |
| Volunteer | All | Summit, interview |

In many cases, several representatives from each organization participated.

Input of the Medically Underserved, Low-income, and Minority Populations

Input of medically underserved, low-income and minority populations was received during the focus groups, interviews, and the Community Health Summit. Agencies representing these population groups were intentionally invited to the focus group, interviews and Summit.

Input of those with Expertise in Public Health

Representatives of the DeKalb County Health Department participated in the interviews as well as presenting at and attending the Summit. Michael Railing, Direct of DeKalb County Health Department, presented the state of Tennessee Department of Health priorities as well as local health Department initiatives.

Community Engagement and Transparency

Many members of the community participated in the focus group, individual interviews, and the Summit. We are pleased to share the results of the Community Health Needs Assessment with the rest of the community in hopes of attracting more advocates and volunteers to improve the health of DeKalb County. The following pages highlight key findings of the assessment. The comprehensive data analysis may be obtained via a PDF on the website or by contacting Saint Thomas DeKalb Hospital.

Public comments were available in the previous 2016 CHNA report but no comments or suggestions were made.

Community Selected for Assessment

DeKalb County was the primary focus of the CHNA due to the service area of Saint Thomas DeKalb Hospital. 80% of Saint Thomas DeKalb's inpatients come from DeKalb County. The community includes medically underserved, low-income and minority populations who live in the geographic areas from which Saint Thomas DeKalb Hospital draws its patients. All patients were used to determine the service area without regard to insurance coverage or eligibility for financial assistance under Saint Thomas DeKalb Hospital's Financial Assistance Policy.

Saint Thomas DeKalb Hospital - 2017



Source: Stratason
(2018)

Key Findings

Community Health Assessment

Based on the primary and secondary data collected, the following needs were prioritized by attendees at the Community Health Summit. The remainder of the document outlines the process and data.

1. Substance use disorder and mental health
2. Obesity
3. Education and kid's health
4. Access

Process and Methods

Both primary and secondary data sources were used in the CHNA.

Primary methods included:

- Community focus group
- Individual interviews with community members
- Online community survey
- Community Health Summit

Secondary methods included:

- Public health data – death statistics, County Health Rankings
- Demographics – population, poverty, uninsured
- Psychographics – Behavior measured by spending and media preferences

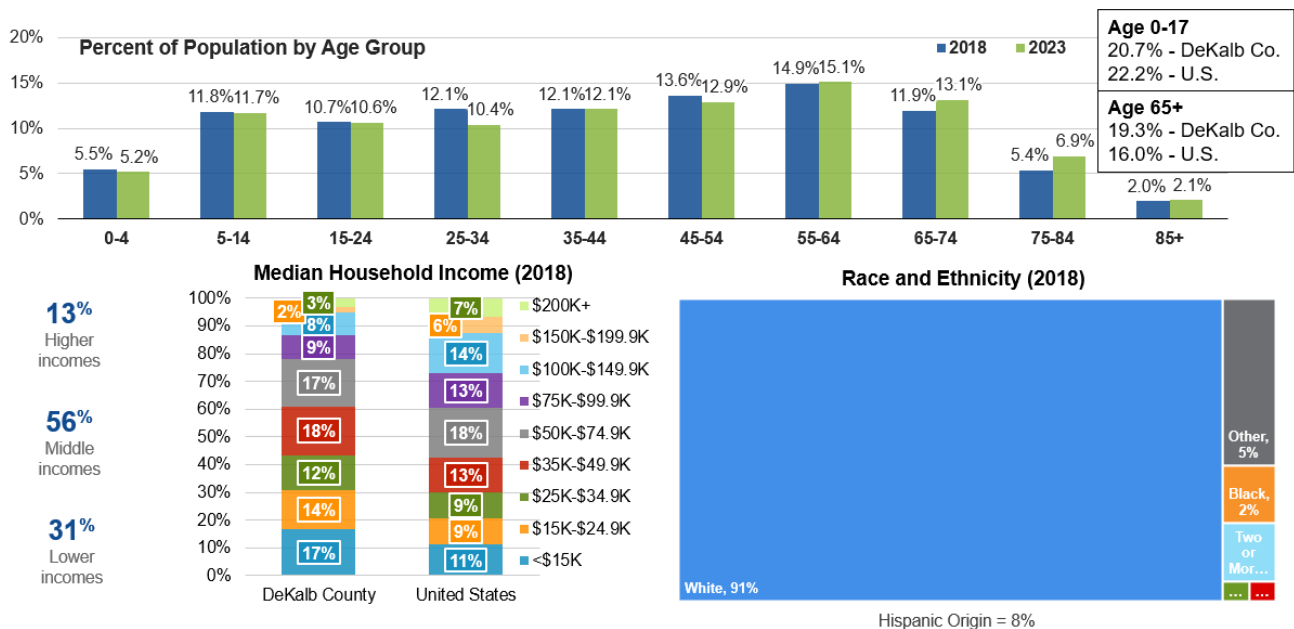


Photo credit Stratasan

Demographics of the Community 2018-2023

The table below shows the demographic summary of DeKalb County compared to Tennessee and the U.S.

| | DeKalb County | Tennessee | USA |
|---------------------------------------|---------------------------|--------------------|------------------|
| Population | 19,251 | 6,818,402 | 330,088,686 |
| Median Age | 43.2 | 39.4 | 38.3 |
| Median Household Income | \$39,371 | \$49,776 | \$58,100 |
| Annual Pop. Growth (2018-2023) | 0.42% | 0.89% | 0.83% |
| Household Population | 7,613 | 2,671,026 | 124,110,001 |
| Dominant Tapestry | Rooted Rural (10B) | Rooted Rural (10B) | Green Acres (6A) |
| Businesses | 585 | 227,771 | 11,539,737 |
| Employees | 6,729 | 3,172,301 | 151,173,763 |
| Medical Care Index* | 85 | 89 | 100 |
| Average Medical Expenditures | \$1,649 | \$1,733 | \$1,950 |
| Total Medical Expenditures | \$12.6 M | \$4.6 B | \$242.0 B |
| Racial and Ethnic Make-up | | | |
| White | 91% | 76% | 70% |
| Black | 2% | 17% | 13% |
| American Indian | 0% | 0% | 1% |
| Asian/Pacific Islander | 0% | 2% | 6% |
| Other | 5% | 3% | 7% |
| Mixed Race | 2% | 2% | 3% |
| Hispanic Origin | 8% | 6% | 18% |

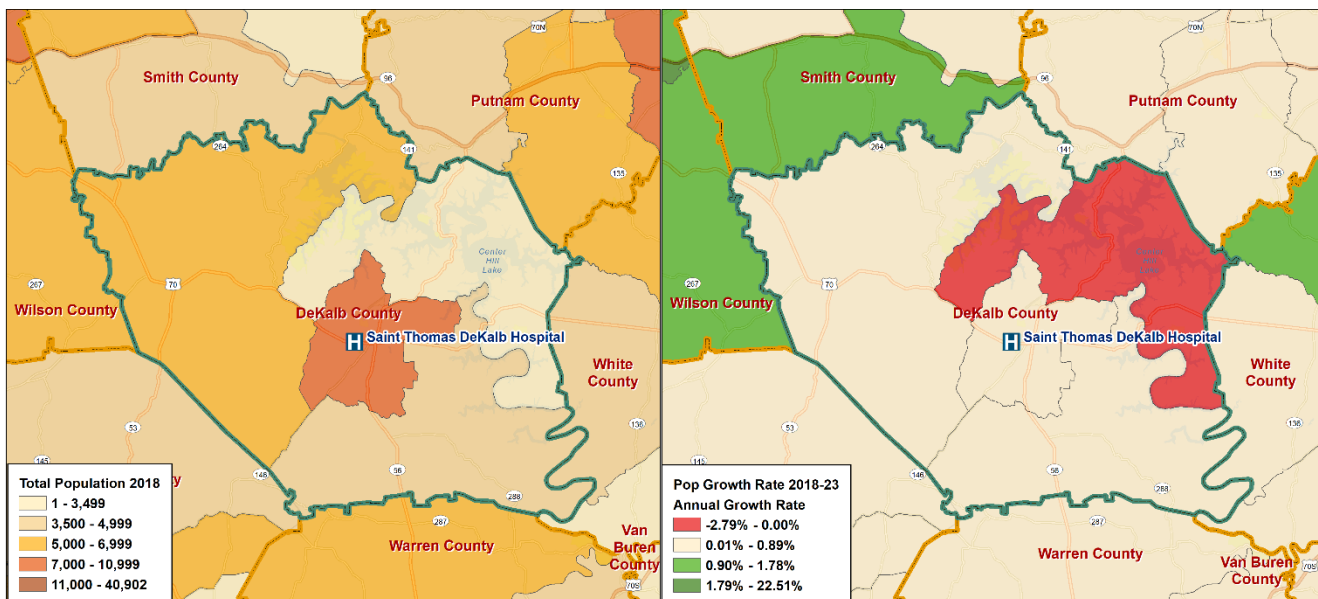


Source: ESRI

¹The median is the value at the midpoint of a frequency. There is an equal probability of falling above or below the median.

- The population of DeKalb County was projected to increase from 2018 to 2023 (0.42% per year). Tennessee was projected to increase 0.89% per year. The U.S. was projected to increase 0.83% per year.
- DeKalb County had a higher median age (43.2 median age) than TN, 39.4 and the U.S. 38.3. DeKalb County percentage of the population 65 and over was 19.3%, higher than the US population 65 and over at 16%.
- DeKalb County had lower median household income at \$39,371 than TN (\$49,776) and the U.S. (\$58,100). The rate of poverty in DeKalb County was 19.8% which was higher than the U.S (14%), but lower than TN (15.8%).
- The household income distribution of DeKalb County was 13% higher income (over \$100,000), 56% middle income and 31% lower income (under \$24,999).
- The medical care index measures how much the population spent out-of-pocket on medical care services. The U.S. index was 100. DeKalb County was 85, indicating 15% less spent out of pocket than the average U.S. household on medical care (doctor's office visits, prescriptions, hospital visits).
- The racial and ethnic make-up of DeKalb County was 91% white, 8% Hispanic Origin, 5% other, 2% black, 2% mixed race. (These percentages total to over 100% because Hispanic is an ethnicity, not a race.)
- 12.2% of the population under 65 were uninsured in DeKalb County.

2018 Population by Census Tract and Change (2018-2023)

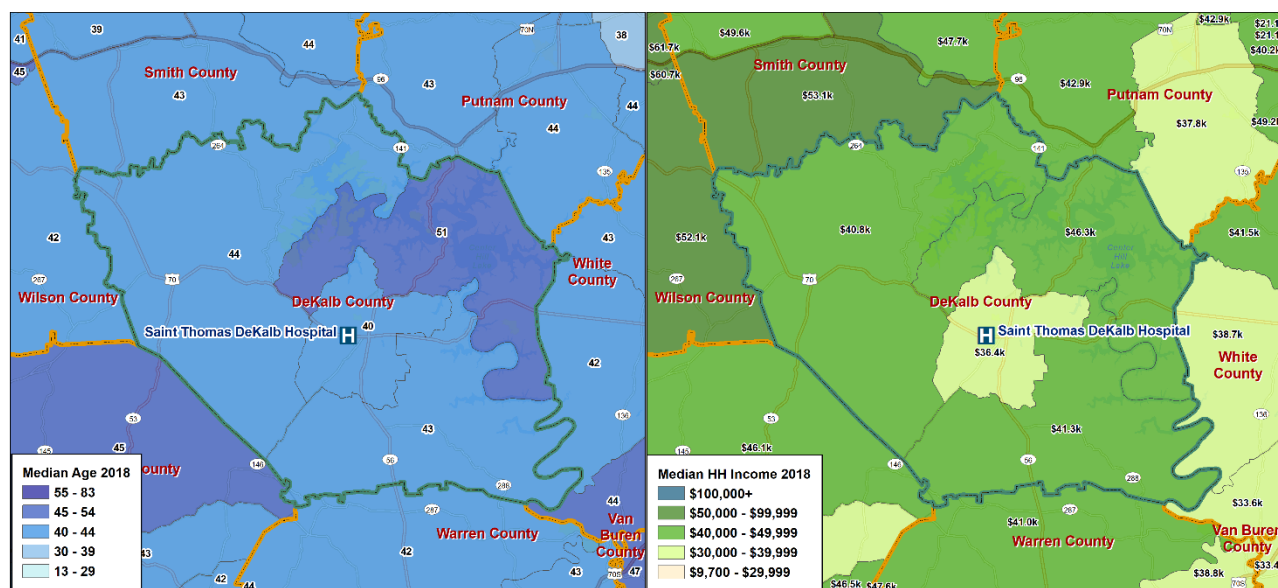


Source: ESRI

Red is population decline
 Yellow is positive up to the TN growth rate
 Green is greater than the TN growth rate
 Dark Green is twice the TN growth rate

Census tracts generally have a population size between 1,200 and 8,000 people, with an optimum size of 4,000 people. The census tract surrounding the hospital had the largest population ranging from 7,000-10,999 people. Northwest of the hospital had the next largest population tract with 5,000-6,999 people. The tract south of the hospital had a total population of 3,500-6,999. The area northeast of the hospital, surrounding Center Hill Lake, had lowest total population with 3,500-4,999 people. This tract is the only tract in DeKalb County that is projected to have a negative annual growth rate from 2018 to 2023.

2018 Median Age & Income



Source: ESRI

These maps depict median age and median income by census tract. Looking at age and income by census tract is helpful to demonstrate all areas of a county are not the same. The tract surrounding the hospital had a median age of 40. The tract northeast of the hospital had the oldest tract with a median age of 51. The other tracts had median ages of 43 and 44.

Looking at median household income by census tract can help determine different community needs within the county. The tract surrounding the hospital had the lowest median household income of \$36,400. The tract in the northeast had the highest median household income of \$46,300. The other tracts had median household incomes of \$40,800 and \$41,300.

Additionally, DeKalb County's September 2018 preliminary unemployment was 4.8%, compared to 3.7% for Tennessee and the U.S., which is a large decline in unemployment since 2014. These figures do not include those who have ceased looking for work and dropped out of the workforce. However, indications are these people have begun to reenter the workforce.

Business Profile

68.3% of employees in DeKalb County were employed in:

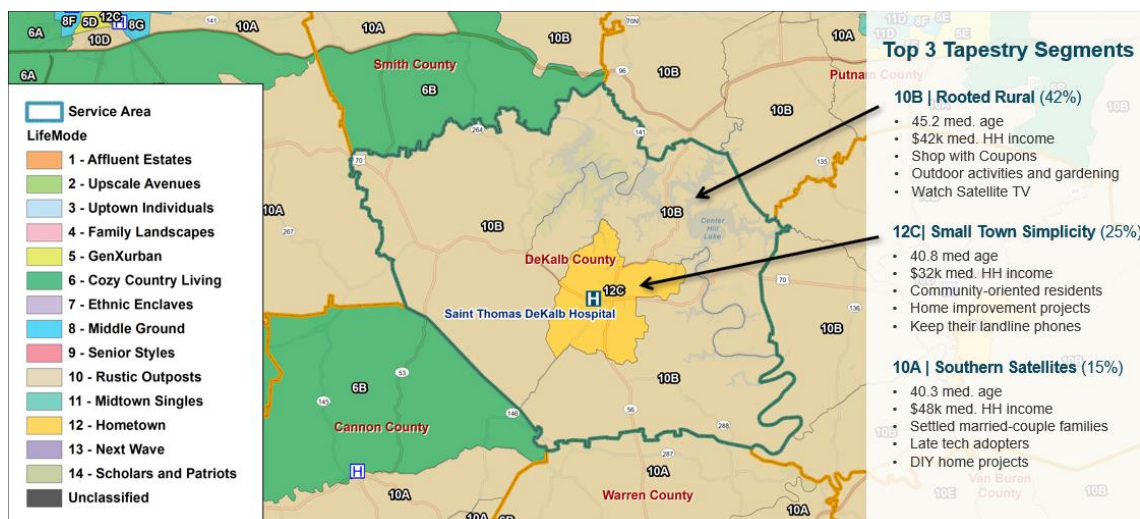
- Manufacturing (36.2%)
- Retail trade (9.7%)
- Health care & social assistance (9.1%)
- Public administration (7.5%)
- Wholesale trade (5.8%)

Retail trade offers health insurance at a lower rate than healthcare, public administration and educational services. Many residents leave the county for retail shopping, thus harming the county's ability to build retail/dining, which could make leaving for healthcare easier. DeKalb County loses 709 net commuters per day commuting outside the county for work, with 2,548 commuting out of the county and 1,839 commuting into the county.

Tapestry Segmentation

The dominant Tapestry Segments in the county were Rooted Rural (42%), Small Town Simplicity (25%), and Southern Satellites (15%). There is a very brief description of the segments on the right of the map and on the next two pages. There is much more information on Tapestry Segments, at <http://doc.arcgis.com/en/esri-demographics/data/tapestry-segmentation.htm>. Studying the Tapestry Segments in the study area help determine health habits and communication preferences of residents enabling more effective communication and implementation of solutions.

Demographics are population, age, sex, race. Psychographics are adding behavior data in the form of spending habits and survey data on top of demographics. 82% of DeKalb County are in these three Tapestry Segments. The map is color coded by LifeMode, which are groupings of Tapestry Segments that behave similarly.



Source: ESRI



LifeMode Group: Rustic Outposts

Rooted Rural

10B

Households: 2,430,900

Average Household Size: 2.48

Median Age: 45.2

Median Household Income: \$42,300

WHO ARE WE?

Rooted Rural is heavily concentrated in the Appalachian mountain range as well as in Texas and Arkansas. Employment in the forestry industry is common, and *Rooted Rural* residents live in many of the heavily forested regions of the country. Nearly 9 of 10 residents are non-Hispanic whites. This group enjoys time spent outdoors, hunting, fishing, or working in their gardens. Indoors, they enjoy watching television with a spouse and spending time with their pets. When shopping, they look for American-made and generic products. These communities are heavily influenced by religious faith, traditional gender roles, and family history.

OUR NEIGHBORHOOD

- This market is dominated by married couples, few with children at home.
- 80% of homes are owner occupied: primarily single family (73%) or mobile homes (24%).
- Nearly one in five housing units are vacant, with a high proportion for seasonal use.
- Home values are very low—almost half of owned homes are valued under \$100,000.

SOCIOECONOMIC TRAITS

- Thrifty shoppers that use coupons frequently and buy generic goods.
- Far-right political values on religion and marriage.
- Do-it-yourself mentality; grow their own produce and work on their cars and ATVs.
- Pay bills in person and avoid using the Internet for financial transactions.
- Often find computers and cell phones too complicated and confusing.
- Clothes a necessity, not a fashion statement; only buy new clothes



LifeMode Group: Hometown

Small Town Simplicity

12C

Households: 2,305,700

Average Household Size: 2.26

Median Age: 40.8

Median Household Income: \$31,500

WHO ARE WE?

Small Town Simplicity includes young families and senior householders that are bound by community ties. The lifestyle is down-to-earth and semirural, with television for entertainment and news, and emphasis on convenience for both young parents and senior citizens. Residents embark on pursuits including online computer games, renting movies, indoor gardening, and rural activities like hunting and fishing. Since 1 in 4 households is below poverty level, residents also keep their finances simple—paying bills in person and avoiding debt.

OUR NEIGHBORHOOD

- They reside in small towns or semirural neighborhoods, mostly outside metropolitan areas.
- Homes are a mix of older single-family houses (61%), apartments, and mobile homes.
- Half of all homes are owner-occupied (Index 79).
- Median home value of \$92,300 is about half the US median.
- Average rent is \$639 (Index 62).
- This is an older market, with half of the householders aged 55 years or older, and predominantly single-person households (Index 139).

SOCIOECONOMIC TRAITS

- Education: 67% with high school diploma or some college.
- Unemployment higher at 7.7% (Index 141).
- Labor force participation lower at 52% (Index 83), which could result from lack of jobs or retirement.
- Income from wages and salaries (Index 83), Social Security (Index 133) or retirement (Index 106), increased by Supplemental Security Income (Index 183).
- Price-conscious consumers that shop accordingly, with coupons at discount centers.
- Connected, but not to the latest or greatest gadgets; keep their landlines.
- Community-orientated residents; more conservative than middle-of-the-road.
- Rely on television or newspapers to stay informed.

Source: ESRI



LifeMode Group: Rustic Outposts Southern Satellites

10A

Households: 3,856,800

Average Household Size: 2.67

Median Age: 40.3

Median Household Income: \$47,800

WHO ARE WE?

Southern Satellites is the second largest market found in rural settlements but within metropolitan areas located primarily in the South. This market is typically nondiverse, slightly older, settled married-couple families, who own their homes. Two-thirds of the homes are single-family structures; almost a third are mobile homes. Median household income and home value are below average. Workers are employed in a variety of industries, such as manufacturing, health care, retail trade, and construction, with higher proportions in mining and agriculture than the US. Residents enjoy country living, preferring outdoor activities and DIY home projects.

OUR NEIGHBORHOOD

- About 78% of households are owned.
- Married couples with no children are the dominant household type, with a number of multigenerational households (Index 112).
- Most are single-family homes (67%), with a number of mobile homes (Index 509).
- Most housing units were built in 1970 or later.
- Most households own 1 or 2 vehicles, but owning 3+ vehicles is common (Index 144).

SOCIOECONOMIC TRAITS

- Education: almost 40% have a high school diploma only (Index 140); 45% have college education (Index 73).
- Unemployment rate is 6%, slightly higher than the US rate.
- Labor force participation rate is 59.1%, slightly lower than the US.
- These consumers are more concerned about cost rather than quality or brand loyalty.
- They tend to be somewhat late in adapting to technology.
- They obtain a disproportionate amount of their information from TV, compared to other media.

Focus Group and Interview Results

Twenty-two community stakeholders representing the broad interests of the community participated in a focus group and individual interviews on December 17, 2018 and January 3, & 31, 2019 for their input into the community's health. Community participation in the focus group and interviews represented a broad range of interests and backgrounds. Below is a summary of the 90-minute focus group discussion and individual interviews.

1. How do you define health?

- Can wake up breathing, not having to go to the doctor, active moving around
- Take care of yourself, mentally, emotionally, physically and you can't tell by looking
- Feel good,
- Mentally and physically healthy

2. Generally, how would you describe the community's health?

- Poor – doesn't look healthy, people wheezing, coughing and hunched over
- Overall healthy
- Very healthy and very sick people
- Lacking in mental health, not so much physical

3. Based on your experience, what are the biggest community issues facing DeKalb County today?

- Tax structure – low tax rate, one of the lowest property taxes in the state create a lack of resources
- Not a lot of activities for kids, maybe the reason for drug use
- Parents not parenting
- Ongoing drug issues, education on drug use especially to younger kids
- Lack of housing
- Suicide rate high
- Abuse
- Crime
- Growth of County
- Education – school safety, students per teacher, how well are we preparing young people for 21st century jobs
- Attitudes, naivete about healthy living and choices
- No public transportation

Focus Group and Interview Results cont.

4. What are the most important health issues facing DeKalb County?

- Substance abuse - meth, opioids, inhalants (i.e. Raid), prescription drugs, marijuana
- Education about drug use, more education
- Mental health - lack of knowledge and treatment, may be tied to the substance abuse, lack of access to treatment, stigma, seniors confined to their home
- High suicide rate
- Education system needs improvements
- Obesity - kids and adults, poor diet choices, no exercise
- Smoking
- Grandparents raising grandchildren
- Teen pregnancy
- Diabetes
- Cancer
- Vision – kids need glasses
- Hunger – access to grocery stores
- Access to insurance, underinsured, access to care – TN did not expand Medicaid. Concern about sustainability of hospitals and doctors
- Limited specialty care – oncology

5. What are the biggest health issues for Kids, Seniors, Medically-underserved, low income and minority populations?

Kids:

- Obesity and lack of physical activity, nutrition
- Teen pregnancy
- Lack of parenting
- Lack of mental health treatment
- Need more drug abuse and health education
- Poor living conditions
- Lack of youth activities

Seniors:

- Hard to get affordable help
- Lack of public transportation to medical services
- Low income, ability to afford medicine, caregivers
- Depression and dementia

Low-income:

- Harder to get help particularly mental health
- Can't afford healthcare or insurance
- Lack of available jobs
- Can't receive the resources that they need
- Drug abuse/addiction

Focus Group and Interview Results cont.

6. The community performed a CHNA in 2016 and identified priorities for health improvement:

Substance abuse (including tobacco) and mental health

Obesity

Access to care

Youth issues

How do these priorities compare to the issues today?

- All issues are worse
- Same, hasn't gotten better
- Improvements in obesity
- 75% of cases in court are drug-related
- Teen pregnancy is better
- There may be too many government programs keeping people from getting a job

7. What behaviors have the most negative impact on health?

- Using and selling prescription drugs on the streets
- Drugs are too available and a lack of connection between using drugs and consequences
- Not seeking help for health or mental health
- Ignoring the need for more resources for health and education
- Being unwilling to change

8. What environmental factors have the biggest impact on community health?

- The job market is good, people can get work if they want
- There's no fluoride in the drinking water
- Factory workers seem to have an inordinate amount of health issues
- Government not expanding insurance

9. What do you think are the obstacles or barriers to addressing these issues?

- People don't like to talk about mental health
- Health isn't considered a priority for funding
- Mindset – hard for people to accept they may need to change; not seeking help
- Health education, and lack of access to information
- The economy – effects what people are able to buy to eat
- Being stuck in a cycle of living the same way as the previous generation
- Information and knowledge on health
- Tax structure
- Fast food restaurants
- Prescribing rates
- The root of the problem isn't being addressed – cyclical, no food
- Limited access to mental health services, especially in schools
- Stigma – the belief that people can just stop taking drugs; people not understanding dependency
- Community is tailored to the seniors and kids get left behind
- "It was good enough for me"
- Access to transportation
- Money, resources, not enough volunteers, finding solutions

Focus Group and Interview Results cont.

10. What community assets support health and well-being?

- Saint Thomas DeKalb Hospital
- Volunteerism within the community
- Haven of Hope
- Churches – food pantry, shelters, coat closet, opening their doors to the community
- Upper Cumberland Human Resources Agency – has meals on wheels, home repairs, transportation
- Community Center with gym
- Back pack program in schools
- County complex fitness center
- Drug Court
- Factories that supply jobs to the community
- Silver Sneakers
- Spirit of collaboration, downtown coming alive, Center Hill business association
- Health Department
- Home health agencies
- Lake and outdoor recreation
- Halfway transitional house
- Public Library
- Senior Center
- Senior Health Fair
- Clubs and groups that great for the community
- 4H, UT Extension Program – Dining with Diabetes classes in February
- Family-oriented, kind community, willingness to help
- So much beauty in the area and help if you want it
- Crime is low
- Good jobs, diverse economy
- DeKalb County is a Healthier TN County

11. Where do members of the community turn for basic healthcare needs?

- Emergency Department
- Health Department
- Doctor's offices
- Fast Pace
- Clinics

Focus Group and Interview Results cont.

12. If you had a magic wand, what priority health improvement action should DeKalb County focus on?

- Affordable healthcare and health insurance
 - Mental health – prevention, treatment and access
 - Reduce drug addiction
 - More support for recovery
 - Programs and activities for kids
 - Better public schools
 - Improve the halfway houses
 - More healthy food alternatives
 - Alternatives to pain medication
 - Wellness classes for all students – health teachers
 - Focus on obesity and diabetes
 - More recreational activities – more walking trails, biking trails
 - Stop teen pregnancy
 - Build 3 more schools
 - Every student would have health class with a health teacher in every school
 - More guidance counselors
 - Educate through mentorship teaching there is a better way of life. Break the cycle.
 - A place to go after jail – housing, mentor, education
 - Teacher development, equipping and training children in ways that are necessary
 - All get computer classes and more access to computers
-



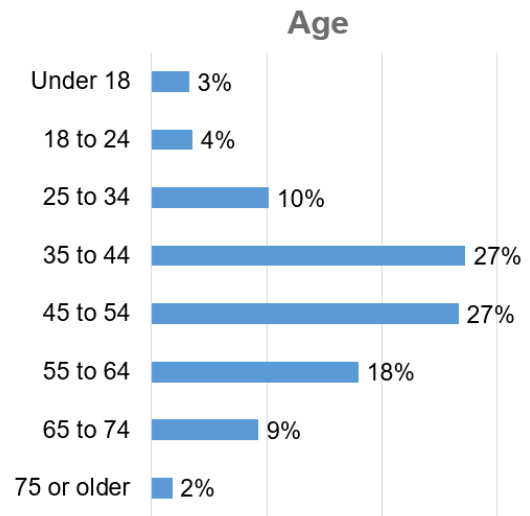
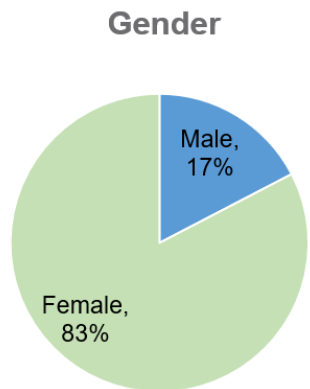
Photo Credit
DeKalb County
Wikipedia page

Survey Process

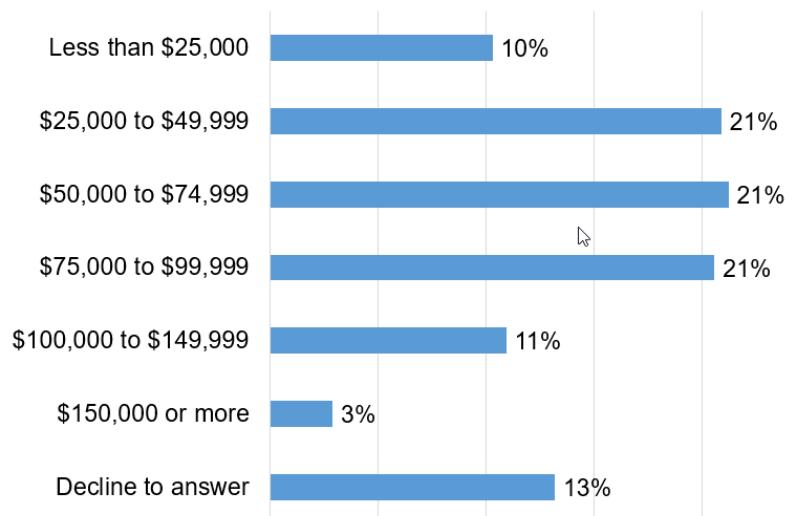
A survey was placed online and DeKalb County residents were encouraged to complete the online survey. The survey was opened on October 22, 2018 and closed January 25, 2019. 334 surveys were completed.

Survey Demographics

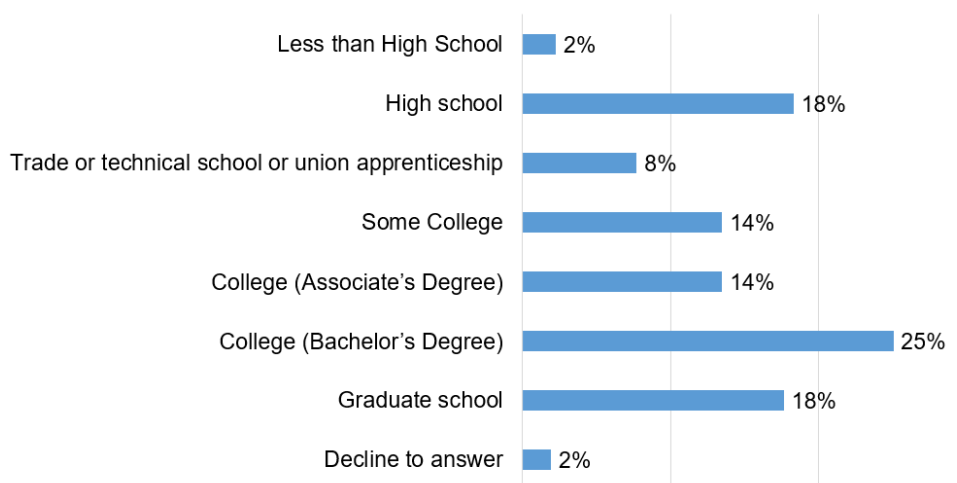
This survey skewed more female than the general population. However the age breakdown more closely reflects the adult population. Many times surveys skew older.



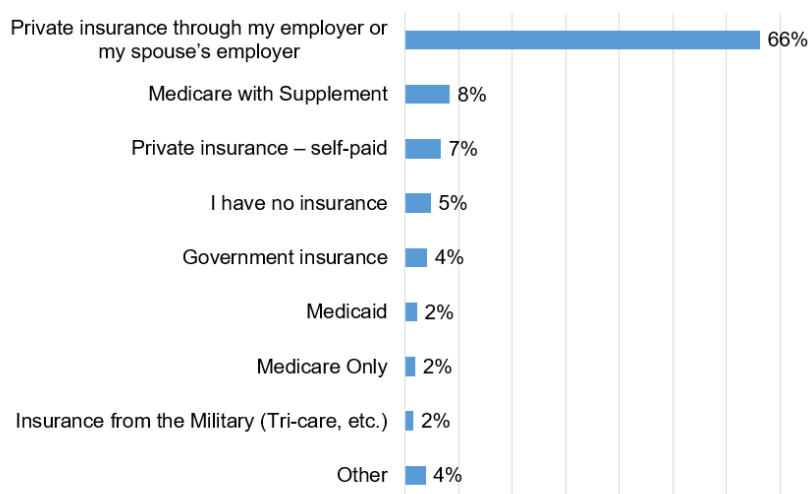
Which of the following includes your annual household income?



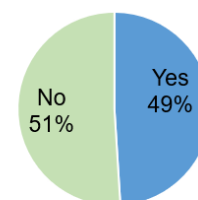
What is the highest level of education that you have completed?



Which of the following best describes your health insurance situation?



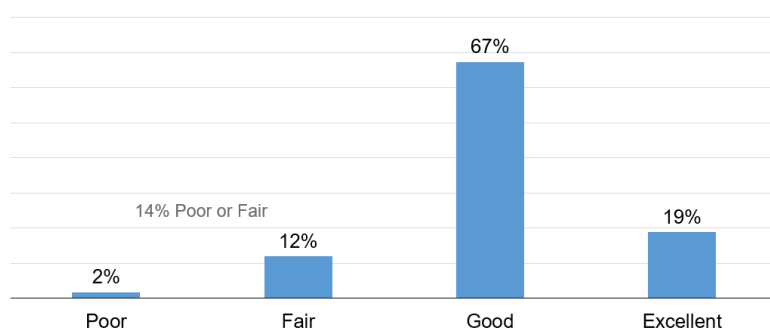
Do you have a high deductible health plan?



49% indicated they had a high deductible health plan. 66% indicated they had private insurance through their employer or their spouse's employer.

Health Status

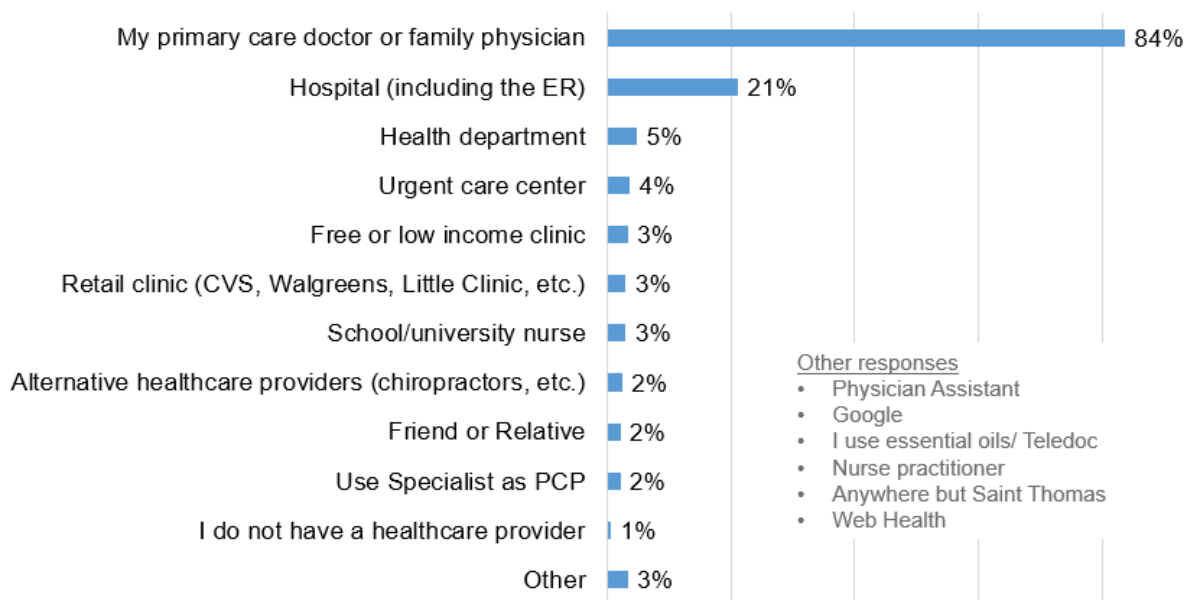
Generally, how would you describe your health?



14% described their health as poor or fair. 86% described their health as good or excellent.

Healthcare Needs

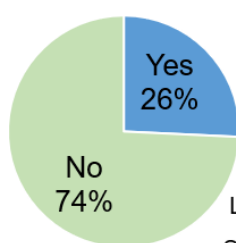
If you have one person or group you turn to for basic healthcare needs, where do you most go most often?



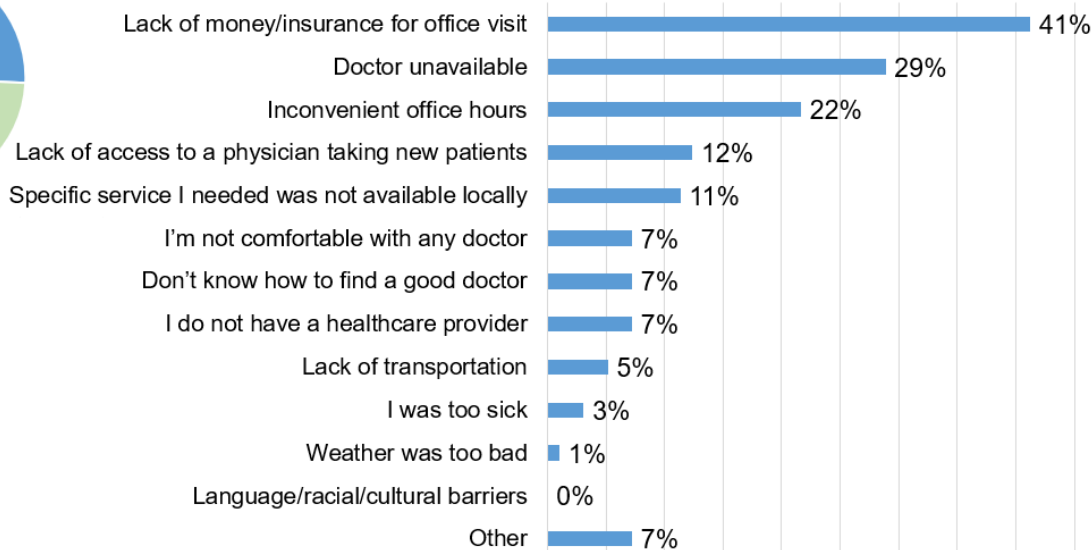
Most people surveyed go to their primary care doctor or family physician for basic healthcare needs, followed by urgent care centers then a hospital.

Physician Access

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

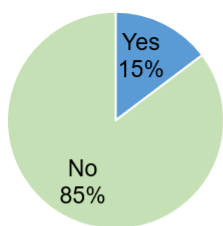


What are some of the reasons why you could not?

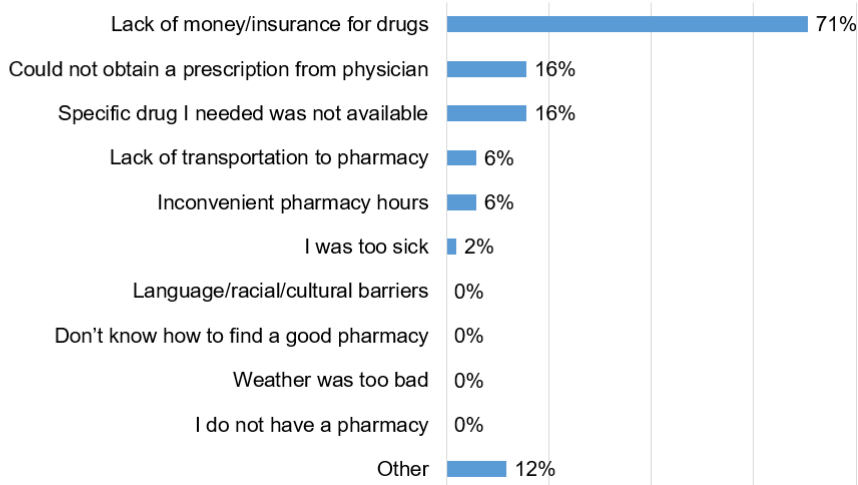


26% indicated there was a time in the last 12 months when they needed to see a doctor but could not. This is a higher percentage compared to other surveys. The primary reasons were lack of money or insurance for an office visit, or a doctor was unavailable.

Was there a time in the past 12 months when you needed medications but could not obtain them?



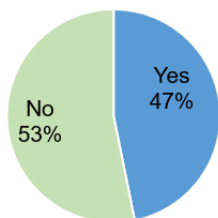
What are some of the reasons why you could not?



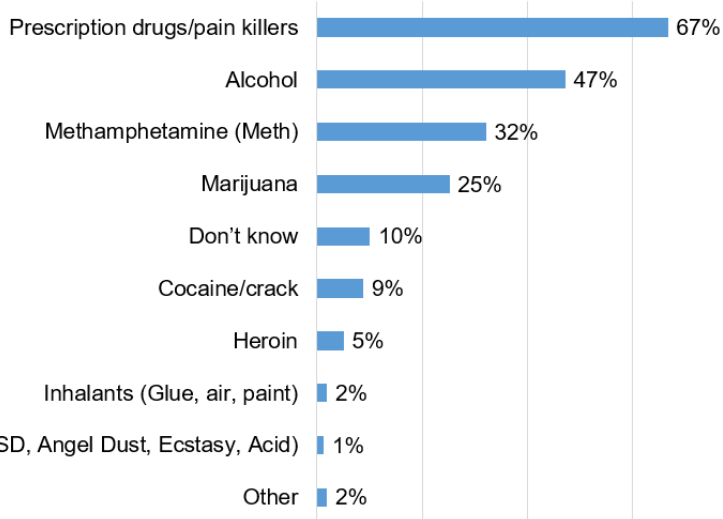
15% indicated there was a time in the last 12 months when they needed medications but could not obtain them. The primary reasons were lack of money or insurance for drugs, followed by not being able to obtain a prescription from a physician.

Substance Abuse

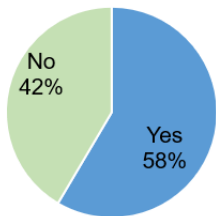
Have you, a relative, or close friend experienced substance abuse or addiction?



What substance was involved?



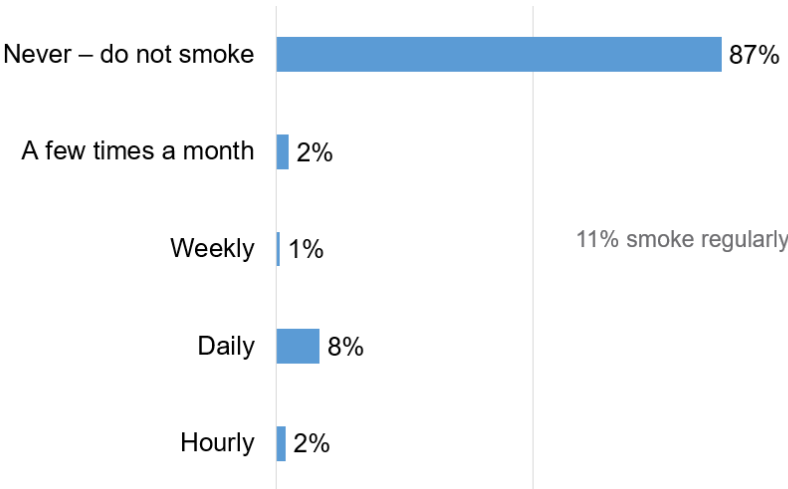
Was addiction treatment available?



47% indicated they, a relative, or close friend experienced substance abuse or addiction. The primary substance involved was prescription drugs/pain killers, followed by alcohol, and Methamphetamine. 58% indicated there was treatment available.

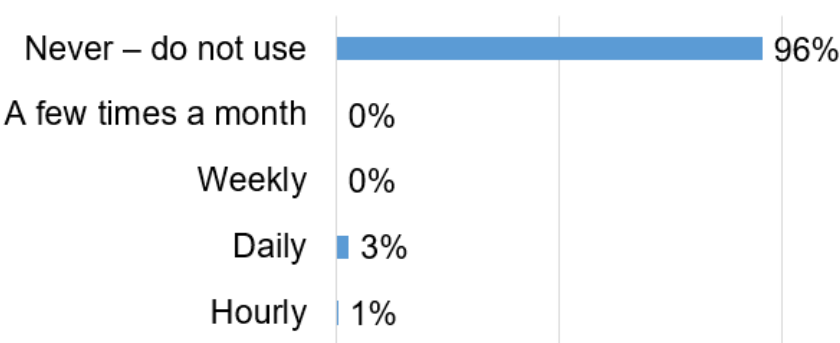
Smoking/Vaping

How often do you smoke, if you do?



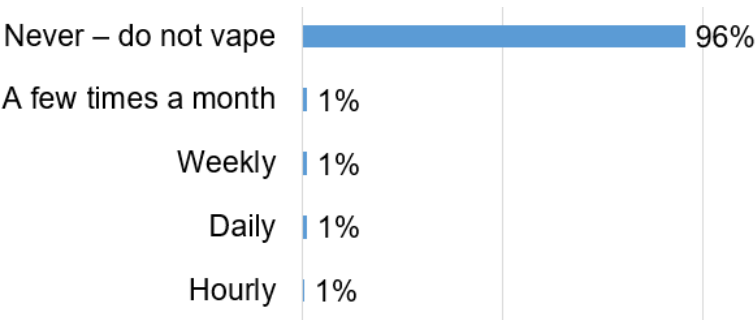
87% said they do not smoke. 11% smoke regularly.

How often do you use smokeless tobacco products, if you do?



96% said they do not use smokeless tobacco products. 4% use them regularly.

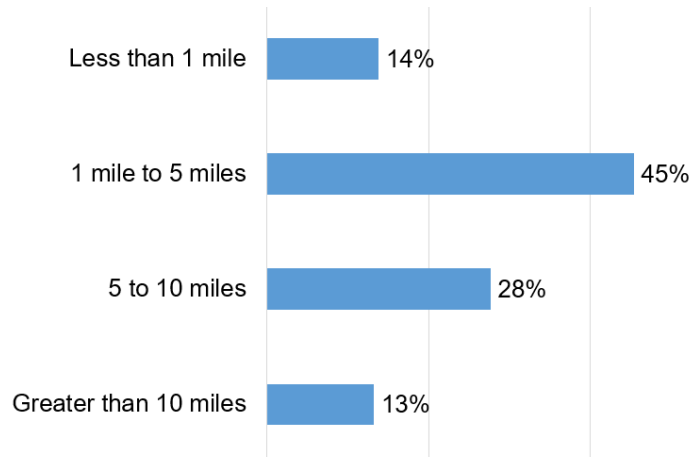
How often do you vape, if you do?



96% said they do not vape. 3% vape regularly.

Nutrition

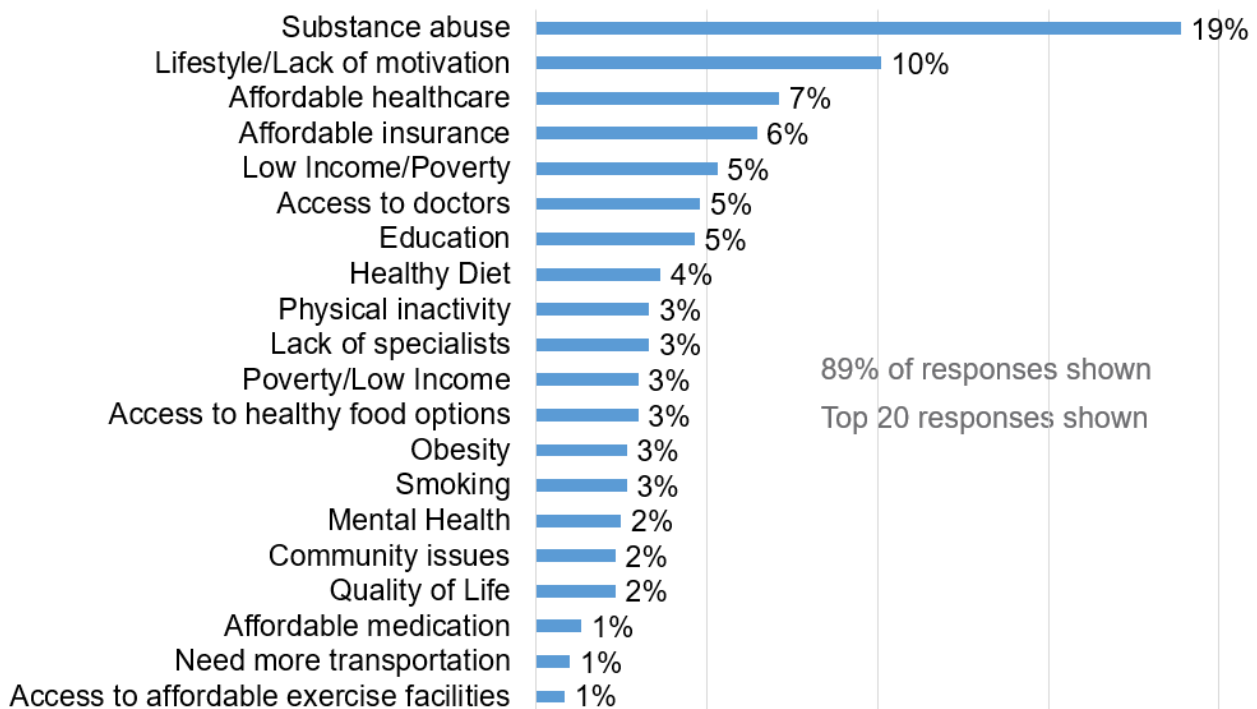
How close in distance is the nearest grocery store that offers fresh fruits and vegetables?



59% said there is a grocery store that offers fresh fruits and vegetables within 5 miles.

Community Health Issues

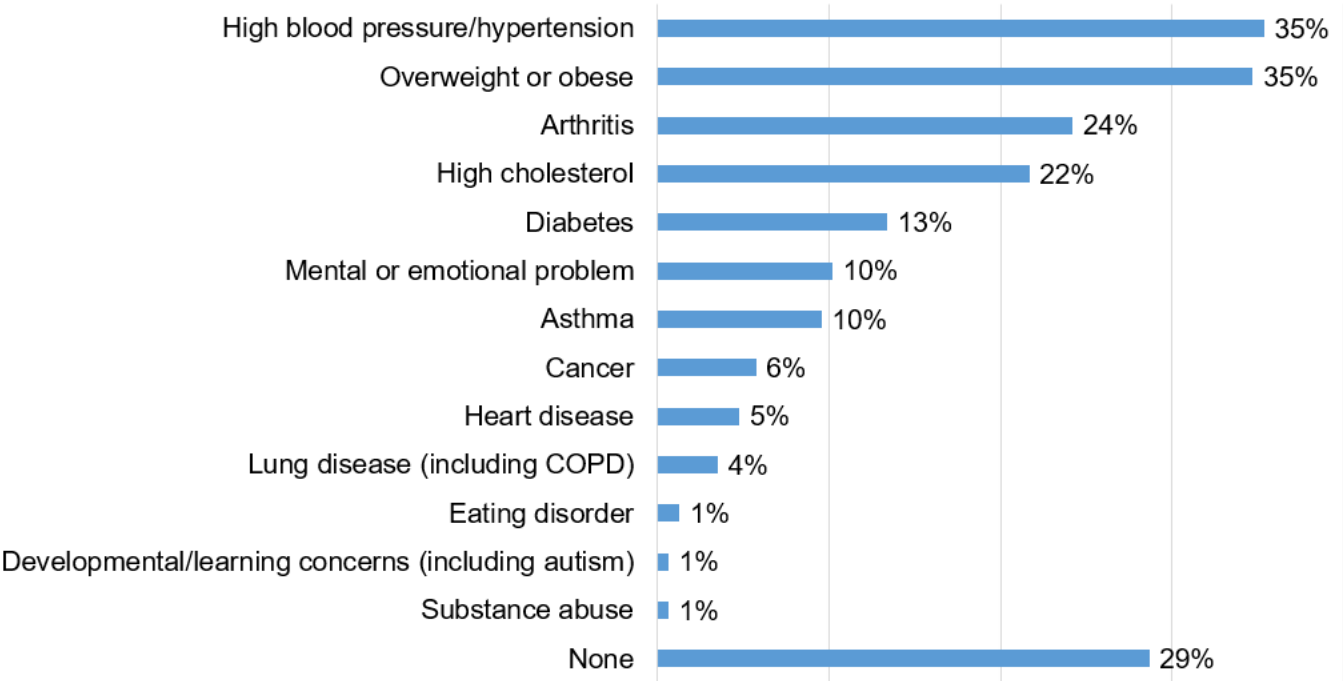
What are the top 3 issues in your community that impact people's health?



The top 3 issues impacting people's health in the community were identified as substance abuse, lifestyle/lack of motivation, and affordable healthcare.

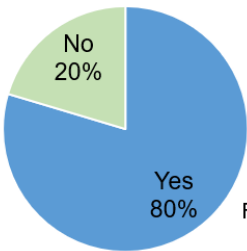
Health Conditions

Have you ever been told by a doctor you have any of these conditions, diseases, or challenges?

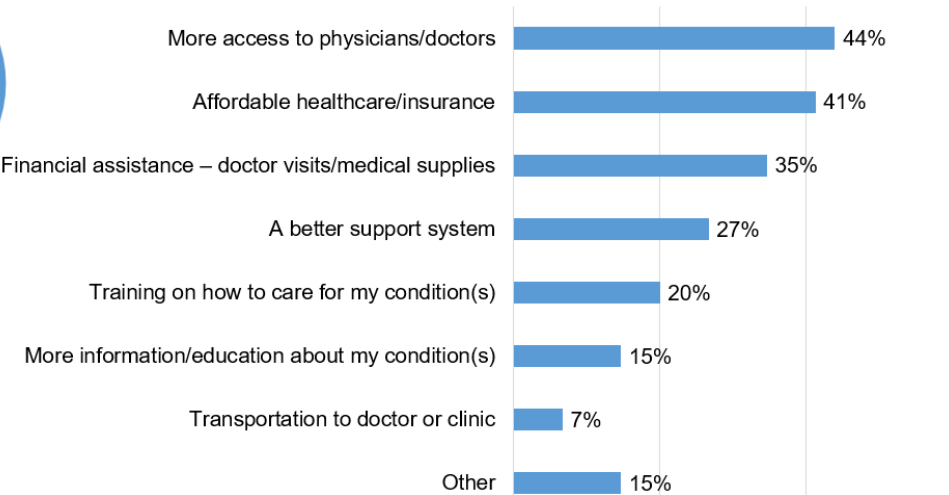


70% have been told by a doctor they have high blood pressure/hypertension or are overweight or obese.

Do you feel you have all that you need to manage your health condition(s)?



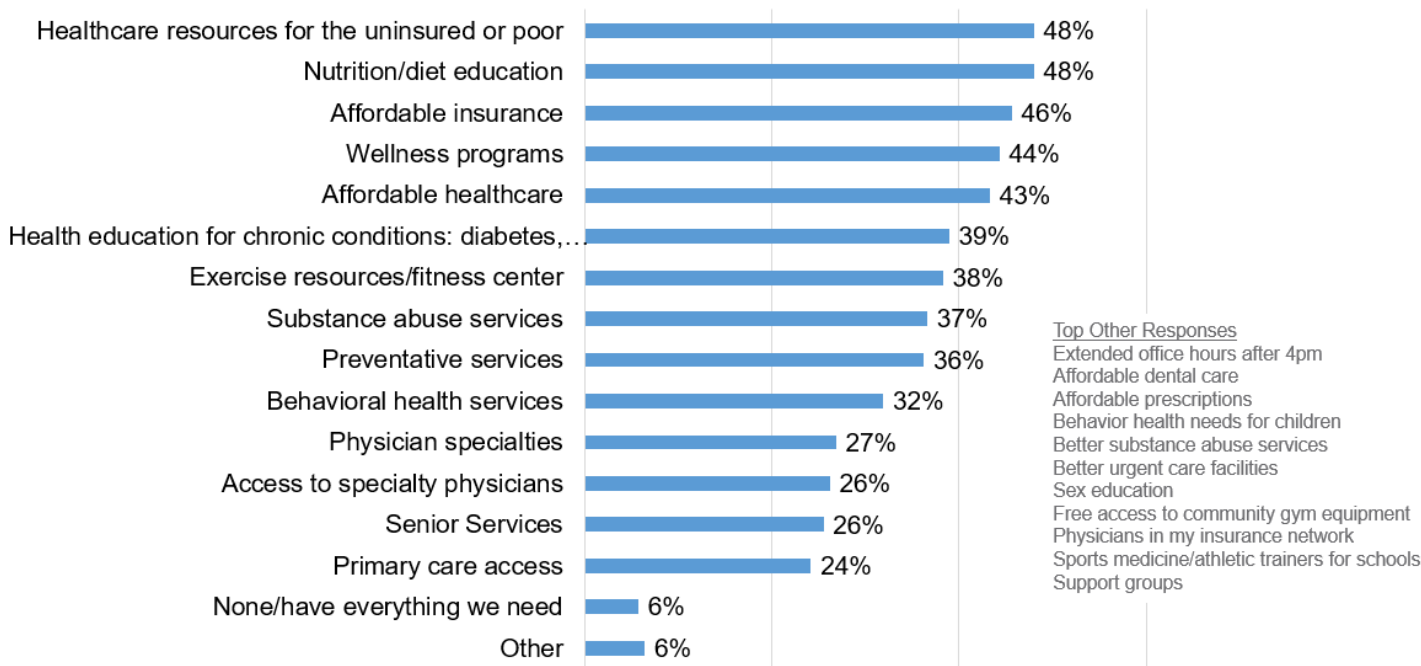
What do you need in order to manage your health condition(s)?



20% did not feel they had all they need to manage their health condition(s). 44% said they need more access to physicians/doctors and 41% said they need affordable healthcare/insurance in order to manage their health condition(s).

Community Health

What healthcare, health education or public health services or programs would you like to see offered in your community?



The top services and programs people would like to see in the community are healthcare resources for the uninsured or poor, nutrition/diet education, followed by affordable insurance and wellness programs.

Health Status Data

Based on the 2018 County Health Rankings study performed by the Robert Wood Johnson Foundation and the University of Wisconsin¹, DeKalb County ranked 67th healthiest County in Tennessee out of the 95 counties ranked (1= the healthiest; 95 = unhealthiest), 73rd for health outcomes and 62nd for health factors.

County Health Rankings suggest the areas to explore for improvement in DeKalb County were: higher adult smoking, higher obesity percentage, higher teen birth rate, higher preventable hospital stays, higher percent of uninsured, lower percent of mammography screening, higher percent of unemployed, lower percentage of adults with some college, high rate of injury deaths,. The areas of strength were identified as better food environment index, lower percentage of excessive drinking, higher percent of high school graduation, and lower percent of severe housing problems.

When analyzing the health status data, local results were compared to Tennessee, the U.S. (where available), and the top 10% of counties in the U.S. (the 90th percentile). Where DeKalb County's results were worse than TN, groups and individuals have an opportunity to act and improve these community measures. To become the healthiest community in Tennessee and eventually the Nation, DeKalb County must close several lifestyle gaps. For additional perspective, Tennessee was ranked the 42nd healthiest state out of the 50 states. (Source: 2018 America's Health Rankings)



Photo Credit Saint Thomas Hospital

¹ The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play. Building on the work of America's Health Rankings, the University of Wisconsin Population Health Institute has used this model to rank the health of Tennessee's counties every year since 2003.

Comparisons of Health Status

Information from County Health Rankings and America’s Health Rankings was analyzed in the CHNA in addition to the previously reviewed information and other public health data. Other data analyzed is referenced in the bullets below, such as: causes of death, demographics, socioeconomics, consumer health spending, focus groups, and surveys. Data for Tennessee, the U.S. or the top 10% of counties (90th percentile) were used as comparisons when available. There were strengths and opportunities identified for measures and for the county. Where the data indicated a strength or an opportunity for improvement, it is called out below. To prevent strengths from becoming opportunities for improvement, it’s important to continually focus on them. Opportunities were denoted with red symbols, and strengths were denoted with green stars for easy interpretation. The years displayed on the County Health Rankings graphs show the year the data was released. The actual years of the data are contained in the source notes below the graphs.

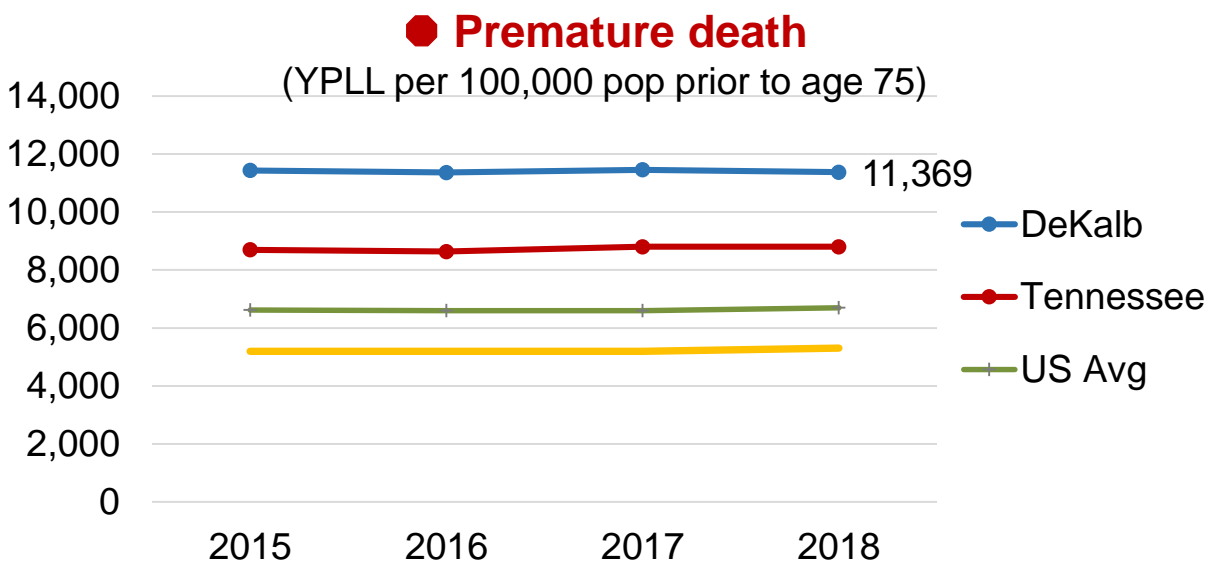
In most of the following graphs, DeKalb County will be blue, Tennessee (TN) will be red, U.S. green and the 90th percentile of counties in the U.S. gold.

Health Outcomes (Length of Life and Quality of Life)

Health Outcomes are a combination of length of life and quality of life measures. DeKalb County ranked 73th in health outcomes out of 95 Tennessee counties.

Length of Life

Length of life was measured by years of potential life lost per 100,000 population prior to age 75, lower is better. For example, if a 25-year-old is killed in an accident, that is 50 years of potential life lost prior to age 75. DeKalb County ranked 79th in length of life in TN. DeKalb County lost 11,369 years of potential life which is higher than TN and the U.S.



Source: County Health Rankings; National Center for Health Statistics – Mortality File 2012-2014

Leading Causes of Death: Age-Adjusted Deaths per 100,000

| Cause of Death | DeKalb County* | Tennessee | US |
|------------------------------------|----------------|-----------|-------|
| Heart diseases | 271.8 | 198.8 | 196.6 |
| Cancer | 170.7 | 179.9 | 185.1 |
| Accidents (unintentional injuries) | 84.0 | 61.1 | 44.0 |
| Respiratory diseases | 64.6 | 54.7 | 47.8 |
| Stroke | 56.7 | 46.0 | 49.9 |
| Alzheimer's disease | 49.9 | 44.2 | 35.9 |
| Suicide | 28.3 | 16.2 | 13.4 |

Source(s): CDC, wonder.cdc.gov

Red areas had death rates higher than TN. The leading causes of death in DeKalb County were heart disease followed by cancer, similar to TN and the U.S. Lagging as causes of death were accidents, respiratory diseases, stroke, suicide, and Alzheimer's Disease.

Infant Mortality Per 1,000 Births

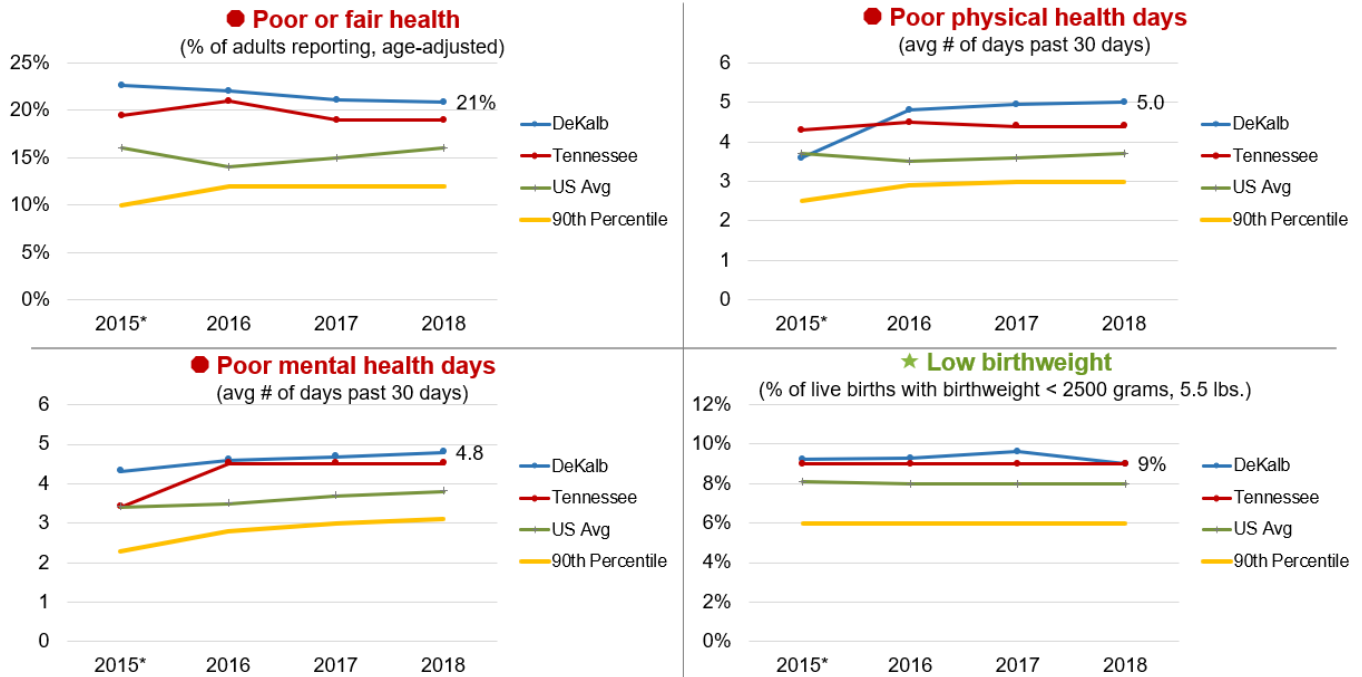
| | | 2014 | 2015 | 2016 | 2017 |
|---------------|--------|------|------|------|------|
| Tennessee | Number | 562 | 569 | 597 | 597 |
| | Rate | 6.9 | 7.0 | 7.4 | 7.4 |
| DeKalb County | Number | 1 | 3 | 0 | 4 |
| | Rate | 4.3 | 12.2 | 0.0 | 17.8 |

Source(s): Kids Count 2018

DeKalb County's infant mortality rate was 17.8 deaths per 1,000 births in 2017.

Quality of Life

Quality of life was measured by: % reporting fair or poor health, the average number of poor physical health days and poor mental health days in the past 30 days, and % of live births with birthweight less than 2500 grams, or 5.5 lbs. DeKalb County ranked 60th out of 95 counties in Tennessee for quality of life.



Source: County Health Rankings; Behavioral Risk Factor Surveillance System (BRFSS) 2016 Source: County Health Rankings; National Center for Health Statistics – Natality files (2010-2016)

*indicates a change in the Behavioral Risk Factor Surveillance System Survey calculations of results. 2016 forward cannot be compared to prior year results.

Quality of Life STRENGTHS

- 9% of DeKalb County births were less than 2500 grams or 5.5 lbs., similar to TN.
- DeKalb County had lower death rates due to cancer than TN and the U.S.

Quality of Life OPPORTUNITIES

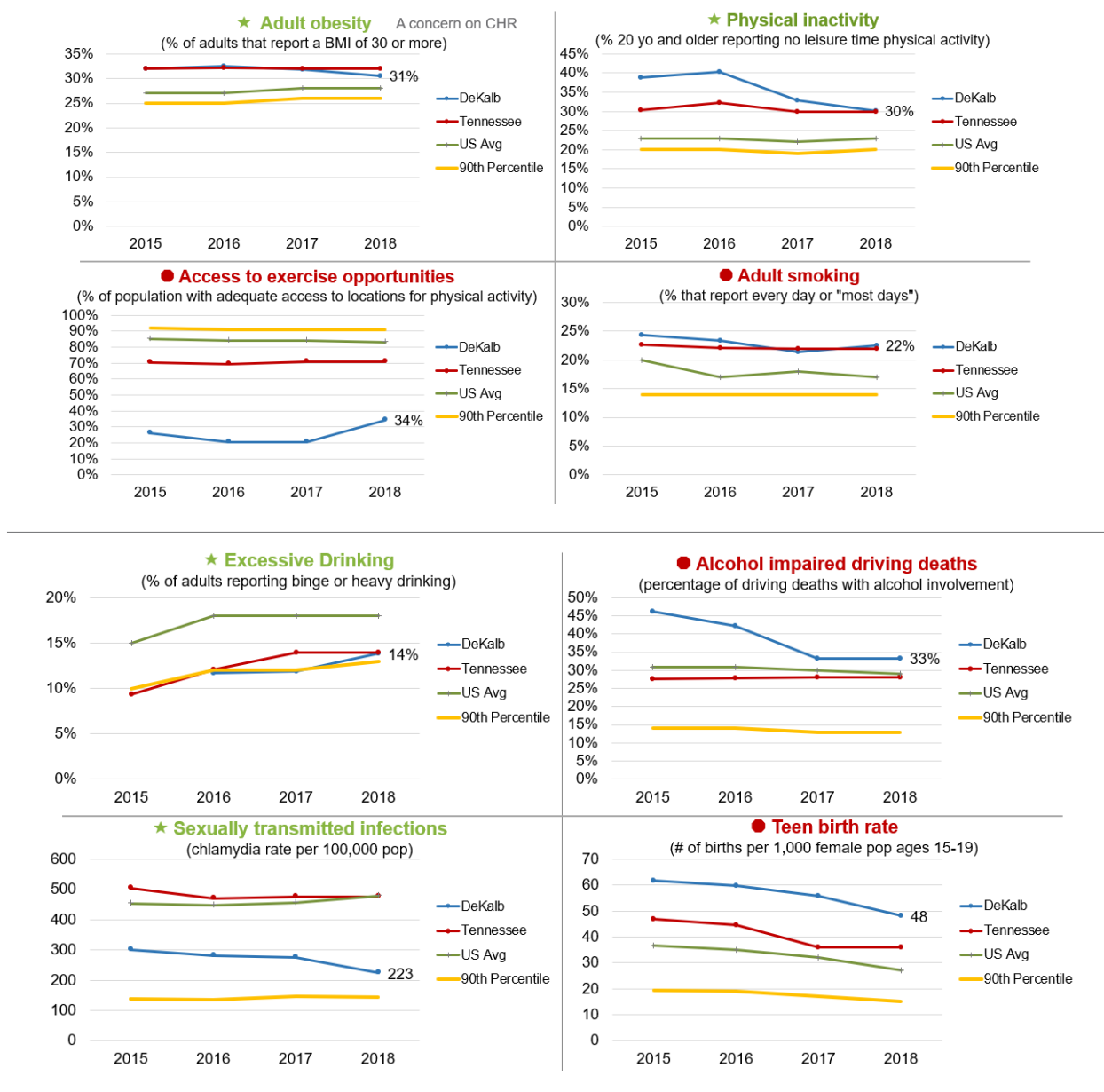
- Years of potential life lost per 100,000 population prior to age 75 in DeKalb County were higher than TN and the U.S.
- DeKalb County had a higher number of poor physical health days of the past 30 days than TN and the U.S. with 5.0.
- DeKalb County also had a higher number of poor mental health days in the past 30 days than TN and the U.S. with 4.8.
- 21% of DeKalb County reported poor or fair health, higher than TN and the U.S.
- DeKalb County had higher death rates due to heart disease, accidents, respiratory disease, stroke, suicide and Alzheimer's Disease than TN.

Health Factors or Determinants

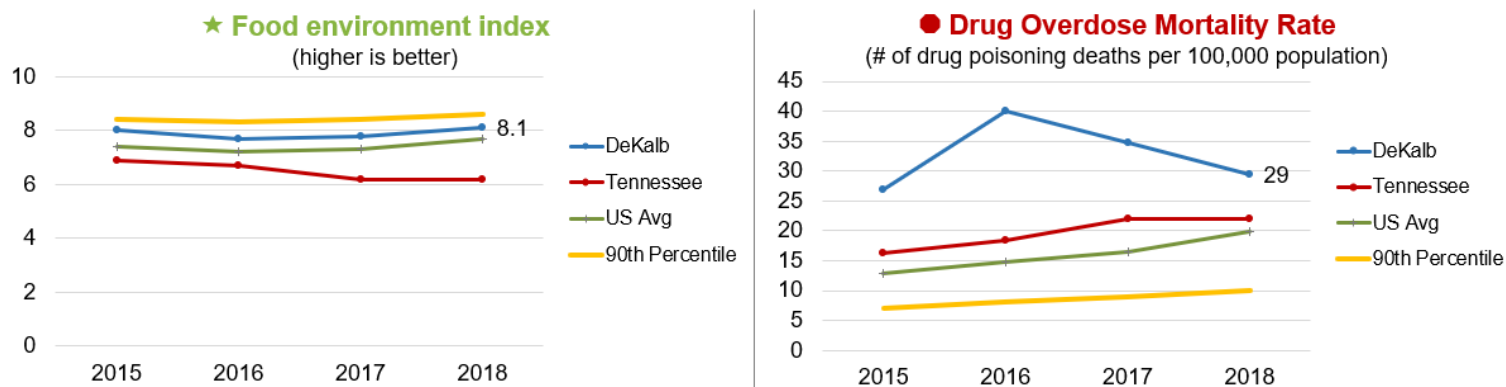
Health factors or determinants were comprised of measures related to health behaviors, clinical care, social & economic factors, and physical environment. DeKalb County ranked 62nd in health factors out of 95 TN counties.

Health Behaviors

Health behaviors are made up of nine measures and account for 30% of the county ranking, and DeKalb County ranked 31st out of 95 counties in Tennessee.



Source: Obesity, physical inactivity - County Health Rankings; CDC Diabetes Interactive Atlas based on responses to BRFSS, 2014 Source: Access to exercise opportunities - County Health Rankings; ArcGIS Business Analyst, Delorme map data, Esri and U.S. Census Tigerline Files, 2016. Measures the percentage of individuals in a County who live reasonably close to a location for physical activity, defined as parks or recreational facilities (local, state national parks, gyms, community centers, YMCAs, dance studios and pools) Source: Smoking - County Health Rankings; Behavioral Risk Factor Surveillance System (BRFSS), 2016



Source: County Health Rankings; USDA Food Environment Atlas, 2015; CDC WONDER mortality data, 2014-2016

The food environment index is comprised of % of the population with limited access to healthy foods and % of the population with food insecurity. Limited access to foods estimates the % of the population who are low income and do not live close to a grocery store. Food insecurity is the % of the population who did not have access to a reliable source of food during the past year.

Children with Neonatal Abstinence Syndrome

| | | 2014 | 2015 | 2016 | 2017 |
|---------------|--------|-------|-------|-------|-------|
| Tennessee | Number | 1,006 | 1,040 | 1,068 | 1,090 |
| | Rate | 12.3 | 12.8 | 13.2 | 13.5 |
| DeKalb County | Number | 9 | 10 | 9 | 11 |
| | Rate | 38.3 | 40.7 | 47.4 | 48.9 |

Data Source(s): Data on the number of NAS babies were collected from Neonatal Abstinence Syndrome Surveillance System, Division of Family Health and Wellness, Tennessee Department of Health.

Births to Mothers who Smoked During Pregnancy

| | | 2014 | 2015 | 2016 | 2017 |
|----------------------|---------|--------|--------|--------|--------|
| Tennessee | Number | 12,150 | 11,545 | 10,788 | 10,325 |
| | Percent | 15% | 14% | 13% | 13% |
| DeKalb County | Number | 72 | 63 | 46 | 57 |
| | Percent | 31% | 26% | 24% | 25% |

Data Source(s): The Division of Population Health Assessment, Tennessee Department of Health. The KIDS COUNT division of the Tennessee Commission on Children and Youth organized the data.

Health Behaviors STRENGTHS

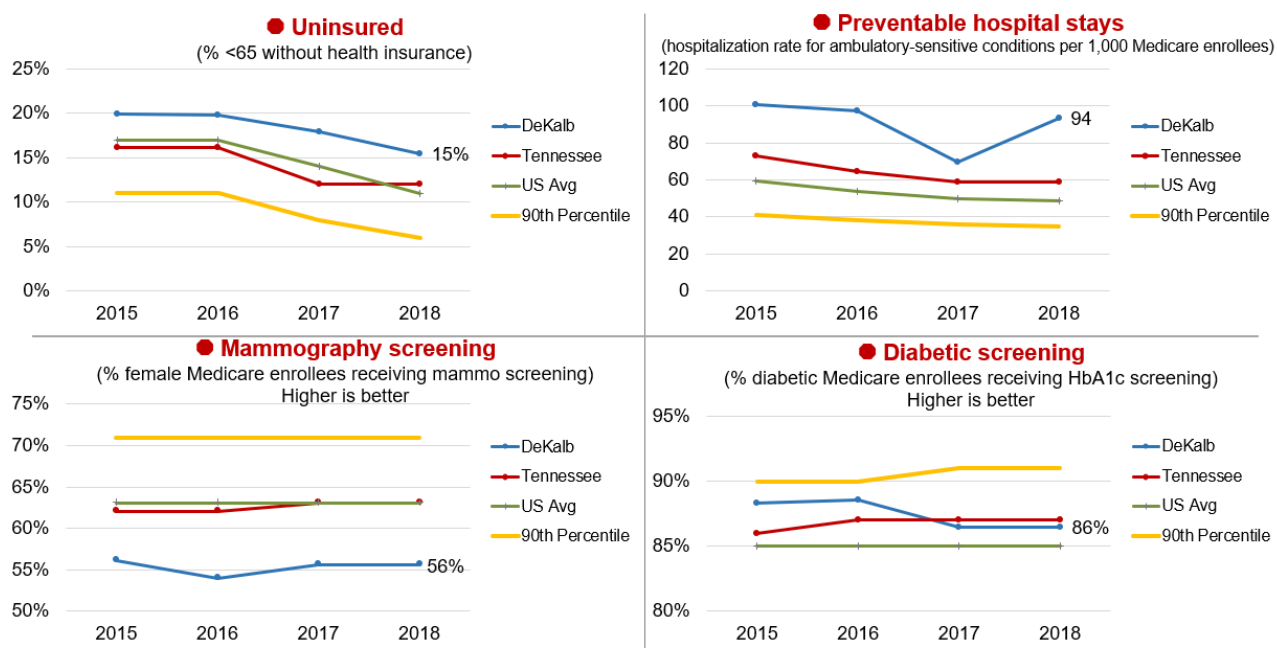
- Physical inactivity was 30%, the same as TN.
- At 14%, excessive drinking was the same in DeKalb County as TN, and lower than the U.S.
- Sexually transmitted infections measured by chlamydia rate per 100,000 population were lower in DeKalb County than TN and the U.S.
- The food index was higher (better) in DeKalb County (8.1) than TN and the U.S.
- Adult obesity in DeKalb County (31%) was lower than TN, but higher than the U.S. Obesity in Tennessee and the U.S. continue to rise, putting people at increased risk of chronic diseases including: diabetes, kidney disease, joint problems, hypertension and heart disease. Obesity can cause complications in surgery and with anesthesia. It has been implicated in Alzheimer's and often leads to metabolic syndrome and type 2 diabetes.
- Adult smoking in DeKalb County at 22% was the same as TN, but higher than the U.S. Each year approximately 443,000 premature deaths can be attributed to smoking. Cigarette smoking is identified as a cause of various cancers, cardiovascular disease, respiratory conditions, low birthweight, and other adverse health outcomes.

Health Behaviors OPPORTUNITIES

- The percentage of births to mothers who smoked during pregnancy was higher in DeKalb County (25%) than TN (13%) in 2017.
- The rate of children with Neonatal Abstinence Syndrome was higher in DeKalb County (48.9) than TN (13.5) in 2017.
- Access to exercise opportunities was lower in DeKalb County than TN and the U.S. at 34%.
- The percentage of driving deaths with alcohol involvement was higher in DeKalb County at 33% than TN and the U.S.
- The teen birth rate was higher in DeKalb County than TN and the U.S. with 48 births per 1,000 females age 15 to 19.
- DeKalb County's drug overdose mortality rate was 29 drug poisoning deaths per 100,000 population. This was higher than TN (22) and the U.S. (20).

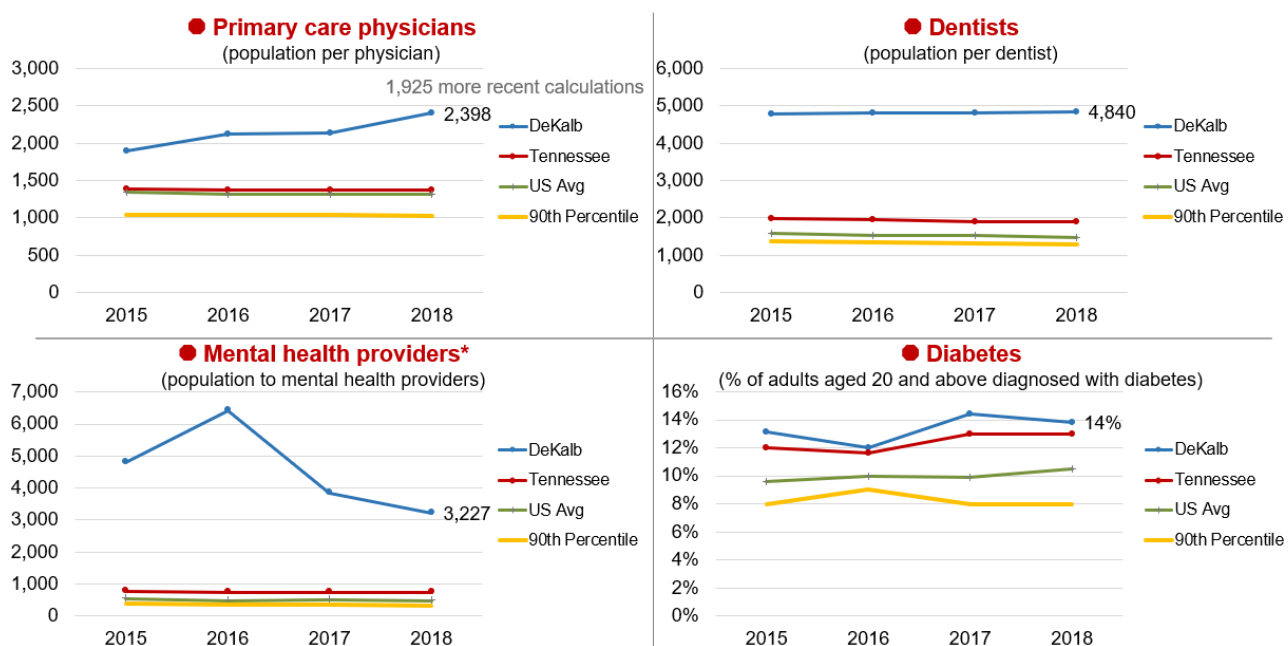
Clinical Care

Clinical care ranking is made up of seven indicators, and they account for 20% of the county rankings. DeKalb County ranked 88th out of 95 Tennessee counties in clinical care.



Source: Uninsured - County Health Rankings; Small Area Health Insurance Estimates, 2015

Source: Preventable hospital stays, mammography screening, diabetic screening - County Health Rankings; Dartmouth Atlas of Health Care, Medicare claims data, 2014



Source: Pop to PCP - County Health Rankings; Area Health Resource File/American Medical Association, 2015

Source: Pop to Dentists - County Health Rankings; Area Health Resource File/National Provider Identification file, 2016

Source: Pop to mental health provider (psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists and advanced practice nurses specializing in mental health) County Health Rankings; CMS, National Provider Identification, 2017

Clinical Care, cont.

Population to specialists, Saint Thomas Health, 2018 in DeKalb County

| Specialist Product Line | Count | Ratio |
|--------------------------------------|-------------|----------------|
| Allergy and Immunology | 0.0 | 0 |
| Cardiology | 0.0 | 0 |
| Cardiothoracic Surgery | 0.0 | 0 |
| Colorectal Surgery | 0.0 | 0 |
| Dermatology | 0.0 | 0 |
| Endocrinology | 0.0 | 0 |
| Family Medicine | 8.5 | 2,265:1 |
| Gastroenterology | 0.0 | 0 |
| General Surgery | 0.0 | 0 |
| Geriatrics | 1.0 | 19,251:1 |
| Hematology/Oncology | 0.5 | 38,502:1 |
| Internal Medicine | 0.0 | 0 |
| Nephrology | 0.0 | 0 |
| Neurology | 0.0 | 0 |
| Neurosurgery | 0.0 | 0 |
| Obstetrics and Gynecology | 0.0 | 0 |
| Ophthalmology | 0.0 | 0 |
| Orthopedic Surgery | 0.0 | 0 |
| Otolaryngology | 0.0 | 0 |
| Pediatrics | 0.0 | 0 |
| Physical Medicine and Rehabilitation | 0.0 | 0 |
| Pulmonology | 0.0 | 0 |
| Rheumatology | 0.0 | 0 |
| Urology | 0.0 | 0 |
| Vascular Surgery | 0.0 | 0 |
| DeKalb County Total | 10.0 | 1,925:1 |

Source: Saint Thomas Health

Using more recent data than the County Health Rankings, and including more specialties, the ratio of population to physicians is 1,925 per person.

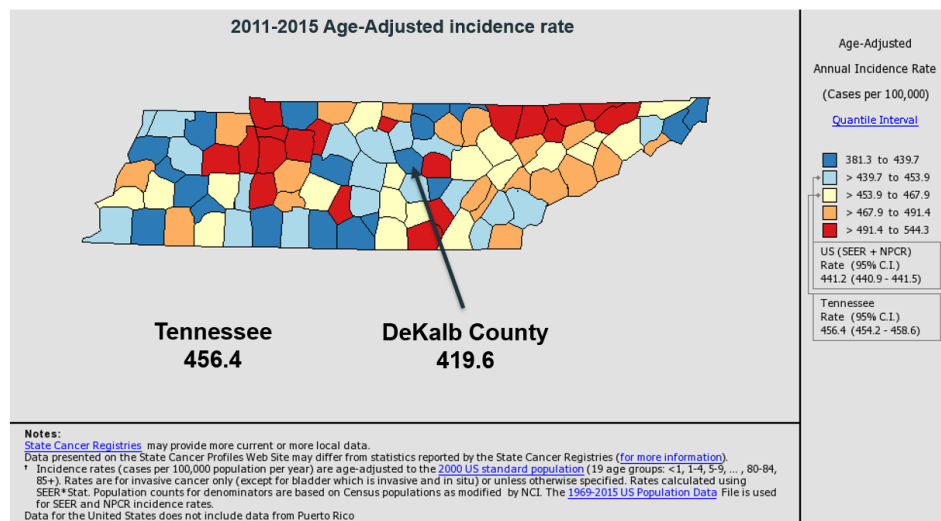
Rates of Persons Living with HIV

| | |
|---------------|-----------------------------|
| Cannon County | 161 of every 100,000 people |
| Warren County | 93 of every 100,000 people |
| White County | 99 of every 100,000 people |
| DeKalb County | 210 of every 100,000 people |

210 of every 100,000 people in DeKalb County are living with HIV.

Source: aidsvu.org/state/tennessee

Cancer Incidence Rates for Counties in Tennessee



The cancer incidence rate was 419.6 in DeKalb County compared to 456.4 in TN.

Source: SEER, statecancerprofiles.cancer.gov

Clinical Care OPPORTUNITIES

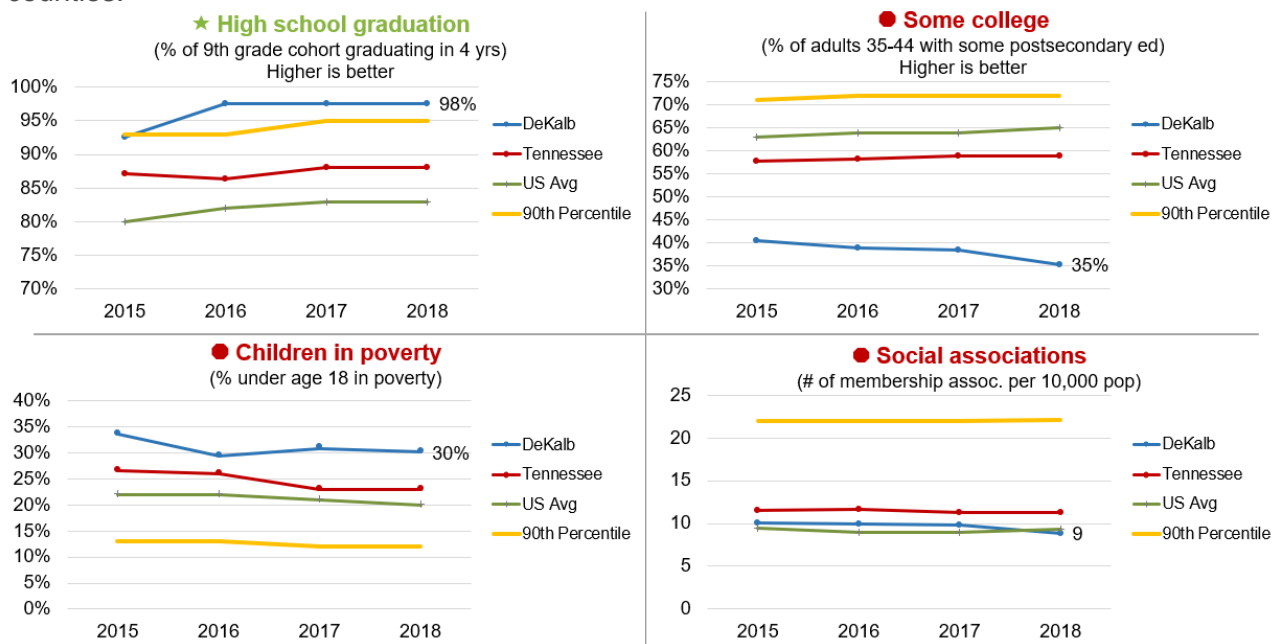
- The percent of population under sixty-five without health insurance was higher in DeKalb County than TN at 15%. Tennessee did not expand Medicaid, therefore their percent uninsured is higher than the U.S.
 - Mammography screening at 56% was lower than TN and the U.S.
 - The percent of adults over 20 who had been diagnosed with diabetes, 14%, was higher than TN and the U.S.
 - The rate for hospitalization for ambulatory-sensitive conditions per 1,000 Medicare enrollees was higher in DeKalb County at 94 than TN and the U.S. This indicator measures potential shortages of outpatient/physician providers.
 - Diabetic screening at 86% was lower than TN, but higher than the U.S.
 - The population per primary care physician was higher in DeKalb County than TN and the U.S. at 2,385 people per primary care physician. When all providers are accounted for the ratio drops to 1,925 which was still higher than TN and the U.S. at 1,320.
 - The population per dentist was higher in DeKalb County than TN and the U.S. at 4,840 population per dentist.
 - The population per mental health provider was higher in DeKalb County than TN and the U.S. at 3,227 population per mental health provider. The ratio has dropped from 6,423 in 2016 to 23,227 in 2018 signaling a positive shift.
 - The rate of persons living with HIV was high (210 out of every 100,000). DeKalb County was placed in the 8th of 10 categories of HIV rates in the state.
-



Photo Credit DeKalb County Chamber of Commerce website

Social & Economic Factors

Social and economic factors account for 40% of the county rankings. There are eight measures in the social and economic factors category. DeKalb County ranked 66th out of 95 Tennessee counties.

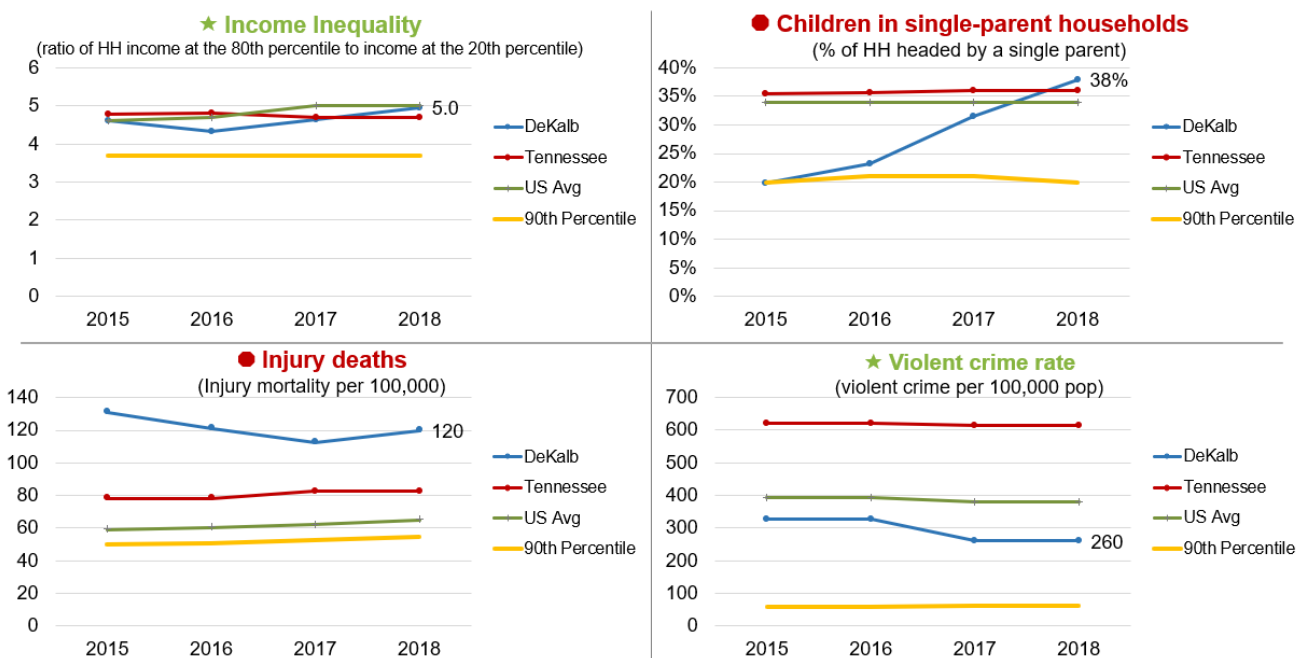


Source: High School graduation – County Health Rankings; States to the Federal Government via EDFacts, 2014-2015

Source: Some college - County Health Rankings; American Community Survey, 5-year estimates, 2012-2016. Source:

Children in poverty - County Health Rankings; U.S. Census, Small Area Income and Poverty Estimates, 2016 Source:

Social associations - County Health Rankings; County Business Patterns, 2015



Source: Income inequality - County Health Rankings; American Community Survey, 5-year estimates 2012-2016. Source:

Children in single parent households - County Health Rankings; American Community Survey, 5-year estimates, 2012-2016.

Source: Injury deaths – County Health Rankings; CDC WONDER mortality data, 2012-2016. Source: Violent crime - County

Health Rankings; Uniform Crime Reporting – FBI, 2012 - 2014

Social & Economic Factors **STRENGTHS**

- The high school graduation rate in DeKalb County was higher than TN, the U.S. and the 90th percentile of counties in the U.S. at 98%.
 - At 5, income inequality was the same in DeKalb County as in TN and the U.S.
 - Violent crime per 100,000 population was lower in DeKalb County at 260 violent crimes per 100,000 population than in TN and the U.S.
-

Social & Economic Factors **OPPORTUNITIES**

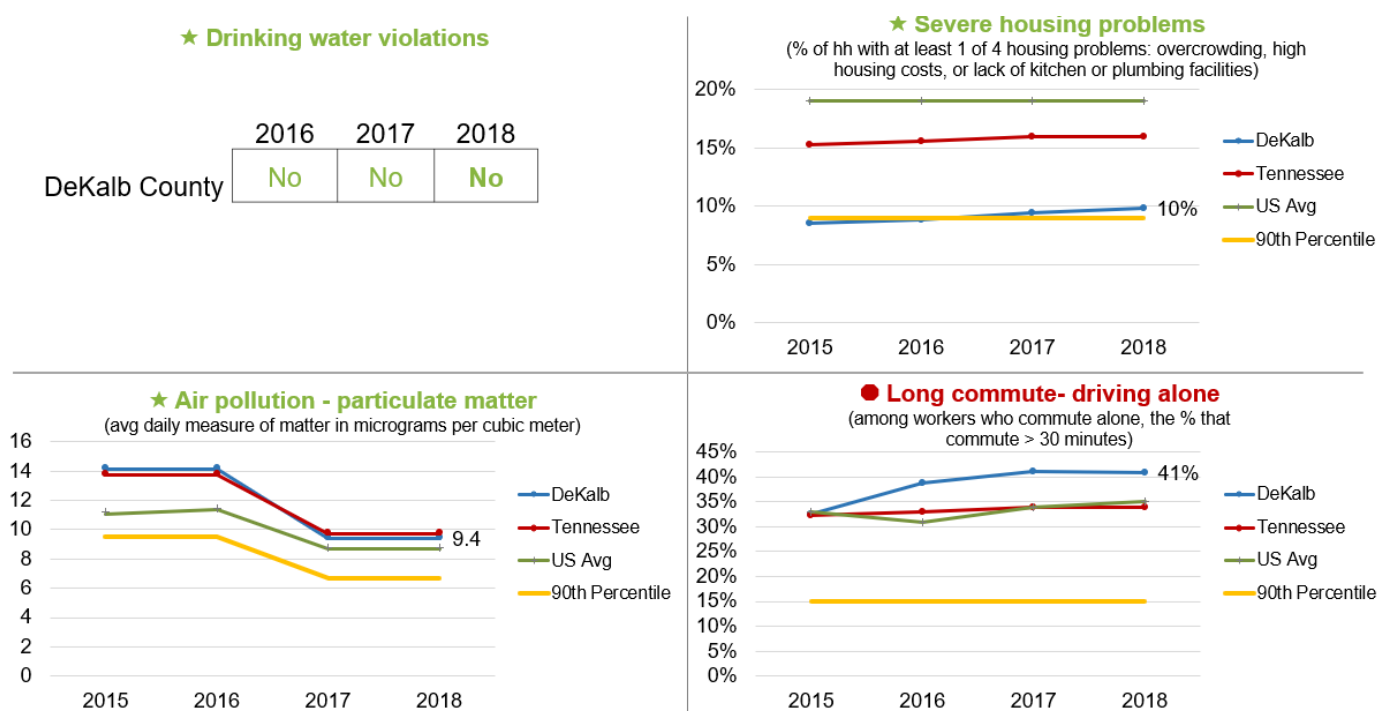
- The percentage of children in poverty in DeKalb County was higher than TN and the U.S. at 30%.
 - The percentage of children in single-parent households in DeKalb County (38%) was higher than TN, but similar to the U.S. This percentage has significantly increased since 2015.
 - Injury deaths were higher in DeKalb County (120 per 100,000) than TN and the U.S.
 - The percentage of adults 35-44 years old with some postsecondary education was lower at 35% than TN and the U.S.
 - Social associations were lower in DeKalb County than TN and the same as the U.S. at 9 memberships per 10,000 population. Associations include membership organizations such as civic organizations, bowling centers, golf clubs, fitness centers, sports organizations, religious organizations, political organizations, labor organizations, business organizations, and professional organizations. Poor family support, minimal contact with others, and limited involvement in community life are associated with increased morbidity and early mortality.
 - The median household income was lower at \$39,371 than TN and the U.S.
-



Photo Credit DeKalb County Trails Inc. Facebook

Physical Environment

Physical environment contains four measures in the category and accounts for 10% of the County rankings. DeKalb County ranked 5th out of 95 Tennessee counties in physical environment.



Source: Drinking water violations – County Health Rankings; EPA, Safe Drinking Water Information System, 016. Source: Severe housing problems – County Health Rankings; HUD Comprehensive Housing Affordability Strategy data, 2010-2014. Source: Driving alone to work and long commute – County Health Rankings: American Community Survey, 5-year estimates, 2012-2016. Source: Air pollution – County Health Rankings: CDC National Environmental Health Tracking Network, 2012

Physical Environment STRENGTHS

- DeKalb County had no drinking water violations.
- DeKalb County had a lower percentage of severe housing problems than TN and the U.S. at 10%.
- The average daily measure of matter in micrograms per cubic meter at 9.4 was lower than TN.

Physical Environment OPPORTUNITIES

- 41% of workers who commuted alone commuted over 30 minutes which was higher than TN and the U.S.

There were Four Broad Themes that Emerged in this Process:

- DeKalb County needs to create a “Culture of Health” which permeates throughout the towns, employers, churches, schools, and community organizations to engender commitment to health improvement.
 - There is a direct relationship between health outcomes and affluence (income and education). Those with the lowest income and education generally had the poorest health outcomes.
 - While any given measure may show an overall good picture of community health, subgroups such as the census tract of Smithville, may experience lower health status measures.
 - It will take a partnership with a wide range of organizations and citizens pooling resources to meaningfully impact the health of the community. However, the county has many assets to improve health.
-



Photo Credit DeKalb County Schools Website

Results of the CHNA: Community Health Summit Prioritized Health Needs, Goals and Actions

Prioritization of Health Needs



Photo Credit Stratasan

Prioritization Criteria

At the Community Health Summit, the attendees reviewed the community health information and used the criteria below to prioritize the health needs in the community.

| | |
|---|---|
| Magnitude / scale of the problem | How big is the problem? How many people does the problem affect, either actually or potentially? In terms of human impact, how does it compare to other health issues? |
| Seriousness of Consequences | What degree of disability or premature death occurs because of this problem? What would happen if the issue were not made a priority? What is the level of burden on the community (economic, social or other)? |
| Feasibility | Is the problem preventable? How much change can be made? What is the community's capacity to address it? Are there available resources to address it sustainably? What's already being done, and is it working? What are the community's intrinsic barriers and how big are they to overcome? |

Most Significant Community Health Needs

The following needs were prioritized by attendees at the Community Health Summit. Using a nominal group technique, each attendee received three sticky notes and selected their top three health needs and posted their ideas on paper at the front of the room. The results of the activity are below with higher numbers indicating the number of “votes” or priority by topic. The bullets below the health need are many of the comments received on the sticky notes.

1. Substance use disorder/ mental health

2. Obesity

3. Education/ kids health

4. Access

1. Substance use disorder and mental health- (13 sticky notes)

- Addiction
- Access to a recovery network
- Smoking
- Tobacco/ juuling
- Mental health
- Mental health stigma and lack of providers
- Depression

2. Obesity- (9 sticky notes)

- Physical inactivity at all ages (2 sticky notes)
- Obesity (4 sticky notes)
- Youth obesity
- Personal responsibility for one’s health
- Lifestyle

3. Education/ kids health- (5 sticky notes)

- Children’s health
- Health education to kids- tobacco, teen pregnancy, nutrition
- Children in poverty
- Understanding health education
- Educate teachers, leaders in school systems about children and drug abuse early on

4. Access- (4 sticky notes)

- Access to healthcare
 - Access to long term mental health treatment
 - Access for low income
 - Access to health insurance for underinsured/uninsured
-



Photo Credit flickr.com

Community Health Summit Brainstorming

Community Health Goals and Actions

The most significant health needs coalesced into four categories. Table groups then brainstormed two goals and two actions for each goal along with resources and collaborators needed. The brainstorm results are below.

Significant Health Need 1: Substance abuse/ mental health



Goal 1 – Improve the amount of resources and providers.

Action 1 – Haven of Hope work with Saint Thomas to have a “mental health unit”.

Action 2 – Encourage better collaboration between resources in the community.

Action 3 – Make mental health a priority of the health department.

Resources/ Collaborators needed: PhD level providers, medication management, Saint Thomas Hospital, Haven of Hope, health department



Goal 2 – Better substance abuse and mental health education.

Action 1 – Work with the Board of Education to establish guidelines on recognizing signs of substance abuse, depression, anxiety, etc.

Action 2 – Mandate that teachers have an in-service on mental health needs/signs/solutions.

Action 3 – Implement a DARE program in schools to teach kids about substance abuse.

Resources/ Collaborators needed: Schools, churches, volunteers, education materials, DARE program, Board of Education, trained experts

Significant Health Need 2: Obesity



Goal 1 – Decrease the obesity rate in DeKalb.

Action 1 – Increase methods of health education to reduce obesity rates.

Action 2 – Create community gardens for access to fresh fruits and vegetables.

Resources/ Collaborators needed: Media, technology, phone apps for youth, local government, health department, school system, local non-profits, workforce community, senior center, gardening club, nurseries, seeds, land, water source, churches, volunteers



Goal 2 – Increase access to more opportunities for physical activities.

Action 1 – Establish and increase manufacturing and workplace wellness initiatives.

Action 2 – Increase transportation to physical activities.

Action 3 – Spread awareness of exercise opportunities and resources that already exist in the community through churches, media, community calendar, health department website, etc.

Resources/ Collaborators needed: Existing transportation, churches, media, Chamber of Commerce, health department, walking trails, parks

Significant Health Need 3: Education/ kid's health



Goal 1 – Expand Jr. Chef classes.

Action 1 – Expand programming to different locations, times and add summer programming.

Action 2 – Get the youth excited about healthy eating, health education, and physical activity.

Action 3 – Offer a culinary arts program for high schoolers.

Resources/ Collaborators Needed: Facility, educators/teachers, funding, Saint Thomas DeKalb Hospital, health department, culinary arts curriculum



Goal 2 – Expand tobacco and substance abuse education.

Action 1 – Mandatory teacher in-service education.

Action 2 – Expand e-cigarette, vaping, and juuling curriculum that is already being taught to help educate adults on the new vaping culture.

Action 3 – Expand Catch my Breath program to reach more people and to include e-cigarettes, vaping and juuling.

Resources/ Collaborators Needed: More e-cigarette curriculum, school system, health department, law enforcement



Photo Credit Stratasan

Impact of 2016 CHNA and Implementation Plan

Impact

In 2016, the DeKalb County community prioritized the following priority health needs:

1. Substance abuse (including tobacco) & mental health
2. Obesity
3. Access to care
4. Youth issues

Saint Thomas DeKalb Hospital addressed each of the health needs identified in the CHNA. The hospital developed implementation strategies to address each of the health issues identified over the last three years with the exception of mental health, teen pregnancy, and alcohol and drug abuse.

Below is the implementation strategy as well as the results from the last three years.

Evaluation of Impact of Actions Taken to Address Needs Identified in Previous (2016) CHNA

| SIGNIFICANT HEALTH NEED Identified in Prior CHNA and Addressed in Implementation Strategy | MENTAL HEALTH & SUBSTANCE ABUSE | |
|--|---------------------------------|--|
| | STATUS OF ACTIONS | RESULTS |
| Strategy 1: Integrate behavioral health services with primary medical care to care for the behavioral as well as physical needs of community members. | Not Completed. | Due to lack of providers, this initiative has proved difficult to implement and remains in progress. |
| Strategy 2: Provide community-based organizations with financial support toward their work addressing needs of Mental & Emotional Health/Substance Abuse. | Completed. | FY17/FY18/FY19: <ul style="list-style-type: none"> Haven of Hope: funding to provide mental health services to those who may not otherwise be able to afford services due to lack of insurance coverage or high deductibles. FY17/FY19: <ul style="list-style-type: none"> DeKalb County Government: Funding for 12-month Health Adventure Program to provide free monthly opportunities to the community that focus on physical and emotional health. |
| Additional Strategies: Support the community with partnerships and programs that provide education on mental health and substance abuse. | Completed. | Multiple programs and screening geared towards mental health during this CHNA cycle including: <ul style="list-style-type: none"> Kick Butts Day partner/anti-tobacco Mental Health Awareness Month – guest speakers at multiple locations |

Evaluation of Impact of Actions Taken to Address Needs Identified in Previous (2016) CHNA

| SIGNIFICANT HEALTH NEED Identified in Prior CHNA and Addressed in Implementation Strategy | OBESITY | |
|--|-------------------|--|
| ACTIONS PROPOSED to Address Significant Health Need | STATUS OF ACTIONS | RESULTS |
| Strategy 1: Improve the health of community students and impact obesity rates through expanding wellness screenings and other programming. | Completed. | Multiple programs and screenings geared towards students during this CHNA cycle including: <ul style="list-style-type: none"> • Healthy Heart Choices Booth • Partnership with Coordinated School Health – Try It Day (healthy food samples) • After School STEM Program – Healthy Cooking Classes |
| Strategy 2: Provide community-based organizations with financial support toward their work addressing needs of Obesity. | Completed. | FY17/FY19: <ul style="list-style-type: none"> • DeKalb County Government: Funding for Health Adventure Program to provide monthly free opportunities to the community that focus on physical and emotional health. FY18: <ul style="list-style-type: none"> • One Generation Away: funding to provide support of their work in increasing access to healthy foods to those experiencing food insecurity. |
| Additional Strategies: Improve the health of community and impact obesity rates through expanding wellness screenings and other programming. | Completed. | Multiple programs and screenings geared towards community members during this CHNA cycle including: <ul style="list-style-type: none"> • Dining with Diabetes – DeKalb Senior Center • Healthy Heart Choices Booth – multiple locations/fairs • Walk Across America partner |

Evaluation of Impact of Actions Taken to Address Needs Identified in Previous (2016) CHNA

| SIGNIFICANT HEALTH NEED Identified in Prior CHNA and Addressed in Implementation Strategy | ACCESS TO CARE | |
|---|-------------------|--|
| | STATUS OF ACTIONS | RESULTS |
| Strategy 1: Engage state legislators and other key stakeholders to advocate for expanded access to care in Tennessee. | Completed. | <p>January-May 2017 January-May 2018 January -May 2019</p> <p>All Tennessee legislators from all counties and neighboring counties/districts we serve were engaged weekly via in person visits, calls, or e-mails by Chief Advocacy Officer or senior leaders during the months of the legislative sessions listed above. In addition, meetings with TennCare Director and Deputy Director as well as Commissioner of Health and Commissioner of Mental Health and Disabilities. During the Summer and Fall, legislators are engaged as well during hospital ministry tours or Summer study meetings, but less frequently.</p> <p>Chief Advocacy Officer conducted follow-up: Federal legislators and staff visits made in person and engaged regularly in Washington and in local district regarding health policy.</p> <p>FY17: 36 Legislative visits and follow up in-person visits.</p> <p>FY18: 30 Legislative visits.</p> <p>FY19: 25 Legislative visits at time of report – additional planned – including visit with Governor Lee. Chief Advocacy Officer appointed to Tennessee Access to Care Board.</p> <p>Health Policies:</p> <ul style="list-style-type: none"> 100% Access and 100% Coverage for All Medicaid Expansion Insure Tennessee 3-Star Healthy Plan Hospital Assessment Expansion of Ascension PACE Opioid Epidemic Policy Balanced Billing Compact Medicine Policy Nurse Practice Act Certificate of Need 340B Corporate Practice of Medicine Sexual Assault Transports Psych Patient Transports Rural Hospitals Rural Health Access Behavioral Health/Substance Abuse Future of Medicaid |
| Strategy 2: Increase access to healthcare by removing traditional financial and insurance hurdles, through financial assistance and emergency care policies. | Completed. | <p>Policy change enacted July 1, 2016 (FY17) to provide community members with income levels at or below 400% of the Federal Poverty Level with financial assistance as outlined in the Saint Thomas Health Financial Assistance Policy.</p> |

Evaluation of Impact of Actions Taken to Address Needs Identified in Previous (2016) CHNA

| | | |
|--|-------------------|--|
| <p>Strategy 3: Implement community-wide Medical Missions at Home that integrate medical, dental, vision and behavioral health, along with broader community resources.</p> | <p>Completed.</p> | <p>FY17: Saint Thomas Health conducted three medical mission events in FY17, one in Davidson County, one in Warren County, and one in Rutherford County, each held within a low-income community. Volunteers from all Saint Thomas Health entities participated, and community volunteer providers offered health screenings, referrals, consultations, dental care, eye exams, glasses, health education, lab/pharmacy services, behavioral health, and other services to persons who otherwise have limited access to health care. In FY17, these events served 1,395 community members in a total of 3,702 encounters resulting in 155 scheduled follow-up appointments.</p> <p>FY18: Saint Thomas Health conducted three medical mission events in FY18, one in Davidson County, one in Warren County, and one in Rutherford County, each held within a low-income community. Volunteers from all Saint Thomas Health entities participated, and community volunteer providers offered health screenings, referrals, consultations, dental care, eye exams, glasses, health education, lab/pharmacy services, behavioral health, and other services to persons who otherwise have limited access to health care. In FY18, these events served 1,211 community members in a total of 3,519 encounters resulting in 205 scheduled follow-up appointments.</p> <p>FY19: At time of written report, Saint Thomas Health conducted two events in FY19, one in Warren County and one in Davidson County with two additional medical missions planned (one in Rutherford County and one in Warren County) each held within a low-income community. YTD for FY19, these events served 1,024 community members in over 3,536 encounters resulting in 178 scheduled follow-up appointments.</p> |
| <p>Strategy 4: Increase breast cancer screening compliance through Our Mission in Motion Mobile Mammography.</p> | <p>Completed.</p> | <p>FY18: One event serving 14 patients, with 12 qualifying for free care. 4 patients had never had a mammogram and for 6, it had been greater than two years.</p> <p>FY19: One event serving 13 patients. 1 patient had never had a mammogram and for 4, it had been greater than two years.</p> |
| <p>Strategy 5: Expand access to primary care through expanded presence and availability of providers, allowing more community members to access preventive and other services through a medical home.</p> | <p>Completed.</p> | <p>During this CHNA cycle, increased partnerships with local providers defined and solidified.</p> |
| <p>Strategy 6: Strengthen and expand the specialty care services available within the community to increase access to needed care.</p> | <p>Completed.</p> | <p>Orthopedic services added to Saint Thomas DeKalb Hospital since 2016 CHNA. Additionally, STMP Smithville heart clinic offers cardiology appointments on Wednesdays so patients may receive these specialty services within their community.</p> |
| <p>Strategy 7: Improve access to care via telemedicine consultations when acute stroke symptoms are present.</p> | <p>Completed.</p> | <p>Telemedicine stroke services implemented at Saint Thomas Stones River Hospital in FY17 with management of services through Saint Thomas Health transfer center. Six consults completed in FY17. This service remains in place.</p> |

Evaluation of Impact of Actions Taken to Address Needs Identified in Previous (2016) CHNA

| | | |
|--|--------------------------|--|
| Additional Strategies: Provide screenings within the community to impact health knowledge and access. | Completed. | Older American's Day – provided physical therapy screenings for BMI/balance tests – education on benefits of walking. |
| Additional Strategies: Provide community-based organizations with financial support toward their work addressing need of Access to Care. | Completed. | Multiple Organizations Funded: FY17: <ul style="list-style-type: none"> Prospect, Inc: funded to support residential services program for adults with intellectual and developmental disabilities. Enroll America: funded to support Get Covered America campaign, connecting uninsured individuals with resources to enroll in health insurance. Tennessee Charitable Care Network (TCCN): Saint Thomas Health funded work to support coordination of statewide network of charitable healthcare clinics with specific facilitation of partnerships in Cannon/DeKalb/Warren/White Counties. FY17/FY18/FY19: <ul style="list-style-type: none"> Hope Smiles: funded work to provide outreach dental care to areas with increased need and lack of dental resources. FY18/FY19: <ul style="list-style-type: none"> Tennessee Justice Center: funded work to increase access to care in target communities through individual advocacy, education, and policy improvement. FY19: <ul style="list-style-type: none"> Family and Children Services: funding for Healthcare Access Program for in-person and phone-based individual case management to connect people with affordable health care options. |
| SIGNIFICANT HEALTH NEED Identified in Prior CHNA and Addressed in Implementation Strategy | YOUTH ISSUES | |
| ACTIONS PROPOSED to Address Significant Health Need | STATUS OF ACTIONS | RESULTS |
| Strategy 1: Implement an anti-human trafficking initiative throughout Saint Thomas Health so that victims of human trafficking who seek medical care will be identified and connected with the assistance they need. | In Progress. | Anti-human trafficking initiative started with charter in place. Four training modules and localized protocols have been developed for roll-out to all Saint Thomas Health employees. The training modules are available for all employees currently. Training has begun in Davidson County. One clinic, UT Internal Med, has had all staff including physicians trained. Saint Thomas Midtown ED has trained the majority of staff/physicians. Roll-out and training will continue to occur throughout all Saint Thomas Health facilities. |
| Strategy 2: Provide resource navigation support to community members in need, recognizing how critical economic stability and social environments that promote good health are to improve an individual's and a community's health. | Not Completed. | This is part of a more complex comprehensive care coordination center being built. Progress has slowed on this initiative. |

Evaluation of Impact of Actions Taken to Address Needs Identified in Previous (2016) CHNA

| | | |
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| <p>Strategy 3: Implement community-wide Medical Missions at Home that integrate medical, dental, vision and behavioral health, along with broader community resources.</p> | <p>Completed.</p> | <p>FY17: Saint Thomas Health conducted three medical mission events in FY17, one in Davidson County, one in Warren County, and one in Rutherford County, each held within a low-income community. Volunteers from all Saint Thomas Health entities participated, and community volunteer providers offered health screenings, referrals, consultations, dental care, eye exams, glasses, health education, lab/pharmacy services, behavioral health, and other services to persons who otherwise have limited access to health care. In FY17, these events served 1,395 community members in a total of 3,702 encounters resulting in 155 scheduled follow-up appointments.</p> <p>FY18: Saint Thomas Health conducted three medical mission events in FY18, one in Davidson County, one in Warren County, and one in Rutherford County, each held within a low-income community. Volunteers from all Saint Thomas Health entities participated, and community volunteer providers offered health screenings, referrals, consultations, dental care, eye exams, glasses, health education, lab/pharmacy services, behavioral health, and other services to persons who otherwise have limited access to health care. In FY18, these events served 1,211 community members in a total of 3,519 encounters resulting in 205 scheduled follow-up appointments.</p> <p>FY19: At time of written report, Saint Thomas Health conducted two events in FY19, one in Warren County and one in Davidson County with two additional medical missions planned (one in Rutherford County and one in Warren County) each held within a low-income community. YTD for FY19, these events served 1,024 community members in over 3,536 encounters resulting in 178 scheduled follow-up appointments.</p> |
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| <p>Strategy 4: Create a comprehensive resource guide to equip both community members and service providers to best connect those in need with available services.</p> | <p>Not Completed.</p> | <p>This action was to be in conjunction with Upper Cumberland Human Resource Agency and the Chamber of Commerce. This work was more intense than anticipated. The development of the website https://www.auntbertha.com/ has helped to meet this need within the community.</p> |
| <p>Additional Strategies: Provide community-based organizations with financial support toward their work addressing needs of youth issues.</p> | <p>Completed.</p> | <p>FY18:</p> <ul style="list-style-type: none"> • DeKalb County Schools: Funded purchase of spot vision equipment to screen 1,200 children annually at five locations. |

Community Assets and Resources

Community Asset Inventory

A document attached below contains a list of community assets and resources that can help improve the health of the community and assist with implementation process.

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Photo Credit Natasha Judkins

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Geography

DeKalb County, TN

Geography

Cities

Smithville (County Seat)

Towns

Alexandria
Dowelltown
Liberty

Unincorporated Communities

Belk
Midway
Temperance Hall
Sugar Tree Knob

Transportation

Airport

Smithville Municipal Airport (0A3)

Major Highways

U.S. Route 70
TN Route 56
TN Route 96
TN Route 264

Media

AM radio

WJLE 1480 AM

FM radio

WJLE 101.7 FM

Newspaper

DeKalb County Times
Smithville Review

Government

County Department Phone Numbers

County Executive

615-597-5175

County Sheriff

615-597-4935

County Clerk

615-597-5177

County Trustee

615-597-5176

Register of Deeds

615-597-4153

Government

County Department Phone Number

Circuit Court Clerk

615-597-5711

Road Supervisor

615-597-4144

Clerk and Master

615-597-4360

Election Commission

615-597-4146

Property Assessor

615-597-5925

County Board of Commissioners

County Commissioner

Dennis Slager
1340 Old Liberty Rd.
Alexandria, TN 37012
615-529-2966

County Commissioner

Julie Williams Young
31492 Nashville Highway
Alexandria, TN 37012
615-339-8101

County Commissioner

Myron Rhody
1771 Old Snow Hill Rd.
Dowelltown, Tn 37059
615-597-4225

County Commissioner

Sabrina Farler
P.O. Box 45
Dowelltown, TN 37059
615-536-5930

County Commissioner

Jenny Trapp
125 Cordell Love Rd.
Smithville, TN 37166
615-597-7248

County Commissioner

Bobby Johnson
121 Yulanda Hills Rd.
Smithville, TN 37166
615-464-8912

County Commissioner

Janice Fish-Stewart
364 Holiday Haven Rd.
Smithville, TN 37166
615-477-1338

County Board of Commissioners

County Commissioner

Scott Little
661 Ponder Lane
Smithville, TN 37166
615-597-1950

County Commissioner

Anita Puckett
1200 Four Seasons Rd.
Smithville, TN 37166
615-597-2574

County Commissioner

Jerry D. Adcock
2769 Four Seasons Rd.
Smithville, TN 37166
931-743-0708

County Commissioner

Jeff Barnes
10492 Belk Rd.
Smithville, TN 37166
931-409-4282

County Commissioner

Matt Adcock
1561 Obie Adcock Rd.
Smithville, TN 37166
615-982-0517

County Commissioner

Beth Pafford
836 South College St.
Smithville, TN 37166
615-597-0609

County Commissioner

Bruce Malone
122 Dearman St.
Smithville, TN 37166
615-684-0241

Elected County Officials

County Executive

Tim Stribling
1 Public Square, Room 204
Smithville, TN 37166
615-597-5175

County Sheriff

Patrick Ray
100 Public Square
Smithville, TN 37166
615-597-4935

County Clerk

James L. Poss
732 S Congress Blvd, Room 102
Smithville, TN 37166
615-597-5177

County Trustee

Sean Driver
732 S Congress Blvd, Room 103
Smithville, TN 37166
615-597-5176

Register of Deeds

Jeff McMillen
732 S Congress Blvd, Room 101
Smithville, TN 37166
615-597-4153

Elected County Officials

Property Assessor

Shannon Cantrell
732 S Congress Blvd
Smithville, TN 37166
615-597-5925

County Circuit Court Clerk

Susan Martin
1 Public Square, Room 303
Smithville, TN 37166
615-597-5711

Road Supervisor

Danny Hale
720 Smith Road
Smithville, TN 37166
615-597-4144

Clerk and Master

Debra Malone
1 Public Square, Room 302
Smithville, TN 37166
615-597-4360

County Election Commission

Dennis Stanley
1 Public Square - Room 104
Smithville, TN 37166
615-597-4146

Major Employers

Federal Mogul Friction
SHIROKI North America, Inc.
Tenneco, Inc.
Star Manufacturing
Smithport Cabinetry
Omega Apparel
Foutch Industries, LLC
AAA Coating
Industrial Machine

DeKalb County Government Offices

DeKalb County Courthouse

1 Public Square
Smithville, TN 37166

Human Resources

712 Walker Dr
Smithville, TN 37166
(615) 597-4504

Public Safety

Law Enforcement

Alexandria Police Department

102 High St,
Alexandria, TN 37012
(615) 529-2700

Smithville Police Department

104 E Main St
Smithville, TN 37166
(615) 597-4089

DeKalb County Sheriff's Office

100 S Public Square
Smithville, TN 37166
(615) 597-4043

Fire Departments

DeKalb County Fire Department

782 King Ridge Rd
Smithville, TN 37166
(615) 597-1332

Smithville Fire Department

104 E Main St
Smithville, TN 37166
(615) 597-4141
smithvillefire.com

Public Safety

Fire Departments

Alexandria Fire Department

102 High St
Alexandria, TN 37012
(615) 529-2171

Health Care

Hospitals

Saint Thomas DeKalb Community Hospital

520 W Main St
Smithville, TN 37166
(615) 215-5000

Home Health Services

SunCrest Home Health

471 W Broad St
Smithville, TN 37166
Smithville, Tennessee
lhcgroupp.com
(615) 597-7777

Allied Home Medical

417 E Broad St
Smithville, TN 37166
Smithville, Tennessee
(615) 215-1342

Dentists

Adams Dental, PLLC

111 S Public Square
Alexandria, TN 37012
adamsdentaltn.com
(615) 529-2895

Barnes Jeff DDS

407 S Mountain St
Smithville, TN 37166
(615) 597-1110

Health Care

Dentists

DeKalb Dental Center

201 S 3rd St, Smithville, TN 37166
DeKalbdentalcenter.com
(615) 597-4798

Dr. Clifford G. Duke, DDS

612 S Congress Blvd
Smithville, TN 37166
(615) 597-7788

Clinics

Fast Pace Urgent Care

101 W Broad St
Smithville, TN 37166
(855) 632-5700

Good Health Family Clinic

414 E Broad St
Smithville, TN 37166
(615) 597-4432
familiesgoodhealth.com

Family Medical Center

302 N Congress Blvd
Smithville, TN 37166
(615) 597-4395

Alexandria Family Medical Center

400 E Public Square.
Alexandria, TN 37012
(615) 529-2116

Medical Specialty Clinic

518 W Main St # B
Smithville, TN 37166
(615) 597-6775

Dr. Kevin R. Rhody, MD

302 N Congress Blvd
Smithville, TN 37166
(615) 597-4395

Health Care

Clinics

Suncrest Private Care

Address: 117 C E Bryant St
Smithville, TN 37166
(615) 597-2067

Dingle Denise MD

Address: 612 S Congress Blvd # A
Smithville, TN 37166
(615) 597-8731

Other health services

Family Care Chiropractic

502 W Main St
Smithville, TN 37166
(615) 215-2273

Kay Quintero, LPC

301 W Main St
Smithville, TN 37166
(615) 597-4673

Miracle-Ear Hearing Center

Address: 414 E Broad St
Smithville, TN 37166
(615) 988-4056

Hospice Services

NHC HealthCare, Smithville

Address: 825 Fisher Ave
Smithville, TN 37166
(615) 597-4284

Webb House Retirement Center

Address: 115 Jennings Ln
Smithville, TN 37166
(615) 597-8888

Health Care

Durable Medical Equipment

HHC Durable Medical Equipment

204 W Main St
Smithville, TN 37166
(615) 597-2291

Johnny's Drugs

516 W Main St Ste B
Smithville, TN 37166
(615) 597-7822

Med Care Pharmacy

516B W Main St Ste B
Smithville, TN 37166
(615) 597-7822

Health Department

Tennessee Department of Public Health

<https://www.tn.gov/health>

DeKalb County Health Department

254 Tiger Drive
Smithville, TN 37166
615-597-7599

Major Programs:

Public Health Clinics

Child health care services

Children's Special Services (CSS)

Family planning training

Health Education: provide educational services to patients, schools, and community groups upon request.

Immunization (shots and vaccines)

Supplemental Nutrition

Wellness Programs

Prenatal care

Primary care

Women, infants and children (WIC): vouchers to buy nutritious foods are issued to women who are pregnant or breastfeeding and children under five years of age who are at nutritional risk and meet income guidelines. Training and educational services to WIC participants.

Hotlines

Immediate Emergencies

911

Sheriffs Department

Non-Emergency - 615-597-4935

Anonymous Tip Line

615-464-6400

Statewide Central Intake Child Abuse Hotline

1-855-333-SAFE (7233) or #SAFE from a cell phone

Statewide Domestic Violence Hotline

1(800) 334-2936

Tennessee Adult Protective Services

1(888) 277-8366

Missing & Endangered Persons

1(800) 346-3243

National Human Trafficking Hotline

1(888) 373-7888

National Suicide Lifeline

1(800) 273-8255

Tennessee Department Of Labor And Workforce Development

(877) 813-0950

Poison Control

1(800) 222-1222

ASPCA Animal Poison Control Center

(Fees may apply)

1(888) 426-4435

(615) 597-4265

Community, Civic, Non-Profit Organizations

Basic Needs Assistance

Second Harvest Food Bank of Middle Tennessee

Lighthouse Christian Camp
205 Serenity Place
Smithville, TN 37166
(615) 329-3491

Second Harvest Food Bank of Middle Tennessee

1563 Old Snow Hill Road
Dowelltown, TN 37059
(615) 335-9335

Blankets for Heroes

204 Wood Road
Smithville, TN 37166
(931) 934-2167

Services: Blankets For Heroes is a Non-Profit Organization, registered in the State of Tennessee and classified as a Public Charity under Section 501(c)(3) of the Internal Revenue Code.

Life Skills/Job Training

Upper Cumberland Human Resource Agency

726 South Congress boulevard
Smithville, TN 37166
(615) 597-8322

Services: Provides employment and training services to individuals of all ages. UCHRA employment training programs include: Workforce Investment Act (WIA) Program for youth/dislocated workers/adults; Old Americans Act (Senior Community Service Employment Program) for adults 55 and over; and Families First Employment Program.

Housing

Habitat for Humanity

3239 Nashville Hwy
Smithville, TN 37166
(615) 215-8181

Services: Habitat for Humanity is a global nonprofit housing organization working in local communities across all 50 states in the U.S. and in approximately 70 countries. Habitat's vision is of a world where everyone has a decent place to live.

Community, Civic, Non-Profit Organizations (Continued)

Women's Services

Genesis House, Inc.

P.O. Box 1180

Cookeville, TN 38503

(931) 526-5197 or (800) 707-5197

Services: 24-hour Crisis line, crisis intervention, court advocacy, domestic & sexual violence and self-esteem support groups, individual counseling, as well as referral to other community agencies for housing, employment, and other needed services.

Tennessee Coalition Against Domestic and Sexual Violence

2 International Plaza Drive, Suite 425

Nashville, TN 37217

(615) 386-9406

Foundations

The Joe L Evins Foundation

Ergates Foundation Inc.

Senior Services

Smithville Senior Service Center

DeKalb County Complex

718 S. Congress Blvd.

Smithville, TN 37166

615-597-7575

Liberty Senior Service Center

104 E. Main St.

Liberty, TN 37095

615-536-5422

Alexandria Senior Service Center

118 Edgewood Ave.

Alexandria, TN 37012

615-529-2928

Economic Development Organizations

DeKalb County Chamber of Commerce

1 Public Square

Smithville, TN 37166

(615) 597-4163

Community, Civic, Non-Profit Organizations (Continued)

Economic Development Organizations (Continued)

National Association Of FSA County Office Employees

1123 south college Street
Smithville, TN 37166
(931) 206-4585

Services: To promote the welfare of FSA county office employees.

DeKalb County Care

110 South Public square
Smithville, TN 37166

Church Outreach Ministries

Free & Accepted Masons of Tennessee

PO Box 574
Smithville, TN 37166
<http://www.grandlodge-tn.org>

Services: To develop and implement programs to assist the lodges in becoming more visible and active in the communities and to promote Friendship, Morality and Love throughout the state. To facilitate the charitable outreach of the Grand Lodge of Tennessee. To promote Honor, Integrity and Truth to all men and women.

Lighthouse Christian Camp Incorporated

205 Serenity Pl
Smithville, TN 37166
(615) 597-1264

Services: The principal purpose of the camp is to provide an enriching outdoor experience to needy, disadvantaged children suffering from neglect or sexual, physical, mental or emotional abuse and to provide an opportunity for them to learn about Christianity.

Community Service Organizations

DeKalb Cares Coalition

Alliance For Freedom Restoration and Justice

207 Serenity Pl
Smithville, TN 37166

Services: The AFRF is a nonprofit 501c3 organization dedicated to developing, mapping, and mobilizing a global collaborative network to engage together in pursuit of freedom, restoration, and justice.

Belk Community Center Inc.

578 Allen Bend Rd
Smithville, TN 37166

Community, Civic, Non-Profit Organizations (Continued)

Community Service Organizations (Continued)

Friends of the Appalachian Center For Crafts Of Tennessee (FACCT)

1560 Craft Center Dr

Smithville, TN 37166

Services: The Friends of the Appalachian Center for Crafts of Tennessee (FACCT) present the Annual "Celebration of Craft" on the first (or second) Saturday in April, from 10am-5pm at the Appalachian Center for Craft (ACC) in Smithville, Tennessee.

Children and Youth Organizations

DeKalb County Foundation for Education Inc.

PO Box 548

Smithville, TN 37166

United States Junior Chamber of Commerce

PO Box 334

Smithville, TN 37166

DeKalb Music Boosters

1933 Lee Braswell Road

Smithville, TN 37166

Services: DeKalb Music Boosters provides supplemental funding and volunteer service to the high school and middle school programs. We support all orchestra, band and choir programs at CRMS, HMS, and DHS, including Madrigals, A Cappella, and Jazz Ensemble.

Smithville School District Parent Teacher Organization

321 E Bryant Street

Smithville, TN 37166

(816) 532-0406

Services: The PTO (Parent Teacher Organization) is a dynamic group of parents, teachers and staff that are committed to enriching our children's elementary school experiences. We are all lucky to be able to send our kids to top-notch schools and the PTO's efforts only enhance this existing level of excellence!

Humphries Foundation

3437 Hurricane Ridge Road

Smithville, TN 37166

Phone: (615) 584-7281

Services: Private Foundation designed to teach teenagers farming operations. They learn how to build fences and work cattle and program also covers how to make financial decisions in order to have a profitable farm operation.

Community, Civic, Non-Profit Organizations (Continued)

Behavioral and Addiction Services

Haven of Hope of DeKalb County Inc.

301 W Main Street
Smithville, TN 37166

Services: Professional counseling for the community. They have contracts with professional counselors to be available for the community. The haven accepts insurance and also uses a sliding fee scale to determine individual cost.

Non-Emergency Transport Services

Medical Transport Services

Serving the Smithville Area
(727) 201-1717

Dekalb Ambulance Service

678 N Congress Blvd
Smithville, TN 37166
(615) 597-6768

Other Groups

Amvets
Tennessee Order of the Eastern Star
American Legion Auxiliary
Rotary Club
DeKalb Coalition for Humane Treatment of Animals Inc.

Parks and Outdoor Recreation

Parks

Edgar Evins State Park
Alexandria City Park
Greenbrook Park
Floating Mill Park

Recreation Areas

Cruise Center Hill Lake
Lakeside Resort
Long Branch Recreation Area
Center Hill Recreation Area
Ragland Bottom Recreation Area
Holmes Creek Recreation Area
Johnson Chapel Recreation Area
Cove Hollow Recreation Area
Buffalo Valley Recreation Area

Golf Courses

Smithville Golf Club and Swimming Pool
River Watch Golf Club

Education Resources

Libraries

Justin Potter Public Library

101 South 1st Street
Smithville, TN 37166
(615) 597-4359

Alexandria Library

109 S Public Square
Alexandria, TN 37012
(615) 529-4124

Liberty Library

103 College Street
Liberty, TN 37095
(615) 536-6116

Education Resources

Public Schools

DeKalb County High School

1130 West Broad Street
Smithville, TN 37166
(615) 597-4094

Smithville Elementary School

221 East Bryant Street
Smithville, TN 37166
(615) 597-4415

Northside Elementary School

400 North Congress Blvd
Smithville, TN 37166
(615) 597-1569

DeKalb Middle School

1132 West Broad Street
Smithville, TN 37166
(615) 597-7987

DeKalb West School

101 Bulldog Lane
Liberty, TN 37095
(615) 536-5332

Private Schools

New Frontiers Academy

315 Hunt Hollow Rd
Dowelltown, TN 37059
Phone: (615) 536-5641

Child Care Centers

Tiny Tot Child Care

4026 Nashville Hwy
Dowelltown, TN 37059
Phone: (615) 597-1284

Granny's Playhouse

3784 Cookeville Hwy
Smithville, TN 37166
Phone: (615) 597-9481

First Methodist Preschool

102 W Church St
Smithville, TN 37166
Phone: (615) 597-6639

Happy Days Childcare

706 S College St
Smithville, TN 37166
Phone: (615) 597-5437

Shirley Atnip's Day Care

1001 S Mountain St
Smithville, TN 37166
Phone: (615) 597-1435

Smithville Head Start

118 Kimberly lane
Smithville, TN 37166
(615) 597-5168

Child Care Centers

Kids Connection

750 S Congress Blvd
Smithville, TN 37166
Phone: (615) 318-1586

Rainbow Playschool

714 Walker Dr
Smithville, TN 37166
Phone: (615) 597-8777

LBJ & C Head start

118 Kimberly Ln
Smithville, TN 37166
Phone: (615) 597-5168

Northside Elementary Leaps

N. Congress Blvd
Smithville, TN 37166
(615) 547-4415

DeKalb West Elementary Pre-k

1 bulldog lane
Liberty, TN 37095
(615) 536-5332

Museums, Attractions, Festivals, and Events

48th Smithville Fiddlers' Jamboree

The old-time Fiddlers' Jamboree is a DeKalb County tradition that draws musicians, craft artists, and spectators to the Smithville Square each summer around the Independence Day weekend. Over time, the festival became a broader tribute to Appalachian art and culture. Thousands of tourists visit the festival every year, along with television viewers across the country via WCTE-TV and various PBS stations nationwide.

DeKalb County Fair

Alexandria is home to the DeKalb County Fair, known affectionately to locals as "The Grandpa Fair of the South". One of the oldest running fairs in the United States, the fair has been offering old-fashioned fun and good-natured competition since 1856.

Museums, Attractions, Festivals, and Events (continued)

Harmony Lane Farm and Creamery

Harmony Lane Farm is a Grade "A" Dairy and store selling the best, freshly made, goat's milk products. Over 100 happy goats produce some of the best goat milk available. Of course, with the best milk, and the freshest ingredients, we make the best goat cheese around.

Hidden Harbor Marina

Boat & Cabin Rentals at Center Hill Lake

Attention: New boating regulations effective July 1, 2018 require boat renters to have boaters license for those born on or after 1/1/1989. Please call to discuss your options, and find out more details here.

More than a destination, Hidden Harbor Marina is your resort for outdoor fun on Center Hill Lake. You can stay in one of our comfortable cabin rentals, or go camping at one of our campsites for a more intimate relationship with nature. Experience the fun of boating, water skiing, and fishing on one of Tennessee's most beautiful lakes.

Churches and Religious Organizations

Baptist Tabernacle
Calvary Baptist
Cooper's Chapel Baptist
Covenant Baptist
Dowelltown Baptist
Dry Creek Baptist
Elizabeth Chapel Baptist
First Baptist
First Baptist
Indian Creek Baptist
Lower Helton Baptist
Mt. Herman Missionary Baptist Church
Mt. Pisgah Free will Baptist
Mt. View Primitive Baptist
Mt. Zion Baptist
New Bildad Primitive Baptist
New Home Baptist
New Union The Baptist Church
New Vision Baptist
People's Independent Missionary Baptist
Salem Baptist
Smithville Free Will Baptist
Snow Hill Baptist
Upper Helton Baptist
West Main Baptist
Whorton Springs Baptist
St. Gregory's Catholic
Carmelite Center-spirituality
Alexandria Church of Christ

Churches and Religious Organizations

Antioch Church of Christ
Bluff Springs Church of Christ
Keltonburg Church of Christ
Northside Church of Christ
Smithville Church of Christ
Woodbury Church of Christ
Alexandria Church of God
Smithville Church of God
Long Branch Community
First Assembly of God
The Harvest Time Church
Lighthouse In-home Ministry
Kingdom Hall
Allen's Chapel Methodist
Buckner's Chapel Methodist
Faith Congregational Methodist
First United Methodist
First United Methodist
Liberty United Methodist
Webb Chapel United Methodist
Webb's Chapel United Methodist
Smithville Church of The Nazarene
New Life United Pentecostal
Temperance Hall Pentecostal
Cumberland Presbyterian
Seventh-day Adventist
Agape Community Orthodox
Kingdom of Jesus

Sources

City-data.com
Internet research

Wikipedia
https://en.wikipedia.org/wiki/DeKalb_County,_Tennessee

DeKalb County Website
<http://www.DeKalbtennessee.com/>

Radio-Locator/DeKalb County
<https://radio-locator.com/info/WJLE-FM?loc=35.95719%2C-85.82076&locn=Smithville%2C%20Tennessee>

Saint Thomas Website
<https://www.sthealth.com/locations/saint-thomas-DeKalb-hospital>

To update or add information, complete the form below

Name of Organization:

Contact Name:

Phone #:

Fax #:

Email:

Web page:

Mailing Address:

List services:

Is there a cost for services _____ Yes _____ No

Are there special requirements to receive your services: _____ Yes _____ No

If yes, please explain

What are your business hours:

Any additional information needed to understand your resource?

Submit updated information to: Shan.Williams@ascension.org

Community Health Needs Assessment for DeKalb County

Completed by Saint Thomas DeKalb Hospital in partnership with:

Stratasan

