

Ascension Saint Thomas Hickman Hospital

**2021 Community Health Needs Assessment
Hickman County, Tennessee**



Ascension

2021 Community Health Needs Assessment

Ascension Saint Thomas Hickman Hospital

The goal of this report is to offer a meaningful understanding of the most significant health needs across Hickman County, as well as to inform planning efforts to address those needs. Special attention has been given to the needs of individuals and communities who are more vulnerable, unmet health needs or gaps in services, and input gathered from the community. Findings from this report can be used to identify, develop, and focus hospital, health system, and community initiatives and programming to better serve the health and wellness needs of the community.

Hospital Legal Name: Ascension Saint Thomas Hickman Hospital

Hospital Address: 135 E Swan St. Centerville, Tennessee 37033

Hospital Website:

<https://healthcare.ascension.org/locations/tennessee/tnnas/centerville-ascension-saint-thomas-hickman>

Hospital Phone: 855-519-4978

Hospital EIN: 58-1737573

The 2021 Community Health Needs Assessment report was approved by the Ascension Saint Thomas Hickman Hospital Board of Directors on February 24, 2022 (Ascension Saint Thomas Hickman Hospital tax year 2021), and the Ascension Saint Thomas Board of Directors on April 8, 2022 (Ascension Saint Thomas Hickman Hospital tax year 2021). This report applies to the following three-year cycle: 7/1/2022 to 6/30/2024. This report, as well as the previous report, can be found at our public website.

We value the community's voice and welcome feedback on this report. Please visit our public website (<https://healthcare.ascension.org/chna>) to submit your comments.

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Acknowledgements / Executive Statement

The 2021 community health needs assessment (CHNA) represents a true collaborative effort in order to gain a meaningful understanding of the most pressing health needs across Hickman County. Ascension Saint Thomas Hickman Hospital is exceedingly thankful to the many community organizations and individuals who shared their views, knowledge, expertise, and skills with us. A complete description of community partner contributions is included in this report. We look forward to our continued collaborative work to make this a better, healthier place for all people.

We would also like to thank you for reading this report, and your interest and commitment to improving the health of Hickman County.

Executive Summary

2021 Community Health Needs Assessment

Ascension Saint Thomas Hickman Hospital

The goal of the 2021 Community Health Needs Assessment (CHNA) report is to offer a meaningful understanding of the most significant health needs across Hickman County. Findings from this report can be used to identify, develop, and focus hospital, health system, and community initiatives and programming to better serve the health and wellness needs of the community.

Purpose of the CHNA

As part of the Patient Protection and Affordable Care Act of 2010, all not-for-profit hospitals are required to conduct a community health needs assessment (CHNA) and adopt an implementation strategy every three years. The purpose of the CHNA is to understand the health needs and priorities of those who live and/or work in the communities served by the hospital, with the goal of addressing those needs through the development of an implementation strategy plan. As a Catholic health ministry, Ascension Saint Thomas Hickman Hospital is dedicated to spiritually centered, holistic care that sustains and improves the health of not only individuals, but the communities it serves. With special attention to those who are poor and vulnerable, we are advocates for a compassionate and just society through our actions and words. Saint Thomas Hickman Hospital is dedicated to serving patients with compassionate care and medical excellence, making a difference in every life we touch.

Collaborations

The 2021 Community Health Needs Assessment (CHNA) represents a true collaborative effort in order to gain a meaningful understanding of the most pressing health needs across Hickman County. Ascension Saint Thomas Hickman Hospital is exceedingly thankful to the many community organizations and individuals who shared their views, knowledge, expertise, and skills with us - especially the Tennessee Department of Health, Hickman County Health Department, and the Hickman County Health Council. Stratasan, a healthcare strategic planning organization, was an important contracted partner who helped Ascension Saint Thomas Hickman Hospital and the Hickman Health Council review existing data and provided important data analysis. A complete description of community partner contributions is included in the full CHNA report. We look forward to our continued collaborative work to make this a better, healthier place for all people.

Community Served

Although Ascension Saint Thomas Hickman Hospital serves Hickman County and surrounding areas, Ascension Saint Thomas Hickman Hospital has defined its community served as Hickman County for the 2021 CHNA. Hickman County was selected as Ascension Saint Thomas Hickman Hospital's community served because it is our primary service area as well as our partners'. Additionally, community health data is readily available at the county level.

Data Analysis Methodology

The 2021 CHNA was conducted from July 2021 to February 2022, and utilized a derivation of the Mobilizing for Action through Planning and Partnership (MAPP) process, which incorporated data from both primary and secondary sources. Primary data sources included information provided by groups/individuals, e.g., community residents, health care consumers, health care professionals, community stakeholders, and multi-sector representatives. Special attention was given to the needs of individuals and communities who are more vulnerable, and to unmet health needs or gaps in services.

- 12 community stakeholders were interviewed individually for their insights on community health issues.
- 114 people completed an online survey distributed through stakeholders and the Hickman County Community Health Council. Also, the Tennessee Department of Health completed an online community survey in March 2020, and those results are included in the analysis.
- Secondary data was compiled and reviewed to understand the health status of the community. Measures reviewed included chronic disease, social and economic factors, and healthcare access and utilization trends in the community and were gathered from reputable and reliable sources.

Community Needs

Ascension Saint Thomas Hickman Hospital analyzed secondary data of over 95 indicators and gathered community input through individual community interviews, an online community survey, and the Hickman County Health Council to identify the needs in Hickman County. In collaboration with community partners, Ascension Saint Thomas Hickman Hospital used a phased prioritization approach to determine the most crucial needs for community stakeholders to address.

At the Hickman County Health Council meeting February second, the group reviewed a summary of the most significant health issues according to the various sources of data collected from community members.

Hickman County Significant Community Health Issues



Identified Needs: 2019 CHNA	Secondary Data Issues	Issues Identified in Interviews	Issues Identified in Survey ¹	Issues Identified in Survey ²
<ul style="list-style-type: none"> • Mental health/substance abuse • Physical inactivity/obesity • Transportation • Education 	<ul style="list-style-type: none"> • Adult smoking • Adult obesity • Access to exercise opportunities • High population to primary care physicians • High school completion • Some college • Social associations • Injury deaths • Long commute – driving alone 	<ul style="list-style-type: none"> • Drug abuse and addiction • Poverty, low income and need for jobs • Suicide and more behavioral health resources, reduce stigma • Rising cost of healthcare and ability to pay • Increase physical activity and movement • Obesity and chronic disease • Community spirit and empathy 	<ul style="list-style-type: none"> • Drug overdose/substance misuse • Youth nicotine use/vaping • Adult obesity • Adult smoking • Suicide • Negative childhood experiences • Per capita personal income • Physical activity • Cancer • Babies born addicted 	<ul style="list-style-type: none"> • Nutrition/lack of healthy diet • Poverty/income • Education on healthy lifestyles/knowledge of resources • Inactivity/exercise • Substance use disorder • Access to healthcare/insurance • Affordable healthcare/insurance

¹ State of TN Department of Health Survey, December 2020

² Ascension Saint Thomas Survey, November 2021

Through this process and review the Hickman County Health Council prioritized two issues—mental health and substance misuse.

Next Steps

The next steps will be to work with Ascension Saint Thomas Hickman Hospital leaders and community partners to finalize which community health needs Ascension Tennessee and Ascension Saint Thomas Hickman Hospital will prioritize. Later in 2022, an Implementation Plan (I.S.) with detailed strategies will be developed and brought before the Board for approval.

About Ascension

As one of the leading non-profit and Catholic health systems in the United States, Ascension is committed to delivering compassionate, personalized care to all, with special attention to persons living in poverty and those most vulnerable.

Ascension

Ascension is a faith-based healthcare organization dedicated to transformation through innovation across the continuum of care. The national health system operates 2,600 sites of care – including 145 hospitals and more than 40 senior living facilities – in 19 states and the District of Columbia, while providing a variety of services including clinical and network services, venture capital investing, investment management, biomedical engineering, facilities management, risk management, and contracting through Ascension’s own group purchasing organization.

Ascension’s Mission provides a strong framework and guidance for the work done to meet the needs of the communities across the U.S. It is foundational to transform healthcare and express priorities when providing care and services, particularly to those most in need.

Mission: Rooted in the loving ministry of Jesus as healer, we commit ourselves to serving all persons with special attention to those who are poor and vulnerable. Our Catholic health ministry is dedicated to spiritually-centered, holistic care which sustains and improves the health of individuals and communities. We are advocates for a compassionate and just society through our actions and our words.

For more information about Ascension, visit <https://www.ascension.org/>.

Ascension Saint Thomas Hickman Hospital

As a Ministry of the Catholic Church, Ascension Saint Thomas Hickman Hospital is a non-profit hospital governed by a local board of trustees represented by residents, medical staff, and sister sponsorship's, and has been providing medical care to Hickman County. Ascension Saint Thomas operates 11 hospital campuses, more than 110 related healthcare facilities, and employs more than 700+ primary and specialty care clinicians.



Ascension Saint Thomas Hickman Hospital

Ascension Saint Thomas Hickman has been serving the Hickman County and Centerville communities since 1964. Ascension Saint Thomas Hickman Hospital, the first hospital in Tennessee to qualify as a Critical Access Hospital, has specialty clinics in eye care, gastroenterology, cardiology, urology, and orthopedics. Additionally, the hospital has complete ancillary services, including physical therapy, cardiopulmonary services with full pulmonary function testing, and radiology with CAT scan and echocardiography capabilities. Ascension Saint Thomas Hickman Hospital strives to provide quality primary and emergency care to the community in a professional, accessible and compassionate manner.

For more information about Ascension Saint Thomas Hickman Hospital, visit

<https://healthcare.ascension.org/locations/tennessee/tnnas/centerville-ascension-saint-thomas-hickman>.

About the Community Health Needs Assessment

A community health needs assessment, or CHNA, is essential for community building and health improvement efforts, and directing resources where they are most needed. CHNAs can be powerful tools that have the potential to be catalysts for immense community change.

Purpose of the CHNA

A CHNA is “a systematic process involving the community to identify and analyze community health needs and assets in order to prioritize, plan, and act upon unmet community health needs.”¹ The process serves as a foundation for promoting the health and well-being of the community by identifying the most pressing needs, leveraging existing assets and resources, developing strategic plans, and mobilizing hospital programs and community partners to work together. This community-driven approach aligns with Ascension Saint Thomas Hickman Hospital’s commitment to offer programs designed to address the health needs of a community, with special attention to persons who are underserved and vulnerable. Additionally, if there are any terms or definitions that you would like to read more about, please see Appendix A (page 41).

IRS 501(r)(3) and Form 990, Schedule H Compliance

The CHNA also serves to satisfy certain requirements of tax reporting, pursuant to provisions of the Patient Protection and Affordable Care Act of 2010, more commonly known as the Affordable Care Act (ACA). As part of the ACA, all not-for-profit hospitals are required to conduct a CHNA and adopt an implementation strategy every three years. Requirements for 501(c)(3) Hospitals Under the Affordable Care Act are described in Code Section 501(r)(3), and include making the CHNA report (current and previous) widely available to the public. In accordance with this requirement, electronic reports of both the CHNA and the implementation strategy can be found at <https://healthcare.ascension.org/CHNA> and paper versions can be requested at Ascension Saint Thomas Hickman Hospital.

Timeline

In July 2021, Ascension Saint Thomas Hickman Hospital began a Community Health Needs Assessment for Hickman County and sought input from persons who represent the broad interests of the community using several methods:

- Information gathering, using secondary public health sources, occurred in August 2021.
- Community members participated in twelve individual interviews for their perspectives on community health needs and issues from October 21, 2021 through November 30, 2021.
- The Tennessee Department of Health conducted a survey of 121 county residents concluding in March, 2020.
- A community survey was distributed and 114 responses were collected from October 6, 2021 through November 15, 2021.
- Hickman County Health Council Meetings were held on:

¹ Catholic Health Association of the United States (<https://www.chausa.org>)

- October 6, 2021 - review the secondary data and receive link to community surveys
- November 3, 2021 - ask questions about the secondary data and receive update on survey responses and interview progress
- December 1, 2021 - review the interview summary and community survey summary
- February 2, 2022 - determine and prioritize the most significant health needs in the county

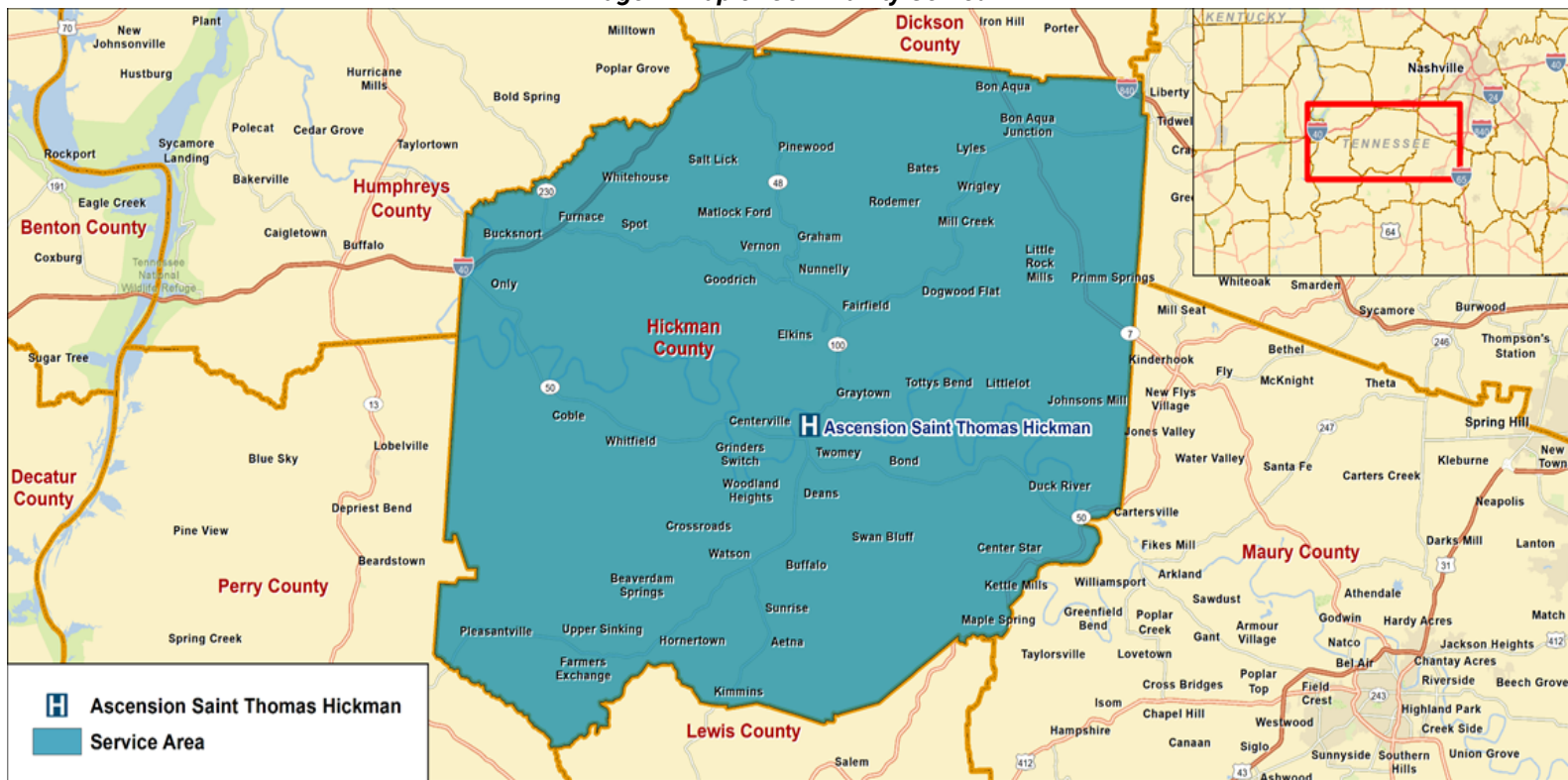
Community Served and Demographics

A first step in the assessment process is clarifying the geography within which the assessment occurs and understanding the community demographics.

Community Served

For the purpose of the 2021 CHNA, Ascension Saint Thomas Hickman Hospital has defined its community served as Hickman County. Although Ascension Saint Thomas Hickman Hospital serves Hickman County and surrounding areas, the “community served” was defined as such because most of our service area is contained in Hickman County. From July 1, 2020 through June 30, 2021, 82% of Ascension Saint Thomas Hickman Hospital’s inpatients came from Hickman County.

Image 1: Map of Community Served



Sixty-four percent of employees are employed in the top five businesses:

- Public Administration - 21.1%
- Health care & social assistance - 14.0%
- Educational Services - 10.8%
- Retail Trade - 10.1%

- Other Services (equipment & machine repair, promoting or administering religious activities, grantmaking, advocacy, and providing dry-cleaning and laundry services, personal care services, death care services, pet care services, etc.) - 8.1%

4,289 people commute into the county each day while 9,129 out migrate from the county resulting in a net out migration of 4,840 per day.

Demographic Data

Located in western middle Tennessee, Hickman County has a population of 26,074 and is all rural with 613 square miles. Below are demographic data highlights for Hickman County:

- The 2021 population of Hickman County is estimated to be 26,074 projected to grow .61% per year by 2026
- 18.7% of the residents of Hickman County are 65 or older, compared to 18% percent in Tennessee
- 97 percent of residents are non-Hispanic; 3 percent are Hispanic or Latino (any race)
- 91 percent of residents are White; 0 percent are Asian; 5 percent are Black or African American
- The total population increase from 2010 to 2021 was 4.6 percent
- The median household income is below the state median income (\$45,310 for Hickman County; \$55,276 for Tennessee)
- The percent of all ages of people in poverty was higher than the state (16.3 percent for Hickman County; 13.8 percent for Tennessee)
- The uninsured rate for the Hickman County is higher than the state (14 percent for Hickman County; 12 percent for Tennessee)

Table 1: Description of the Community

Demographic Highlights		
Indicator	Hickman County	Description
Population		
% Living in rural communities	100%	
% below 18 years of age	19.1%	
% 65 and older	18.7%	
% Hispanic	3%	
% Asian	0%	
% Black	5%	
% White	91%	
Social and Community Context		
English Proficiency	1.95%	Proportion of community members that speak English "less than well"
Median Household Income	\$45,310	Income where half of households in a county earn more and half of households earn less
Percent of Children in Poverty	22%	Percentage of people under age 18 in poverty
Percent of Uninsured	14%	Percentage of population under age 65 without health insurance
Percent of Educational Attainment	79%	Percentage of adults ages 25 and over with a high school diploma or equivalent
Percent of Unemployment	3.6%	Percentage of population ages 16 and older unemployed but seeking work

To view Community Demographic Data in its entirety, see Appendix B (page 43).

Process and Methods Used

Ascension Saint Thomas Hickman Hospital is committed to using national best practices in conducting the CHNA. Health needs and assets for Hickman County were determined using a combination of data collection and analysis for both secondary and primary data, as well as community input on the identified and significant needs.

Ascension Saint Thomas Hickman Hospital's approach includes the model developed by the County Health Rankings and Roadmaps and the Robert Wood Johnson Foundation, utilizing the determinants of health model as the model for community health improvement supplemented with additional data.

Collaborators and/or Consultants

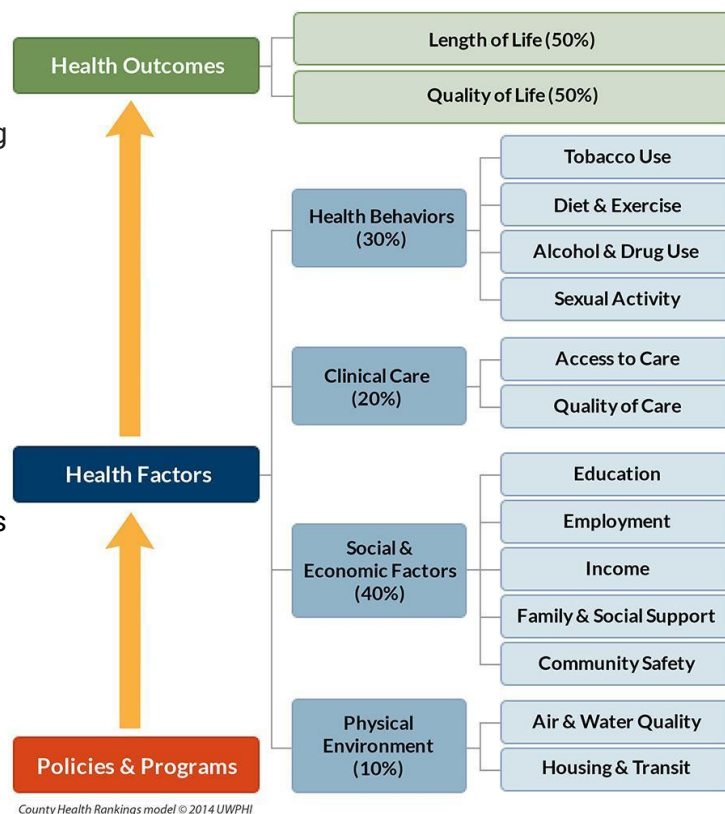
With the contracted assistance of Stratasan, Ascension Saint Thomas Hickman Hospital completed its 2021 CHNA in collaboration with the following organizations and individuals.

- Hickman County Community Health Council
- Hickman County Department of Health
- Tennessee Department of Health

Ascension Saint Thomas as the sponsors of the assessment, engaged national leaders in community health needs assessments to assist in the project. Stratasan, a healthcare analytics and services company based out of Nashville, Tennessee, provided the analysis of secondary community health data, conducted and analyzed the interviews, and analyzed the online survey data.

The Hickman County Department of Health using their Health Council provided the partnership for data review, interview participants, survey link distribution and prioritization assistance.

The Tennessee Department of Health provided support to both the County Health Department as well as Ascension Saint Thomas during the CHNA process.



Data Collection Methodology

In collaboration with various community partners, Ascension Saint Thomas Hickman Hospital collected and analyzed primary and secondary data for Hickman County. The methodology used is a modified Mobilizing for Action through Planning and Partnerships (MAPP).



Summary of Community Input

Recognizing its vital importance in understanding the health needs and assets of the community, Stratasan consulted with a range of public health and social service providers that represent the broad interest of Hickman County. A concerted effort was made to ensure that the individuals and organizations represented the needs and perspectives of: 1) public health practice and research; 2) individuals who are medically underserved, are low-income, or considered among the minority populations served by the hospital; and 3) the broader community at large and those who represent the broad interests and needs of the community served.

Multiple methods were used to gather community input, including key stakeholder interviews, community survey and collaboration with the Hickman County Health Council. These methods provided additional perspectives on how to select and address top health issues facing Hickman County. A summary of the process and results is outlined below.

Surveys

A survey was conducted by Stratasan in collaboration with Ascension Saint Thomas and the Hickman County Health Council to gather the perceptions, thoughts, opinions, and concerns of the community regarding health priorities for Hickman County. 114 individuals participated in the survey, held between October, 2021 and November, 2021. The data gathered and analyzed provides valuable insight into the issues of importance to the community. The survey contained 5 questions and was distributed to a broad segment of the population through distribution of the survey link to the members of the Health Council and to key stakeholders interviewed. They distributed the link widely throughout their clients, co-workers, and other organizations.

Surveys	
Key Summary Points	
<ul style="list-style-type: none"> What prevents all people in Hickman County from being as healthy as possible? <ul style="list-style-type: none"> Lack of affordable, quality nutritious food The lack of financial resources contributed to the other issues mentioned such as accessible and affordable healthcare, housing and transportation Lack of exercise, physical activity and affordable, fun places to exercise Education for parents and children on better health habits and how to go about accessing resources they need If you could make 1 or 2 changes to ensure all residents of Hickman County can be as healthy as possible, what would these changes be? <ul style="list-style-type: none"> Create more affordable, nutritious food selections/ healthy diet Improve education for parents/children on healthy eating, lifestyle and improve formal education Create better, accessible exercise facilities/fitness programs/exercise 	
Populations/Sectors Represented	Common Themes
<ul style="list-style-type: none"> The survey was distributed county-wide through the Health Council and people who were interviewed. The purpose of the distribution was to receive input from persons who represent the broad interests of the community served by the hospital. 	<p>What prevents all people in Hickman County from being as healthy as possible? The top responses are below with the number of mentions.</p> <ul style="list-style-type: none"> Nutrition/lack of healthy diet - 26 Poverty/income - 26 Education on healthy lifestyles/knowledge of resources - 22 Inactivity/exercise - 22 Drug abuse - 13 Access to healthcare/insurance - 11 Affordable healthcare/insurance - 9 Lack of motivation - 9 <p>If you could make 1 or 2 changes to ensure all residents of Hickman County can be as healthy as possible, what would these changes be?</p> <ul style="list-style-type: none"> Create more affordable, nutritious food selections/healthy diet - 31 Improve education for parents/children on healthy eating, lifestyle & improve formal education - 24 Create better accessible exercise facilities/ fitness programs/exercise - 24 Increase access to healthcare including specialists - 12

	<ul style="list-style-type: none"> • Create drug prevention and treatment programs (includes illegal drugs, vaping, tobacco alcohol) - 12
Meaningful Quotes	
<ul style="list-style-type: none"> • “There are lots of fast-food places in town, but few places where you can get an affordable salad.” • “Lack of resources (transportation, insurance, availability of qualified physicians with openings in their schedules, dental care, vision care, healthy food bank options, etc.)” • “Educating people to realize that their lifestyle choices can affect your health; smoking, exercise, drugs, healthy eating. Counseling availability for people suffering from depression.” 	

Key stakeholder interviews

A series of 12 one-on-one interviews were conducted by Stratasan in collaboration with Ascension Saint Thomas staff to gather feedback from key stakeholders on the health needs and assets of Hickman County. 12 representatives from 12 different organizations and agencies participated in the interviews, held between October 2021 and November 2021. Sectors represented by participants included:

- Tennessee Department of Health
- Church of Christ
- Hickman County Coordinated Schools
- Hickman County Senior Center
- Hickman County Court
- University of Tennessee Extension Service
- South Central Human Resource Agency - Head Start
- Hickman County Coordinated Schools AWARE program
- Hickman County Emergency Medical Service
- Hickman County Economic and Community Development
- Centerville City Government
- Media
- Business

Key Stakeholder Interviews	
Key Summary Points	
<ul style="list-style-type: none"> The community was most concerned by drug abuse, mental health, suicides, access to healthcare (providers and cost of care), infrastructure, poverty, jobs, and healthy eating and active living. Below are the populations represented and the common themes of each question asked. 	
Populations/Sectors Represented	Common Themes
<ul style="list-style-type: none"> Tennessee Department of Health Coordinated School System Hickman County Clerk UT Extension Services Emergency Medical Services Economic & Community Development Senior Center Church of Christ School AWARE program South Central Human Resource Agency - Head Start <p>Interviewees represented, youth, children, businesses, seniors, the underserved, emergency medical services and the general population.</p>	<p><u>Strongest Assets</u></p> <ul style="list-style-type: none"> The people - generous, helpful, caring, kind, close-knit, community minded, faith-based Good, strong local healthcare system with Saint Thomas Hickman Hospital and wonderful doctors Natural beauty, popular recreation spot, streams and rivers, hunting, fishing, biking, hiking Charming small town and close enough to larger towns and cities for conveniences Really good school system with behavioral health in schools Economic development and investment in the town square <p><u>Communities Left Out</u></p> <ul style="list-style-type: none"> Hidden Valley - very underserved with no infrastructure Those in poverty, poor kids, and those who can't afford healthcare Elderly Those without Internet and transportation <p><u>Top three issues most concerned about in Hickman County</u></p> <ul style="list-style-type: none"> Drug abuse and addiction The divide between East and West segments of the county Poverty, low income and need for jobs More infrastructure - sewer, water, gas, housing and transportation, improve downtown area Suicide, mental health, decrease stigma Community spirit and empathy <p><u>Top three health issues most concerned about in Hickman County</u></p> <ul style="list-style-type: none"> Substance use, overdoses, including teens, local drug treatment Suicide and more behavioral health resources, reduce stigma Access to healthcare services locally, pediatricians for medical home, dentists Rising cost of healthcare and seniors and others ability to afford drugs and care Increased physical activity and movement, need more opportunities for kids to exercise outside Obesity and chronic diseases <p><u>Top Initiatives to Implement</u></p> <ul style="list-style-type: none"> Drug use intervention and education Increase access to health services - Obstetrics, Pediatricians that take TennCare and make house calls, EMS outposts fully staffed, more hospital services

	<ul style="list-style-type: none"> • Increase access to education and training; more jobs in the county • Functioning Parks and Recreation Department to improve parks, and add exercise opportunities • Improve infrastructure - roads, full-time fire services, sewer, water, gas and broadband • More healthy eating opportunities • Community initiative to decrease teen pregnancy • Bring both sides of the community together <p><u>Needs emerged given COVID-19 pandemic and movements for racial and social justice</u></p> <ul style="list-style-type: none"> • Isolation - seniors and impacted drug use and suicide • Vaccinations - need education to increase • Significant reluctance to believe COVID is real • Lack of Internet • Non-English speakers barrier in healthcare system and to community participation • Racial equity challenging due to lack of exposure to different races and cultures
Meaningful Quotes	
<ul style="list-style-type: none"> • "A student's family's shed was out of water, but it is better than the tent they were living in. We had to call mobile crisis." • "People are not concerned about other people like they used to be, and they aren't concerned about the consequences of their actions." • "We need to decrease the stigma of behavioral health issues and drug abuse." 	

Other community input

Ascension Saint Thomas Hickman Hospital collaborated with the Hickman County Health Department and the Hickman County Health Council for completion of the CHNA. The Hickman County Health Council is comprised of 85 members representing child advocacy, schools, insurance payers, providers (Health Department, hospitals, mental health providers, counselors, physicians), employers, businesses, pastors, domestic violence, youth and family development agencies, UT Extension services, Newspaper, economic and community development, drug prevention, and local government.

To view additional community input data, see Appendix C (page 46).

Summary of Secondary Data

Secondary data is data that has already been collected and published by another party. Both governmental and non-governmental agencies routinely collect secondary data reflective of the health status of the population at the state and county level through surveys and surveillance systems. Secondary data was compiled from various sources that are reputable and reliable.

Health indicators in the following categories were reviewed:

- Health Outcomes
- Social and Economic Factors that impact health
- Health Behaviors
- Access to Healthcare
- Disparities

A summary of the secondary data collected and analyzed through this assessment is outlined below.

Secondary data gathered includes:

- Public health data - causes of death, disease incidence, county health rankings indicators
- Demographics and socioeconomics - population, poverty, uninsured, unemployment
- Psychographics - behavior measured by spending and preferences using a nationwide survey

County Health Rankings indicates the following as areas to explore in Hickman County:

- Higher adult smoking at 27%
- Higher adult obesity at 38%
- Lower access to exercise opportunities at 35%
- Higher population to primary care physician at 5,010 :1
- Lower percentage of highschool completion at 79%
- Lower percentage of adults with some college at 36%
- Lower social associations at 3.6 per 10,000 population
- Higher injury deaths at 123 per 100,000 population
- Higher percentage of those commuting over 30 minutes driving alone at 60%

The tables below are based on data vetted, compiled and made available on the County Health Rankings and Roadmaps (CHRR) website (<https://www.countyhealthrankings.org/>). The site is maintained by the University of Wisconsin Population Health Institute, School of Medicine and Public Health, with funding from the Robert Wood Johnson Foundation. CHRR obtains and cites data from other public sources that are reliable. CHRR also shares trending data on some indicators.

CHRR compiles new data every year and shares with the public in March. The data below is from the 2021 publication. It is important to understand that reliable data is generally two to three years behind due to the importance of careful analysis. NOTE: Data in the charts does not reflect the effects that the COVID-19 pandemic has had on communities.

How To Read These Charts

Why they are important: Explains why we monitor and track these measures in a community and how it relates to health. The descriptions of 'why they are important' are largely drawn from the CHRR website as well.

County vs. State: Describes how the county's most recent data for the health issue compares to state.

Trending: CHRR provides a calculation for some measures to explain if a measure is worsening or improving.

- Red: The measure is worsening in this county.
- Green: The measure is improving in this county.
- Empty: There is no data trend to share or the measure has remained the same.

Top US Counties: The best 10 percent of counties in the country. It is important to compare not just with Tennessee but important to know how the best counties are doing and how our county compares.

Description: Explains what the indicator measures, how it is measured, and who is included in the measure.

n/a: Not available or not applicable. There might not be available data for the community on every measure. Some measures will not be comparable.

Health Outcomes

Why they are important: Health outcomes reflect how healthy a county is right now. They reflect the physical and mental well-being of residents within a community.

Indicators	Trend	Hickman County	Tennessee	Top US Counties	Description
Length of Life					
Premature Death		10,625	9,355	5,400	Years of potential life lost before age 75 per 100,000 population (age-adjusted)
Life Expectancy		74.5	76.0	81.1	How long the average person should live.
Infant Mortality	n/a	7.9	7.1	4.0	Number of all infant deaths (within 1 year) per 1,000 live births.
Physical Health					
Poor or Fair Health		24%	21%	14%	Percent of adults reporting fair or poor health.
Poor Physical Health Days		5.3	4.7	3.4	Average number of physically unhealthy days reported in past 30 days (age-adjusted).
Frequent Physical Distress		17%	15%	10%	Percent of adults 14 or more days of poor physical health per month.
Low Birth Weight		8%	9%	6%	Percent of babies born too small (less than 2,500 grams).
Fall Fatalities 65+		10.7	10.7	n/a	Number of injury deaths due to falls among those 65 years of age and over per 100,000 population.
Mental Health					
Poor Mental Health Days		5.8	5.2	3.8	Average number of mentally unhealthy days reported in the past 30 days.
Frequent Mental Distress		18%	16%	10%	Percent of adults reporting 14 or more days of poor mental health per month.
Suicide		21	16	11	Number of deaths due to suicide per 100,000.
Morbidity					
Diabetes prevalence		15%	13%	8%	Percent of adults aged 20 and above with diagnosed diabetes.
Cancer Incidence		482.2	466.0	n/a	Number of new cancer diagnoses per 100,000.
Communicable Disease					

HIV Prevalence		182.3	304.7	50	Number of people aged 13 years and over with a diagnosis of HIV per 100,000.
Sexually Transmitted Infections		374	569	161	Number of newly diagnosed chlamydia cases per 100,000.
Source: https://www.countyhealthrankings.org/explore-health-rankings <Place URL of snapshot page here>					

Healthcare Access					
Uninsured		14%	12%	6%	Percentage of population under age 65 without health insurance.
Uninsured Adults		16%	15%	12%	Percentage of adults under age 65 without health insurance.
Uninsured children		6%	5%	6%	Percentage of children under age 19 without health insurance.
Primary Care Physicians		5,010:1	1,400:1	1,200:1	Ratio of population to primary care physicians.
Other Primary Care Providers		1,937:1	681:1	621:1	Ratio of the population to primary care providers other than physicians.
Mental Health Providers		2,290:1	630:1	270:1	Ratio of the population to mental health providers.
Hospital Utilization					
Preventable Hospital Stays		3,745	4,915	2,565	Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.
Preventative Healthcare					
Flu Vaccinations		46%	50%	55%	Percentage of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination.
Mammography Screenings		37%	41%	51%	Percentage of female Medicare enrollees ages 65-74 that received an annual mammography screening.
Source: https://www.countyhealthrankings.org/explore-health-rankings					

Social and Economic Factors

Why they are important: These factors have a significant effect on our health. They affect our ability to make healthy decisions, afford medical care, afford housing and food, manage stress and more.

Indicators	Trend	Hickman County	Tennessee	Top US Counties	Description
Economic Stability					
Median Household Income		\$46,200	\$56,000	\$72,900	Income where half of households in a county earn more and half of households earn less.
Unemployment		3.1%	3.4%	2.6%	Percentage of population ages 16 and older unemployed but seeking work.
Poverty		16.3%	13.8%	n/a	Percentage of population living below the Federal Poverty Line.
Childhood Poverty		22%	19%	10%	Percentage of people under age 18 in poverty.
Educational Attainment					
High School Completion		79%	87%	94%	Percentage of adults ages 25 and over with a high school diploma or equivalent.
Some College		36%	61%	73%	Percentage of adults ages 25-44 with some post-secondary education.
Social/Community					
Children in single-parent homes		33%	29%	14%	Percentage of children that live in a household headed by a single parent.
Social Associations		3.6	11.3	18.2	Number of membership associations per 10,000 population.
Disconnected Youth		15%	7%	7%	Percentage of teens and young adults ages 16-19 who are neither working nor in school.
Juvenile Arrests		X	X	X	Rate of delinquency cases per 1,000 juveniles.
Violent Crime		383	621	63	Number of reported violent crime offenses per 100,000 population.
Access to Healthy Foods					
Food Environment Index		7.6	6.2	8.7	Index of factors that contribute to a healthy food environment, 0-worst 10-best.
Food Insecurity		14%	14%	9%	Percent of the population who lack adequate access to food.

Limited Access to Healthy Foods		5%	6%	2%	Percent of the population who are low-income and do not live close to a grocery store.
Source: https://www.countyhealthrankings.org/explore-health-rankings					

Physical Environment

Why it is important: The physical environment is where people live, learn, work, and play. The physical environment impacts our air, water, housing and transportation to work or school . Poor physical environment can affect our ability and that of our families and neighbors to live long and healthy lives.

Indicators	Trend	Hickman County	Tennessee	Top US Counties	Description
Physical Environment					
Severe housing cost burden		9%	12%	7%	Percentage of households that spend 50% or more of their household income on housing.
Severe Housing Problems		15%	14%	9%	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities.
Air Pollution - Particulate Matter		8.2	8.8	5.5	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5).
Homeownership		80%	66%	81%	Percentage of occupied housing units that are owned.
Year Structure Built		16.5%	18.1%	27.5%	Percentage of housing units built prior to 1960.

Source: <https://www.countyhealthrankings.org/explore-health-rankings>

Clinical Care

Why it is important: Access to affordable, quality care can help detect issues sooner and prevent disease. This can help individuals live longer and have healthier lives.

Indicators	Trend	Hickman County	Tennessee	Top US Counties	Description
Healthcare Access					
Uninsured		14%	12%	6%	Percentage of population under age 65 without health insurance.
Uninsured Adults		15%	16%	7%	Percentage of adults under age 65 without health insurance.

Uninsured children		6%	5%	3%	Percentage of children under age 19 without health insurance.
Primary Care Physicians		5,010:1	1,400:1	1,200:1	Ratio of population to primary care physicians.
Other Primary Care Providers		1,937:1	681:1	621:1	Ratio of the population to primary care providers other than physicians.
Mental Health Providers		2,290:1	630:1	270:1	Ratio of the population to mental health providers.
Hospital Utilization					
Preventable Hospital Stays		3,745	4,915	2,565	Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.
Preventative Healthcare					
Flu Vaccinations		46%	50%	55%	Percentage of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination.
Mammography Screenings		37%	41%	51%	Percentage of female Medicare enrollees ages 65-74 that received an annual mammography screening.
Source: https://www.countyhealthrankings.org/explore-health-rankings					

Health Behaviors

Why they are important: Health behaviors are actions individuals take that can affect their health. These actions can lead to positive health outcomes or they can increase someone's risk of disease and premature death. It is important to understand that not all people have the same opportunities to engage in healthier behaviors.

Indicators	Trend	Hickman County	Tennessee	Top US Counties	Description
Healthy Life					
Adult Obesity		38%	33%	26%	Percentage of the adult population (age 20 and older) that reports a body mass index (BMI) greater than or equal to 30 kg/m ² .
Physical Inactivity		26%	27%	19%	Percentage of adults age 20 and over reporting no leisure-time physical activity.
Access to Exercise Opportunities		35%	70%	91%	Percentage of population with adequate access to locations for physical activity.
Insufficient Sleep		43%	41%	32%	Percentage of adults who report fewer than 7 hours of sleep on average.
Motor Vehicle Crash Deaths		33.6	15.4	9.0	Number of motor vehicle crash deaths per 100,000 population.

Substance Use and Misuse					
Adult Smoking		27%	21%	16%	Percentage of adults who are current smokers.
Excessive Drinking		17%	17%	15%	Percentage of adults reporting binge or heavy drinking.
Alcohol-Impaired Driving Deaths		21%	25%	11%	Percent of Alcohol-impaired driving deaths.
Opioid Hospital Visits		68	85	n/a	Rate of opioid-related hospital visits per 100,000 population.
Sexual Health					
Teen Births		37	29	12	Number of births per 1,000 female population ages 15-19.
Sexually Transmitted Infections		374	569	161	Number of newly diagnosed chlamydia cases per 100,000 population.
Source: https://www.countyhealthrankings.org/explore-health-rankings					

To view additional secondary data and sources, see Appendix D (page 50).

Summary of COVID-19 Impact on Hickman County

The COVID-19 pandemic has had an impact on communities world-wide. In the United States, urban communities took the hardest hit for both COVID cases and death. Profound disparities emerged as the pandemic grew. Older Americans have the highest risk of death from COVID than any other age group with 81% of deaths from COVID to people over 65 years of age. There are significant disparities by race and ethnicity as well. Americans of color have higher risk of exposure, infection and death compared to non-Hispanic White Americans.²

Significant COVID-19 disparities include:

- Hispanic Persons at 2.3 times the risk of death
- Non-Hispanic Black persons at 1.9 times the risk of death
- American Indian or Alaska Native at 2.4 times the risk of death

Some reasons for these differences include:

- Multigenerational families
- Living in crowded housing with close physical contact
- Working in environments in which social distancing is not possible
- Inadequate access to health care
- Higher rates of underlying conditions³

COVID-19 Impact on Hickman County (as of December 1, 2021)			
Indicator	Hickman County	Tennessee	Description
Total Cases	4,722	1,303,830	
Confirmed Cases per 100,000	9,295	19,092	
Total Deaths	78	19,829	
Deaths per 100,000	150	246	
Case Fatality Percentage	1.65%	1.52%	Percent of total confirmed cases of individuals who died of COVID-19

Source: CDC COVID Data Tracker and TN Dept of Health
https://covid.cdc.gov/covid-data-tracker/#trends_totalandratedeathstotalrate

²Centers for Disease Control and Prevention (<https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/racial-ethnic-disparities>)

³ Ibid

Community Input on Previous CHNA and Implementation Strategy

Ascension Saint Thomas Hickman Hospital's previous CHNA and implementation strategy were made available to the public and open for public comment via the website:

<https://healthcare.ascension.org/chna>.

No comments were received regarding the previous CHNA and implementation plan.

Data Limitations and Information Gaps

Although it is quite comprehensive, this assessment cannot measure all possible aspects of health and cannot represent every possible population within Hickman County. This constraint limits the ability to fully assess all the community's needs.

For this assessment, three types of limitations were identified:

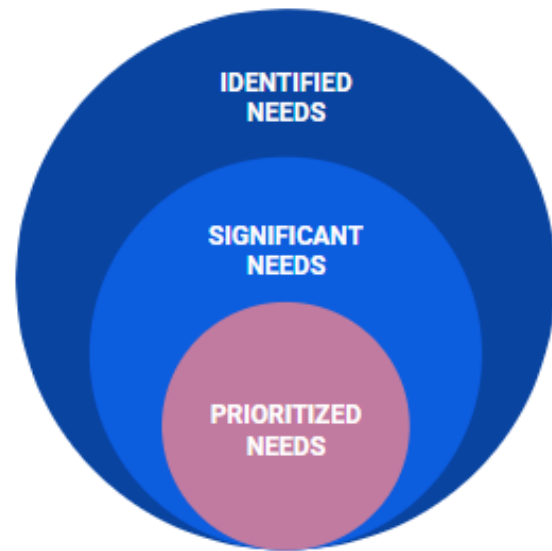
- Some groups of individuals may not have been adequately represented through the community input process. Those groups, for example, may include individuals who are transient, who speak a language other than English, or who are members of the lesbian/gay/bisexual/transgender+ community.
- Secondary data is limited in a number of ways, including timeliness, reach and descriptive ability with groups as identified above.
- An acute community concern may significantly impact a Ministry's ability to conduct portions of the CHNA assessment. An acute community concern is defined by Ascension as an event or situation which may be severe and sudden in onset or newly affects a community. These events may impact the ability to collect community input, may not be captured in secondary data, and/or can present in the middle of the three-year CHNA cycle. For the 2021 CHNA, the following acute community concerns were identified:
 - COVID-19

Despite the data limitations, Ascension Saint Thomas Hickman Hospital is confident of the overarching themes and health needs represented through the assessment data. This is based on the fact that the data collection included multiple methods, both qualitative and quantitative, and engaged the hospital as well as participants from the community.

Community Needs

Ascension Saint Thomas Hickman Hospital, with contracted assistance from Stratasan, analyzed secondary data of over 95 indicators and gathered community input through individual interviews and an online community survey to identify the needs in Hickman County. In collaboration with community partners, Ascension Saint Thomas Hickman Hospital used a phased prioritization approach to identify the needs. The first step was to determine the broader set of **identified needs**. Identified needs were then narrowed to a set of **significant needs** which were determined most crucial for community stakeholders to address.

Following the completion of the CHNA assessment, Ascension Saint Thomas Hickman Hospital will select all, or a subset, of the significant needs as the hospital's **prioritized needs** to develop a three-year implementation strategy. Although the hospital may address many needs, the prioritized needs will be at the center of a formal CHNA implementation strategy and corresponding tracking and reporting.



Identified Needs

Ascension has defined “identified needs” as the health outcomes or related conditions (e.g., social determinants of health) impacting the health status of Hickman County. The identified needs were categorized into groups such as health behaviors, social determinants of health, length of life, quality of life, clinical care, and systemic issues in order to better develop measures and evidence-based interventions that respond to the determined condition.

Significant Needs

In collaboration with various community partners, Ascension Saint Thomas Hickman Hospital utilized elements of the MAPP process to prioritize which of the identified needs were most significant. Ascension has defined “significant needs” as the identified needs which have been deemed most significant to address based on established criteria and/or prioritization methods.

Magnitude	How big is the problem? How many individuals does the problem affect, either actually or potentially? In terms of human impact, how does it compare to other health issues?
Seriousness of the 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 it is working? What are the community's intrinsic barriers, and how big are they to overcome?

Through the prioritization process for the 2021 CHNA, the significant needs are as follows:

- Mental Health
- Substance Misuse

To view health care facilities and community resources available to address the significant needs, please see Appendix E (*page 66*).

Descriptions (including data highlights, community challenges & perceptions, and local assets & resources) of the significant needs are on the following pages.

Mental Health	
Why is it Important?	Data Highlights
The Hickman County Health Council believed that mental health and related issues affected youth as well as adults and impacted many other areas of health, defined as overall wellbeing.	<ul style="list-style-type: none"> • More than average number of mentally unhealthy days reported in the last 30 days • More than average % reporting 14 or more days of poor mental health per month • More than average rate of suicide
Community Challenges & Perceptions	Individuals Who Are More Vulnerable
<ul style="list-style-type: none"> • Continued stigma of mental health • Lack of mental health resources • Children are impacted by mental health issues 	The Hickman County Health Council determined youth were very vulnerable to mental health issues such as isolation and lack of self esteem.

Substance Misuse	
Why is it Important?	Data Highlights
Drug overdose deaths are a leading contributor to premature death and are largely preventable. Protecting youth from nicotine addiction or THC addiction was seen as critical to future wellbeing.	<ul style="list-style-type: none"> • High rate of opioid misuse/hospitalization for opioid misuse • High rate of teen vaping
Community Challenges & Perceptions	Individuals Who Are More Vulnerable
<ul style="list-style-type: none"> • Vaping • THC • Opioids 	The Hickman Community Health Council discussed youth vaping and the rise of THC as well as the continued use of opioids by adults as the focus.

Prioritized Needs

Following the completion of the community health assessment, Ascension Saint Thomas Hickman Hospital in collaboration with the Hickman County Health Council has selected the prioritized needs outlined below for its 2021 CHNA implementation strategy:

- Mental Health
- Substance Misuse

Ascension Saint Thomas Hickman Hospital understands the importance of all the health needs of the community and is committed to playing an active role in improving the health of the people in the communities it serves. The next steps will be to work with Ascension Saint Thomas Hickman Hospital leaders and community partners to finalize which community health needs Ascension Tennessee and Ascension Saint Thomas Hickman Hospital will prioritize. Later in 2022, an Implementation Plan (I.S.) with detailed strategies will be developed and brought before the Board for approval.

Summary of Impact from the Previous CHNA Implementation Strategy

An important piece of the three-year CHNA cycle is revisiting the progress made on priority needs set forth in the preceding CHNA. By reviewing the actions taken to address the significant needs and evaluating the impact those actions have made in the community, it is possible to better target resources and efforts during the next CHNA cycle.

Written input received from the community and a full evaluation of our efforts to address the significant health needs identified in the 2019 CHNA can be found in Appendix F (*page 68*).

Approval by Ascension Saint Thomas Hickman Hospital Board of Directors

To ensure the Ascension Saint Thomas Hickman Hospital's efforts meet the needs of the community and have a lasting and meaningful impact, the 2021 Community Health Needs Assessment report was approved by the Ascension Saint Thomas Hickman Hospital Board of Directors on February 24, 2022 (Ascension Saint Thomas Hickman Hospital tax year 2021), and the Ascension Saint Thomas Board of Directors on April 8, 2022 (Ascension Saint Thomas Hickman Hospital tax year 2021). This report applies to the following three-year cycle: 7/1/2022 to 6/30/2024. This report, as well as the previous report, can be found at our public website.

Although an authorized body of the hospital must adopt the CHNA and implementation strategy reports to be compliant with the provisions in the Affordable Care Act, adoption of the CHNA also demonstrates that the board is aware of the findings from the community health needs assessment.

Conclusion

The purpose of the CHNA process is to develop and document key information on the health and wellbeing of the communities Ascension Saint Thomas Hickman Hospital serves. This report will be used by internal stakeholders, non-profit organizations, government agencies, and other community partners of Ascension Saint Thomas Hickman Hospital to guide the creation of implementation strategies and community health improvement efforts as required by the Affordable Care Act. The 2021 CHNA will also be made available to the broader community as a useful resource for further health improvement efforts.

Ascension Saint Thomas Hickman Hospital hopes this report offers a meaningful and comprehensive understanding of the most significant needs for residents of Hickman County. As a Catholic health ministry, Ascension Saint Thomas Hickman Hospital is dedicated to spiritually centered, holistic care that sustains and improves the health of not only individuals, but the communities it serves. With special attention to those who are poor and vulnerable, we are advocates for a compassionate and just society through our actions and words. Ascension Saint Thomas Hickman Hospital is dedicated to serving patients with compassionate care and medical excellence, making a difference in every life we touch. The hospital values the community's voice and welcomes feedback on this report. Please visit this public website (<https://healthcare.ascension.org/chna>) to submit your comments.

Appendices

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Appendix A: Definitions and Terms

Acute Community Concern

An event or situation which may be severe and sudden in onset, or newly affects a community. This could describe anything from a health crisis (e.g., COVID-19, water poisoning) or environmental events (e.g. hurricane, flood) or other event that suddenly impacts a community. The framework is a defined set of procedures to provide guidance on the impact (current or potential) of an acute community concern. Source: Ascension Acute Community Concern Assessment Framework

Collaborators

Third-party, external community partners who are working with the hospital to complete the assessment. Collaborators might help shape the process, identify key informants, set the timeline, contribute funds, etc.

Community Focus Groups

Group discussions with selected individuals. A skilled moderator is needed to lead focus group discussions. Members of a focus group can include internal staff, volunteers and the staff of human service and other community organizations, users of health services and members of minority or disadvantaged populations. Source: CHA Assessing and Addressing Community Need, 2015 Edition II

Community Forums

Meetings that provide opportunities for community members to provide their thoughts on community problems and service needs. Community forums can be targeted towards priority populations. Community forums require a skilled facilitator.

Source: CHA Assessing and Addressing Community Need, 2015 Edition II

Community Served

A hospital facility may take into account all the relevant facts and circumstances in defining the community it serves. This includes: The geographic area served by the hospital facility; Target populations served, such as children, women, or the aged; and Principal functions, such as a focus on a particular specialty area or targeted disease.

Consultants

Third-party, external entities paid to complete specific deliverables on behalf of the hospital (or coalition/collaborators); alternatively referred to as vendors.

Demographics

Population characteristics of your community. Sources of information may include population size, age structure, racial and ethnic composition, population growth, and density.

Source: CHA Assessing and Addressing Community Need, 2015 Edition II

Identified Need

Health outcomes or related conditions (e.g., social determinants of health) impacting the health status of the community served

Key Stakeholder Interviews

A method of obtaining input from community leaders and public health experts one-on-one. Interviews can be conducted in person or over the telephone. In structured interviews, questions are prepared and standardized prior to the interview to ensure consistent information is solicited on specific topics. In less structured interviews, open-ended questions are asked to elicit a full range of responses. Key informants may include leaders of community organizations, service providers, and elected officials. Individuals with a special knowledge or expertise in public health may include representatives from your state or local health department, faculty from

schools of public health, and providers with a background in public health. See Section V for a list of potential interviewees. Could also be referred to as Stakeholder Interviews.

Source: CHA Assessing and Addressing Community Need, 2015 Edition II

Medically Underserved Populations

Medically Underserved Populations include populations experiencing health disparities or that are at risk of not receiving adequate medical care because of being uninsured or underinsured, or due to geographic, language, financial, or other barriers. Populations with language barriers include those with limited English proficiency. Medically underserved populations also include those living within a hospital facility's service area but not receiving adequate medical care from the facility because of cost, transportation difficulties, stigma, or other barriers.

Source:

<https://www.irs.gov/charities-non-profits/community-health-needs-assessment-for-charitable-hospitalorganizations-section-501r3>

Prioritized Need

Significant needs which have been selected by the hospital to address through the CHNA implementation strategy

Significant Need

Identified needs which have been deemed most significant to address based on established criteria and/or prioritization methods

Surveys

Used to collect information from community members, stakeholders, providers, and public health experts for the purpose of understanding community perception of needs. Surveys can be administered in person, over the telephone, or using a web-based program. Surveys can consist of both forced-choice and open-ended questions.

Source: CHA Assessing and Addressing Community Need, 2015 Edition II

Appendix B: Community Demographic Data and Sources

The tables below provide a description of the community's demographics. The description of the importance of the data is largely drawn from the County Health Rankings and Roadmaps website.

Population

Why it is important: The composition of a population, including related trends, is important for understanding the community context and informing community planning.

Population	Hickman County	Tennessee	U.S.
Total	26,074	7,025,037	333,934,112
Male	52.7%	49.0%	49.3%
Female	47.3%	51.0%	50.7%
Data source: Esri, 2021			

Population by Race or Ethnicity

Why it is important: The race and ethnicity composition of a population is important in understanding the cultural context of a community. The information can also be used to better identify and understand health disparities.

Race or Ethnicity	Hickman County	Tennessee	U.S.
Asian	0%	2%	6%
Black / African American	5%	17%	13%
Hispanic / Latino	3%	6%	19%
Native American	1%	0%	1%
White	91%	75%	69%
Data source: Esri, 2021			

Population by Age

Why it is important: The age structure of a population is important in planning for the future of a community, particularly for schools, community centers, healthcare and child care. A population with more youths will have greater education needs and child care needs, while an older population may have greater healthcare needs.

Age	Hickman County	Tennessee	U.S.
Median Age	42.0	40.0	38.8
Age 0-17	19.1%	21.2%	21.8%
Age 18-64	62.2%	60.8%	61.0%
Age 65+	18.7%	18.0%	17.2%
<i>Data source: Esri, 2021</i>			

Income

Why it is important: Median household income and the percentage of children living in poverty, which can compromise physical and mental health, are well-recognized indicators. People with higher incomes tend to live longer than people with lower incomes. In addition to affecting access to health insurance, income affects access to healthy choices, safe housing, safe neighborhoods and quality schools. Chronic stress related to not having enough money can have an impact on mental and physical health. ALICE, an acronym for Asset Limited, Income Constrained, Employed, are households that earn more than the U.S. poverty level, but less than the basic cost of living for the county. Combined, the number of poverty and ALICE households equals the total population struggling to afford basic needs.

Income	Hickman County	Tennessee	U.S.
Median Household Income	\$45,310	\$55,276	\$64,730
Per Capita Income	\$33,840	\$29,859	\$34,103
People with incomes below the federal poverty guideline	16.3%	13.8%	12.3%
ALICE Households	38%	32%	29%
<i>Data source: Esri, 2021, TN Dept of Health County Data Package (US Bureau of Economic Analysis 2019), US Census Bureau Small Area Income and Poverty Estimates Program, 2019, United for Alice, 2018</i>			

Education

Why is it important: There is a strong relationship between health, lifespan and education. In general, as income increases, so does lifespan. The relationship between more schooling, higher income, job opportunities (e.g., pay, safe work environment) and social support, help create opportunities for healthier choices.

Education	Hickman County	Tennessee	U.S.
High School grad or higher	79%	87%	88%
Bachelor's degree or higher	10.9%	27.3%	32.1%
Data source: Esri, 2021			

Insured/Uninsured

Why it is important: Lack of health insurance can have serious health consequences due to lack of preventive care and delays in care that can lead to serious illness or other health problems.

Uninsured/Medicaid	Hickman County	Tennessee	U.S.
Uninsured	14%	12%	10%
Medicaid Eligible	22.1%	19%	24.8%
Data source: County Health Rankings 2021, State of TN County Profiles, 2020; US Medicaid.gov			

Appendix C: Community Input Data and Sources

In July 2021, Ascension Saint Thomas Hickman Hospital began a Community Health Needs Assessment for Hickman County and sought input from persons who represent the broad interests of the community using several methods:

- Community members participated in twelve individual interviews for their perspectives on community health needs and issues from October 21, 2021 through November 30, 2021.
- A community survey was distributed and 114 responses were collected from October 6, 2021 through November 15, 2021.
- Hickman County Health Council Meetings were held on:
 - October 6, 2021 - review the secondary data and receive link to community surveys
 - November 3, 2021 - ask questions about the secondary data and receive update on survey responses and interview progress
 - December 1, 2021 - review the interview summary and community survey summary
 - February 2, 2022 - determine and prioritize the most significant health needs in the county

Input of those with special knowledge or expertise in public health

The Health Educator, Hickman & Perry County Health Departments is chairperson of the Hickman County Health Council which coordinated the CHNA process. Additionally monthly meetings were held with the Health Educator and the Public Health Program Director for the South Central Regional Health Office to coordinate activities between the Health Council meetings. These individuals were instrumental in providing guidance, assistance and knowledge to the community health improvement process.

Consulting with persons representing the community's interests and taking into account input from persons who represent the broad interests of the community served by the hospital facility

Twelve community members were interviewed. Those selected were chosen based on their knowledge of Hickman County and its health needs. The hospital and Health Department recommended the interviewees who represented the broad interests of the community.

The online survey was distributed through the Hickman County Health Council which represents a very broad swathe of the community representing 46 different agencies and organizations. Surveys were also distributed to the people who were interviewed to encourage larger representation from the community.

Solicit and take into account members of the medically underserved, uninsured, and minority population served by the hospital or their representatives.

Many of the interviewees were selected because they represented the medically underserved, uninsured and minority populations.

Since the online survey was distributed through the Hickman County Health Council, the medically underserved and uninsured were targeted as well as the general population.

Below is a list of the interviewees.

Interviewees

Organization	Represents
Tennessee Department of Health	All
Centerville Church of Christ	Low Income, Underserved
Hickman Co Coordinated Schools	Youth
Hickman County Senior Center	Seniors
Hickman County Court	Youth
Hickman Health Council & UT Extension	All
South Central Human Resource Agency -Headstart	Birth to 5
School system AWARE program	youth
Emergency Medical System	all; seniors
Economic and Community Development	business community
Hickman County Government	All
Hickman County Times	All

Below is a list of health council members which provided the guidance and feedback during the assessment process.

Hickman County Health Council Members

Organization	Represents
A Step Ahead of Middle Tennessee Children's agency	Children
Accurate Energetic Systems	Private sector
Ascension Saint Thomas Hickman Hospital	All
Attorney	Private sector
Attorney	Private sector
AWARE Mental Health	Behavioral Health
Blue Cross Blue Shield of Tennessee	All
Camelot Care Teen Counseling	Youth
Center for Family Development	Underserved, low income
Centerstone Mental Health	Behavioral Health
Centerville Government	All

Chamber of Commerce	Businesses
Community member	N/A
Connect America Mental Health	Behavioral Health
Coordinated School Health	Youth
Davis House Child Advocacy Center	Children
Economic and Community Development	Economic Development
Emergency Operations	All
First Farmers Bank	Businesses
Franklin County Prevention Coalition	Substance Use Disorder
Hickman County	All
Hickman County Court	All
Hickman County Health Department	All
Hickman Health Department	underserved, low income
Inspiritus	Underserved, low income
Mental Health Coop	Behavioral Health
Mental Health Counselor	Behavioral Health
Mirror Lake Recovery	Substance Use Disorder
Newspaper editor	All
Pastor	All
Pastor	All
Perry Medical Center	All
Pinewood Springs Mental Health	Behavioral Health
Retired public health	N/A
Signal Centers Children Health Agency	Children
Tennessee Department of Health	All
Tennessee Courts	All
Tennessee Department of Children's Services	Children
Tennessee Department of Health	All
Tennessee Department of Health Regional Office	All
Tennessee Department of Human Services	underserved, low income
Tennessee Suicide Prevention Network	Behavioral Health
Tennessee Voices for Children	Children



Ascension Saint Thomas Hickman Hospital

United Health Care	All
UT Extension	All
Women are Safe Domestic Violence	Women

Appendix D: Additional Secondary Data and Sources

If a red stop sign and red title accompany a graph or table the indicator for Hickman County is worse than Tennessee. If a green star and green title accompany a table or graph, the Hickman County indicator is better than Tennessee.

Health Outcomes

Length of Life - life expectancy, infant mortality

● **Life Expectancy**

(Average number of years a person can expect to live)

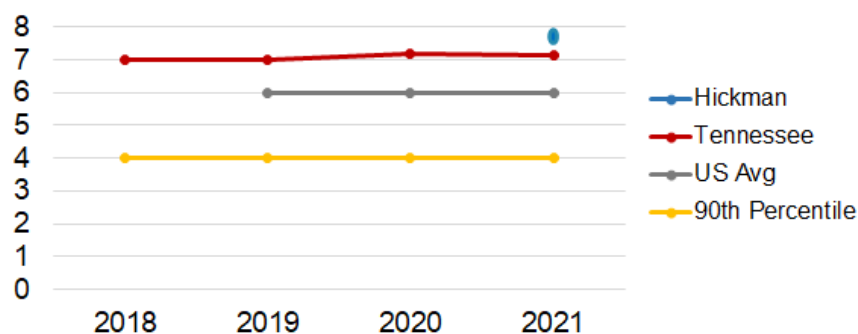
2017-2019

Hickman County	74.5
Tennessee	76.0
US Avg*	78.8
90th Percentile	81.1

*US is 2019 data; due to Covid and impacts of Covid, life expectancy in the US decreased 1.87 years in 2020.

● **Infant Mortality***

(Number of infant deaths within 1 year per 1,000 live births)



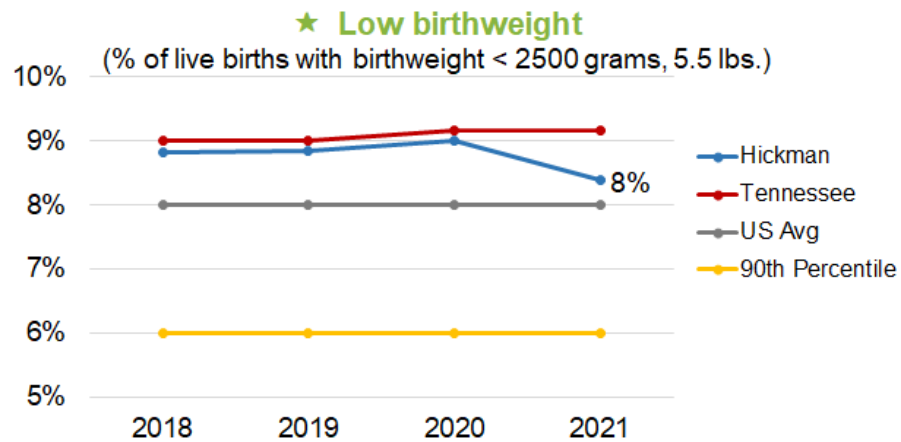
*Data was not available for Hickman county on County Health Rankings due to low data volume.

According to the State of Tennessee Commission on Children and Youth in County Profiles 2020, there were 2 infant deaths, making the rate 7.8 per 1,000. Published 1/2021

In the two health outcomes indicators, Hickman County's measures were worse than Tennessee

Physical Health

Low birthweight babies - *low birthweight babies*



For the percentage of low birthweight babies, Hickman County is better than Tennessee.

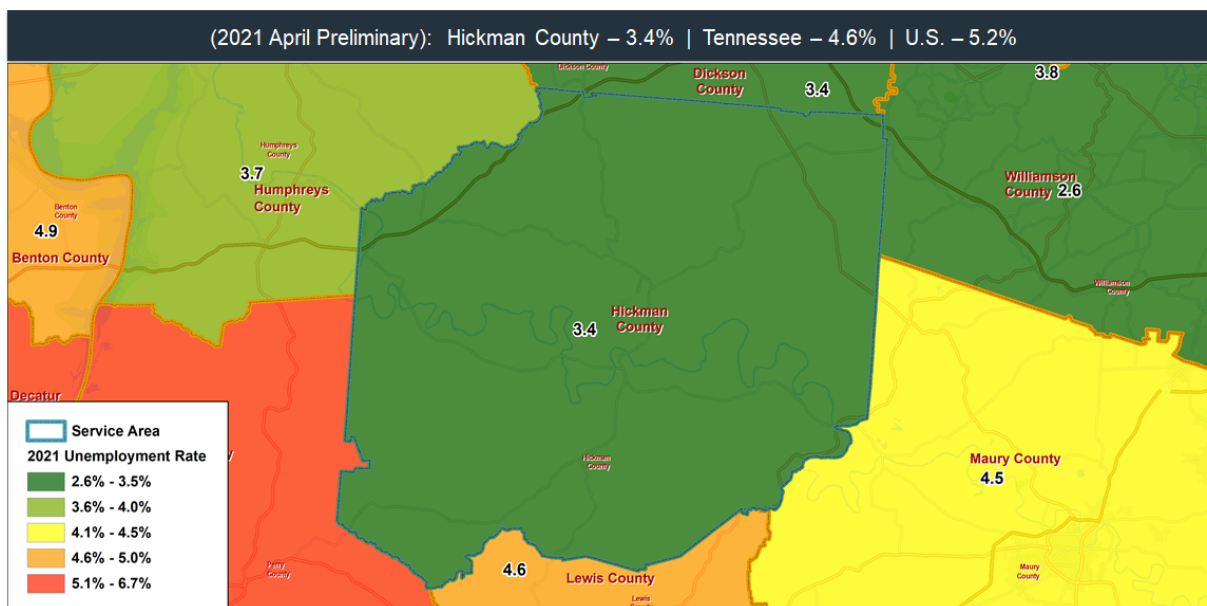
Social and Economic Factors

Economic Stability - median hh income, unemployment, poverty, childhood poverty, income inequality

	Hickman County	Tennessee	USA
Median Household Income	\$45,310	\$55,276	\$64,730

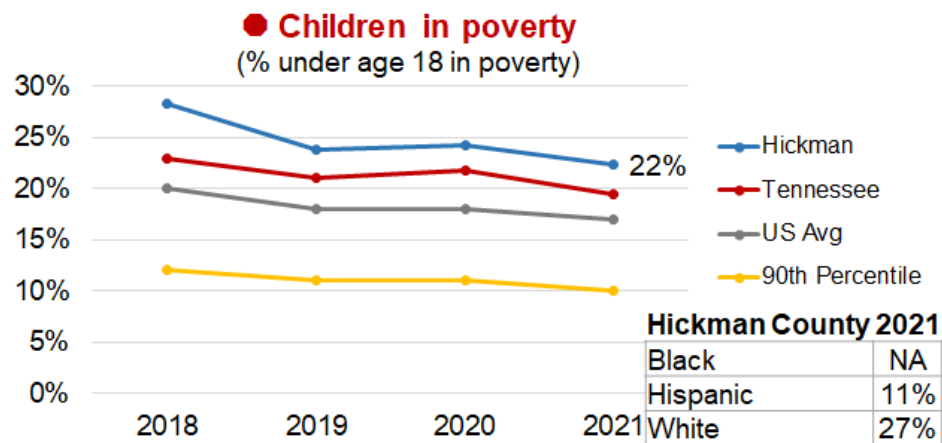
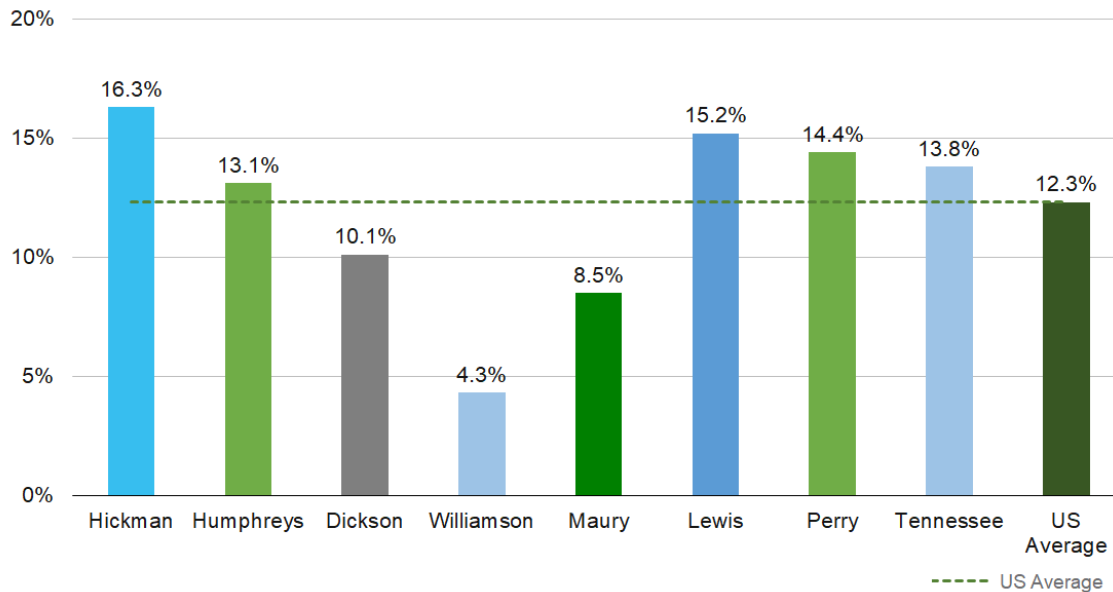
Source: Esri, 2021

Unemployment



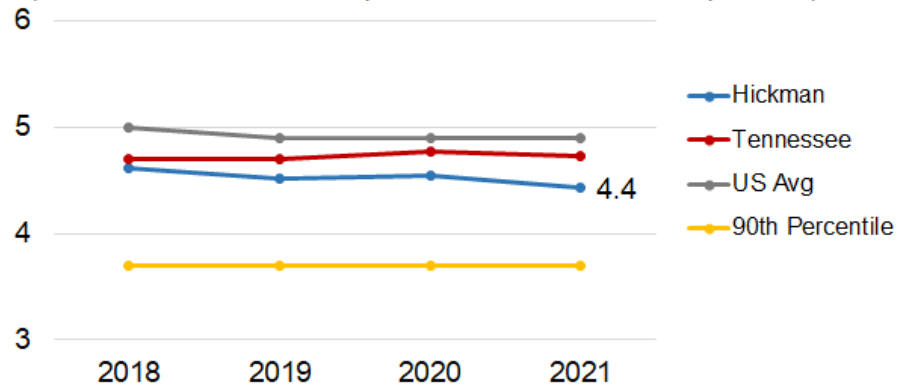


Poverty Estimates 2019 for Contiguous Counties, TN, and US



★ Income inequality

(ratio of HH income at the 80th percentile to income at the 20th percentile)

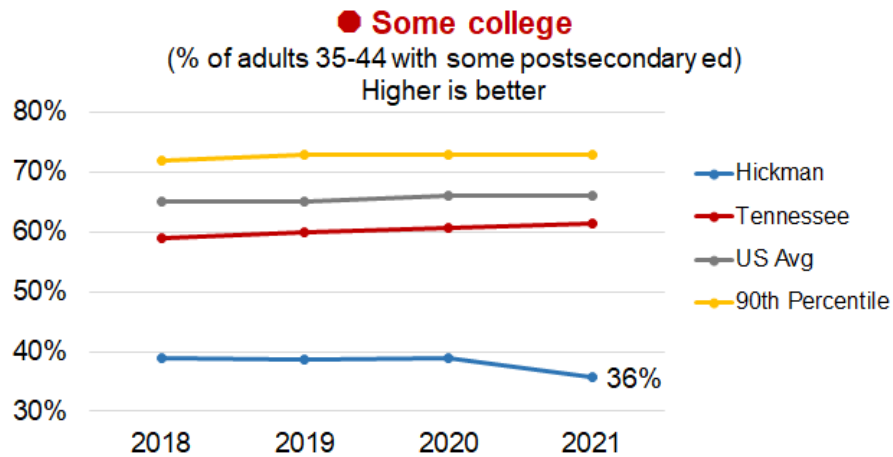


● High school completion

(% of adults ages 25 and over with a high school diploma or equivalent)

2021

Hickman County	79%
Tennessee	87%
US Avg*	88%
90th Percentile	94%

Educational Attainment - *high school completion, some college, reading scores, math scores*


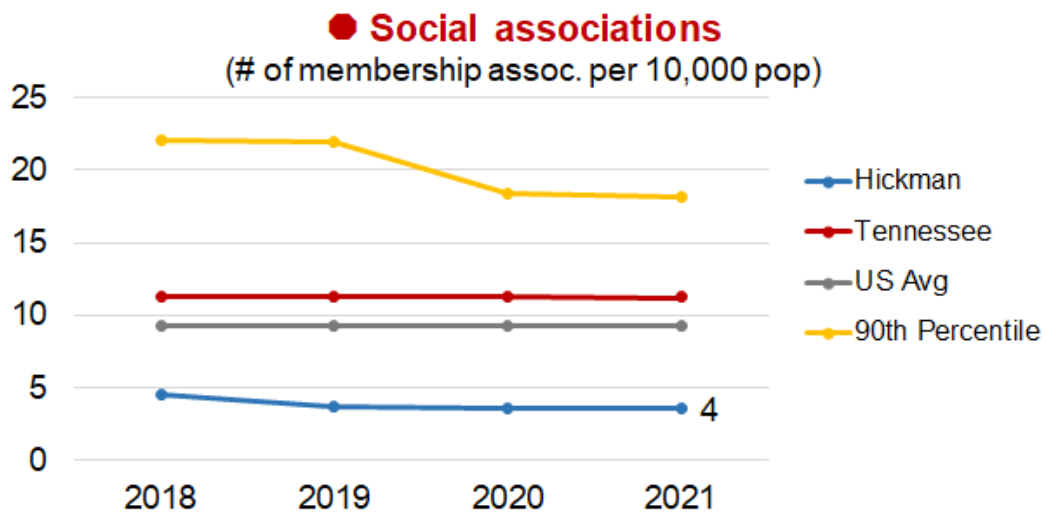
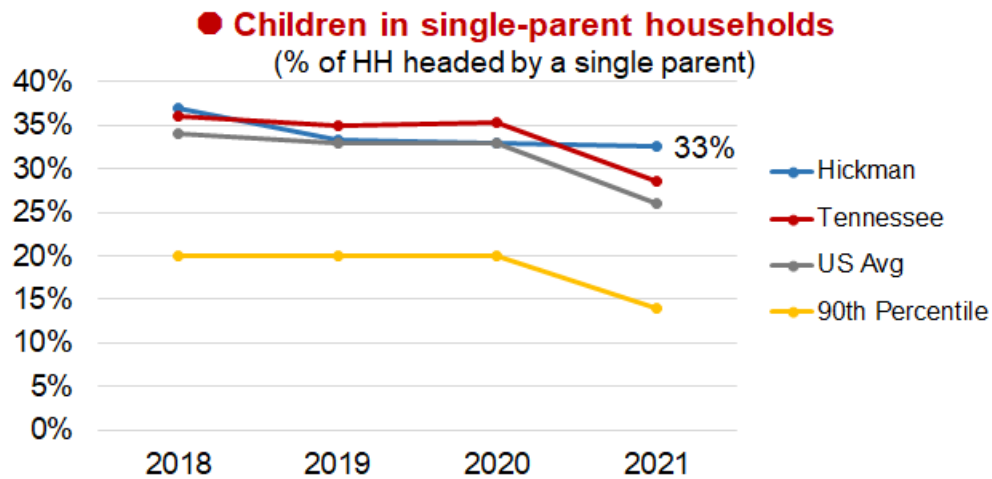
★ 3rd Grade reading level
(Percent of public school students in grade 3 that test "on track" and "mastered" (i.e. "on mastered") for ELA in the state base accountability file)

2020	
Hickman County	24.1%
Tennessee	22%
US Avg	NA

★ Math scores
(Average grade level performance for 3rd graders on math standardized tests)

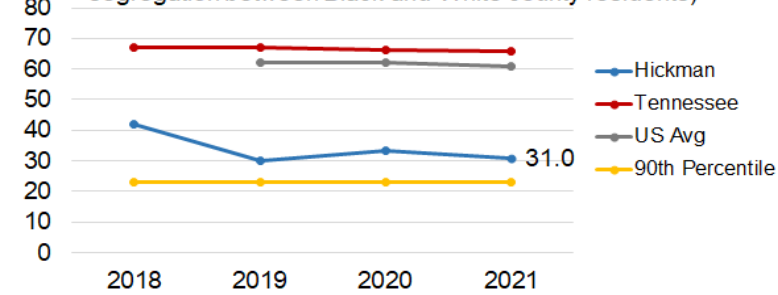
2021	
Hickman County	3.1
Tennessee	2.9
US Avg	3.0
90 th Percentile	3.4

Social/Community - children in single parent homes, social associations, residential segregation - Black/White, residential segregation - nonWhite/White, disconnected youth, juvenile arrests, violent crime



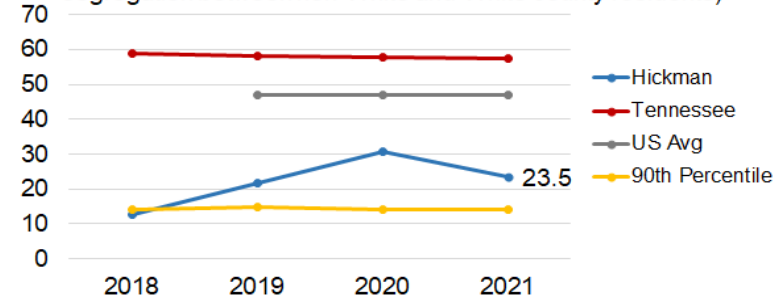
★ Residential segregation – Black/White

(Index of dissimilarity where higher values indicate greater residential segregation between Black and White county residents)



★ Residential segregation – non-White/White

(Index of dissimilarity where higher values indicate greater residential segregation between non-White and White county residents)



● **Juvenile arrests**

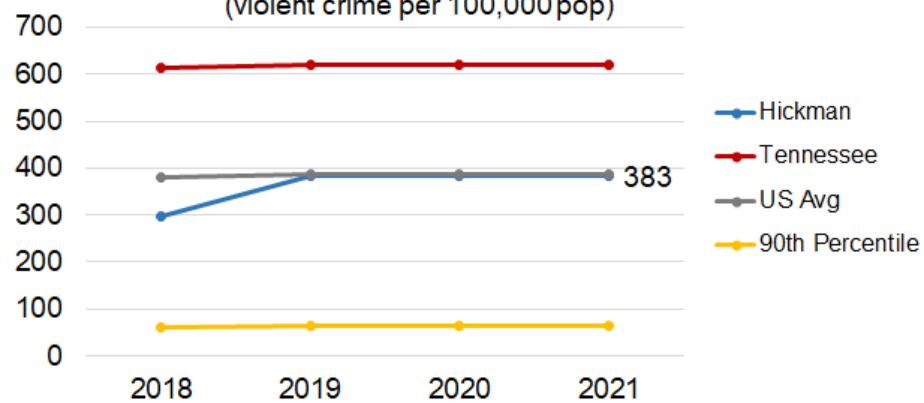
(# of arrests of juveniles ages 10-17 per 100,000 pop)

2014

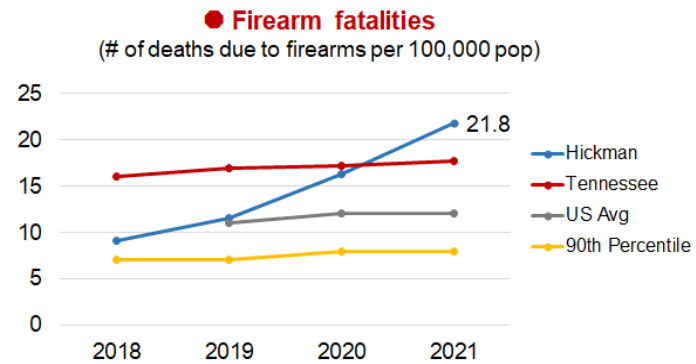
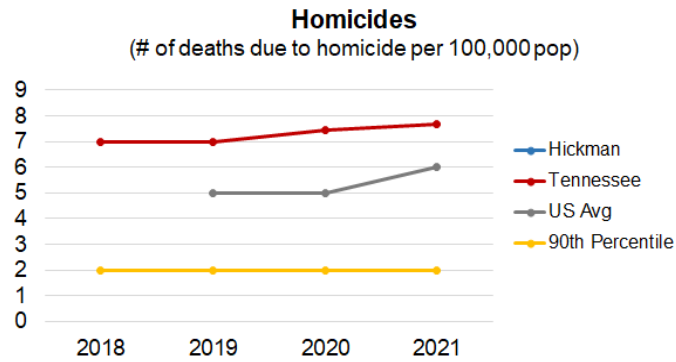
Hickman County	NA
Tennessee	3,896
US Avg	3,084

★ **Violent crime rate**

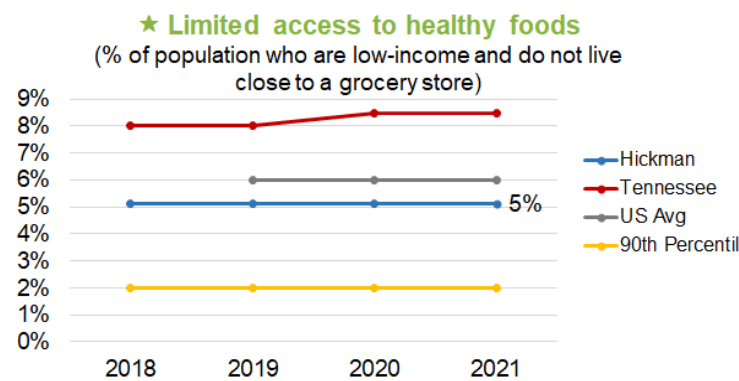
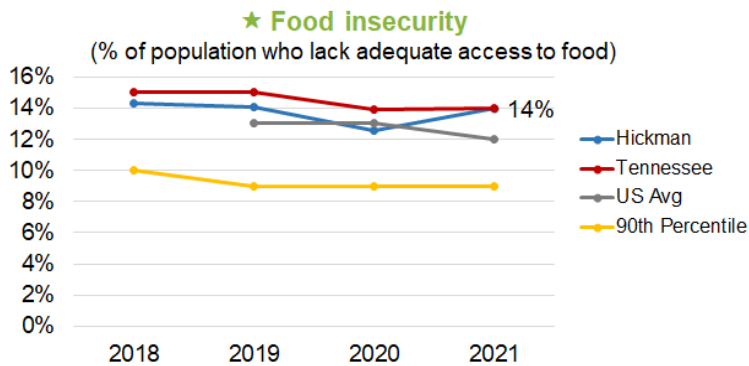
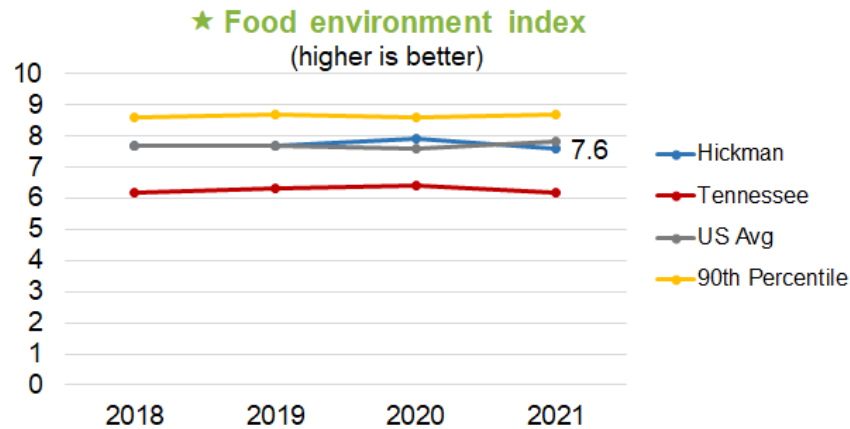
(violent crime per 100,000 pop)

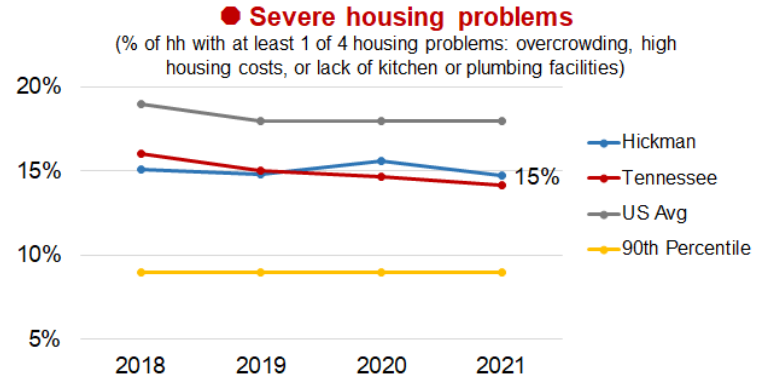
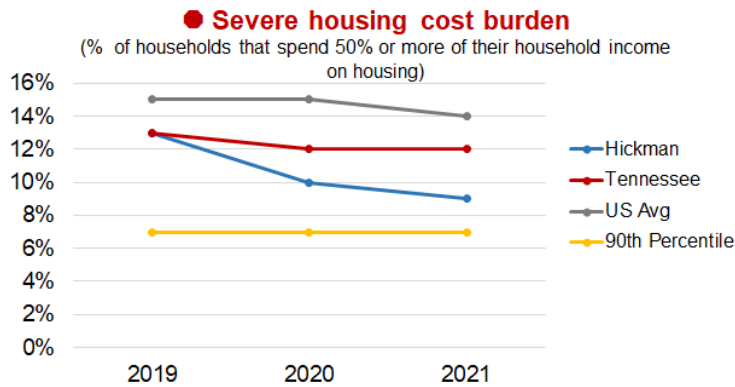


Injury Deaths - *homicides, firearm fatalities*



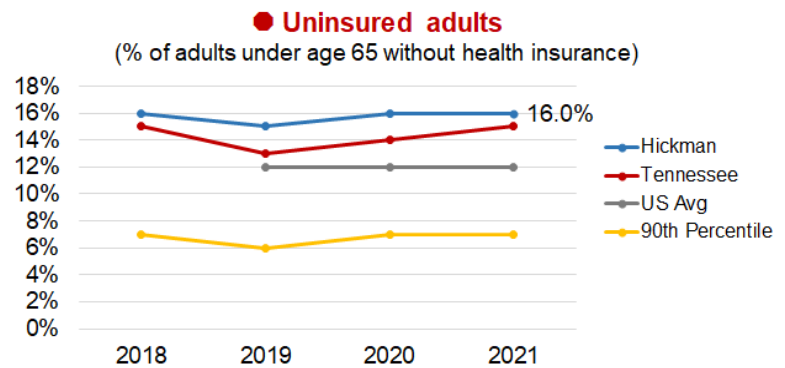
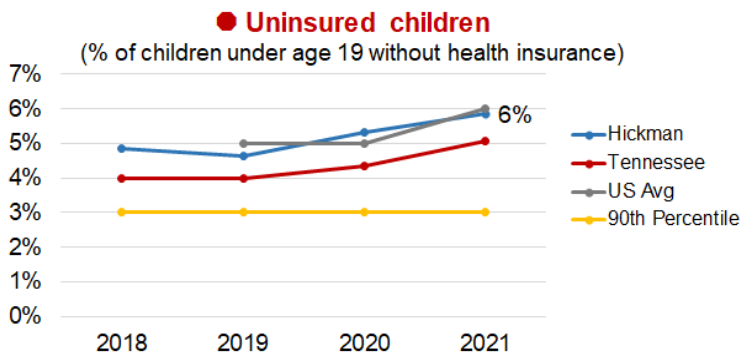
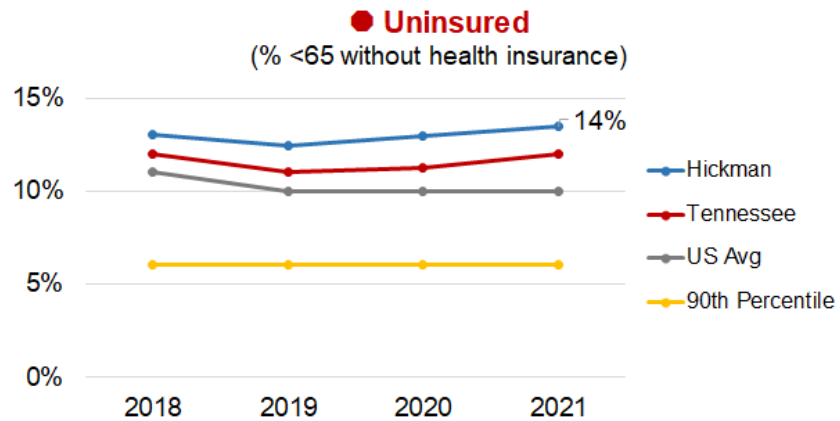
Access to Healthy Foods - food environment index, food insecurity, limited access to healthy foods

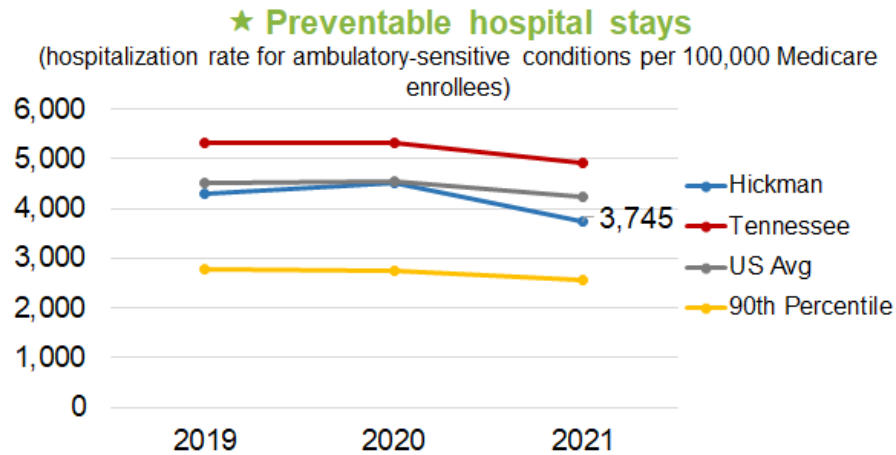
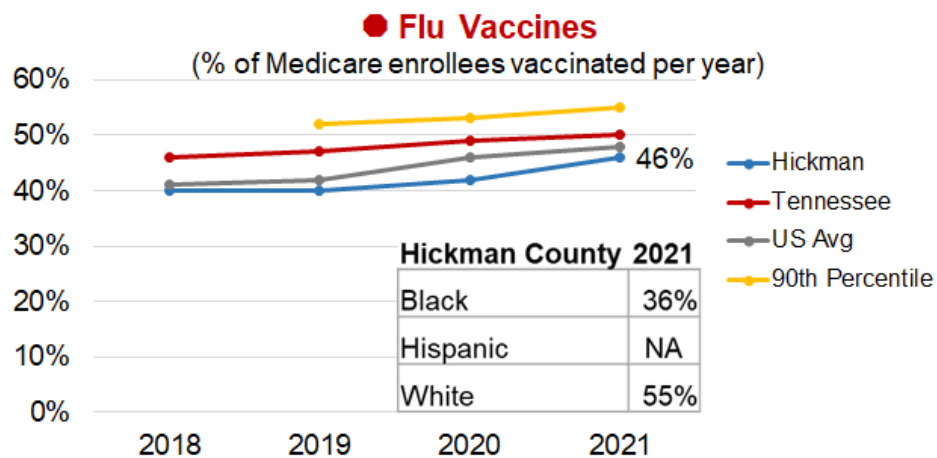


Physical Environment - Severe housing problems, severe housing cost burden


Clinical Care

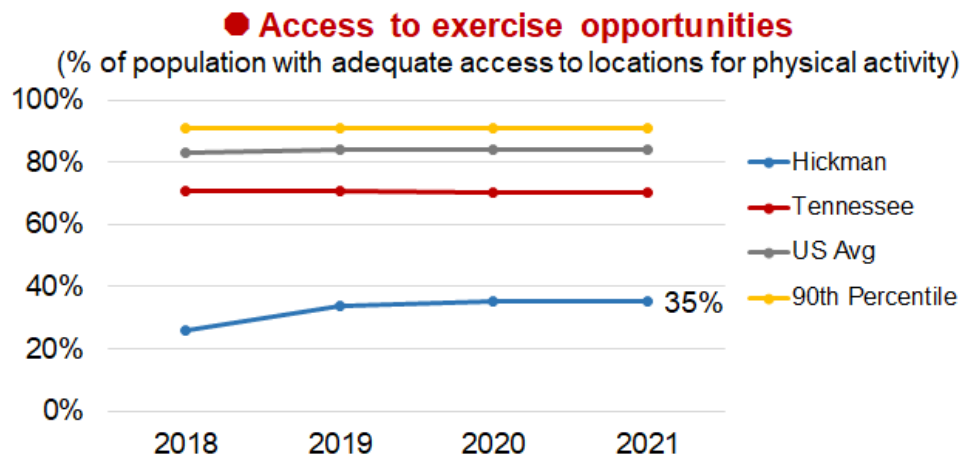
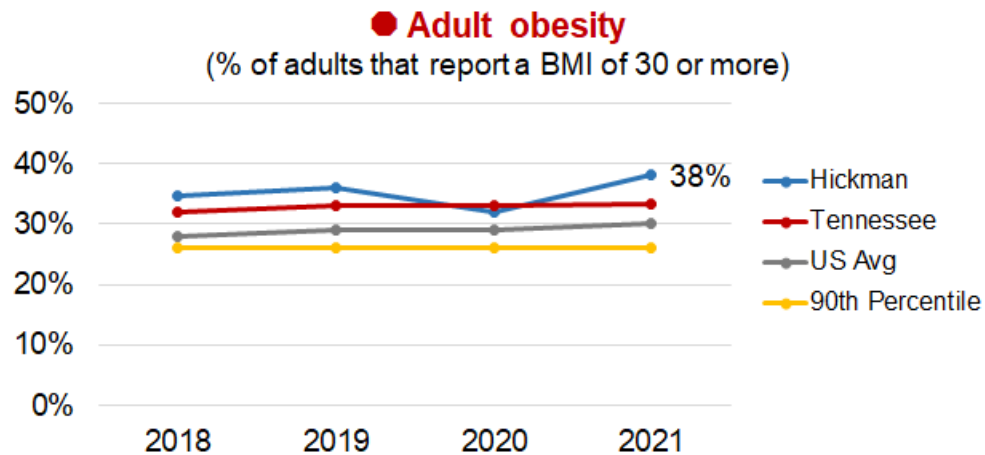
Healthcare Access - uninsured, uninsured adults, uninsured children



Hospital Utilization - Preventable hospital stays

Preventative Healthcare - Flu vaccinations


Health Behaviors

Healthy Life - Adult obesity, access to exercise opportunities



Substance Use and Misuse - Opioid hospital visits, opioid deaths

● Opioid overdose outpatient visits

(rate of adults that were treated for an opioid overdose and survived per 100,000)

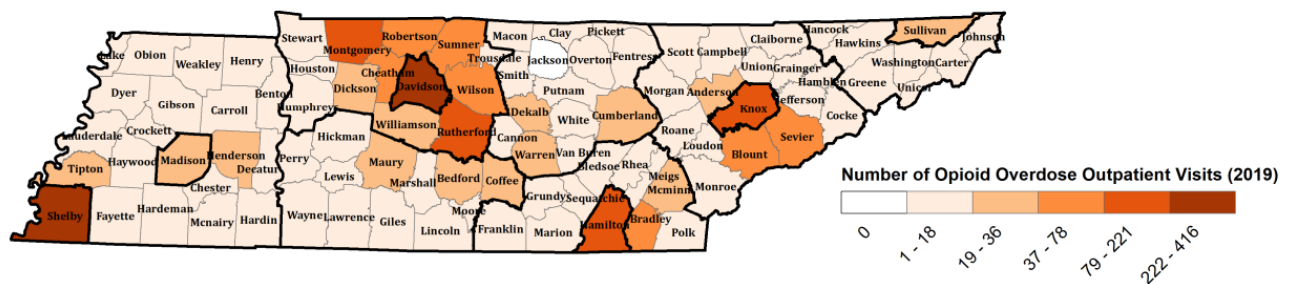
	2019
Hickman County	68
Tennessee	85
US Avg	NA

● Opioid overdose deaths

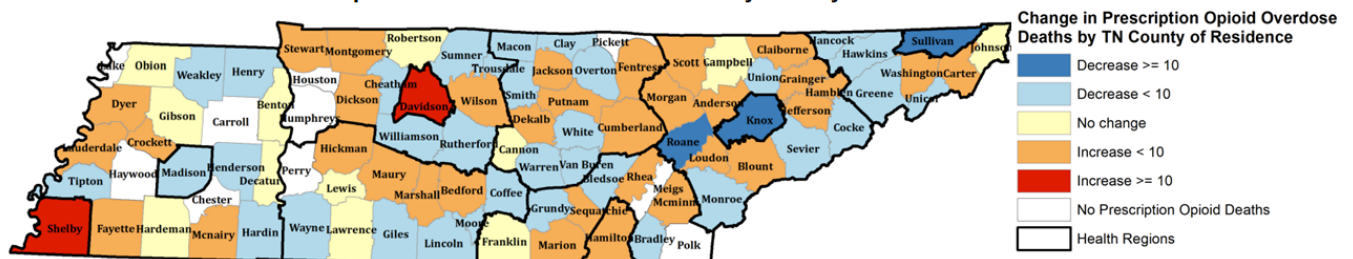
(rate of adults that died from an opioid overdose per 100,000, age adjusted)

	2020
Hickman County	81
Tennessee	73
US Avg	15

Opioid Overdose Outpatient Visits by County



Opioid Overdose Deaths by County



TN.gov: Drug Poisoning Report (2021)

Appendix E: Health Care Facilities and Community Resources

As part of the CHNA process, Ascension Saint Thomas Hickman Hospital has cataloged resources available in Hickman County that address the significant needs identified in this CHNA. Resources may include acute care facilities (hospitals), primary and specialty care clinics and practices, mental health providers, and other non-profit services. State and national resources can also provide information regarding programs that can better serve the needs of a person experiencing a specific problem.

The resources listed under each significant need heading is not intended to be exhaustive.

Mental Health Resources

Organization Name	Phone	Website
The Ranch Tennessee	888-645-7453	The Ranch Tennessee

Behavioral Health Services

Organization Name	Phone	Website
Reflections Counseling Group	615-208-2772	Reflections Counseling
Women are Safe	800-799-7233	WOMEN ARE SAFE, INC.
Suicide Prevention Hotline	800-273-8255	National Suicide Prevention Lifeline
Centerstone of Middle Tennessee	1877-HOPE123	Mental Health and Addiction Services in Tennessee Centerstone

Clinics and Hospitals

Organization Name	Phone	Website
Ascension Saint Thomas Hickman Hospital	855-519-4978	Ascension Saint Thomas Hickman Hospital
Ascension Saint Thomas Hickman Speciality Care - Senior Health Care, Ophthalmology, Gastroenterology, Cardiology, Urology, Physical Medicine and	855-519-4978	Ascension Saint Thomas Hickman Specialities

Rehabilitation, Pulmonary		
Three Rivers Community Health Group	931-670-5520	Three Rivers Community Health Group

Pharmacies

Organization Name	Phone	Website
East Hickman Pharmacy	931-670-6035	East Hickman Pharmacy - Middle TN Pharmacy
Liberty Clinic Pharmacy	931-729-2999	N/A
Hickman Charitable Pharmacy	931-729-3091	Hickman Charitable Pharmacy

Dental Clinics

Organization Name	Phone	Website
Three Rivers Community Health Clinic	931-670-8318	Three Rivers Community Health Clinic
Hickman Dental Center	931-670-5961	N/A
Wellness Family Dentistry of Centerville	931-729-2664	N/A

Additional Services

Organization Name	Phone	Website
Transportation Support - SCATS	931-729-2115	Transportation Support - SCATS
Hickman Community Nursing Home	931-729-4271	Hickman Community Nursing Home
Life Care Center of Centerville	931-729-4236	Life Care Center of Centerville
Alzheimer's Caregiver Hotline	1-800-272-3900	Alzheimer's Caregiver Helpline

Appendix F: Evaluation of Impact from the Previous CHNA Implementation Strategy

Ascension Saint Thomas Hickman Hospital's previous CHNA implementation strategy addressed the following priority health needs: Access to Care, Mental Health, Healthy Weight, and Substance Misuse.

Ascension Saint Thomas Hickman Hospital's previous CHNA and implementation strategy were made available to the public and open for public comment via the website:

<https://healthcare.ascension.org/chna>.

No comments were received regarding the previous CHNA and implementation plan.

The table below describes the actions taken during the 2019 CHNA to address each priority need and indicators of improvement.

The COVID-19 pandemic had a profound impact on Ascension Saint Thomas Hickman Hospital's ability to carry out many strategies. Like many health systems, staff capacity shifted in 2020; while some of our strategies were able to adapt, many were not able to be implemented or fully completed.

Note: At the time of the report publication (e.g., Spring), the third year of the cycle will not be complete. Individual ministries will accommodate for that variable.

PRIORITY NEED	Access to Care	
ACTIONS TAKEN	STATUS OF ACTIONS	RESULTS
Grow the Dispensary of Hope to provide medication assistance for uninsured and underinsured community members.	<i>Started - On Track</i>	FY20 1,356 persons served, 4,450 patient encounters, 5,983 prescriptions filled for a total monetary investment of \$274,825 FY21 1,394 persons served, 4,468 patient encounters, 5,270 prescriptions filled for a total monetary investment of \$282,929 FYTD22 675 persons served, 2,171 patient encounters, 2,773 prescriptions filled for a total monetary investment of \$120,921
Provide resource navigation, including health insurance enrollment and assistance understanding coverage and connecting with resources to	<i>Started - On Track</i>	FY20 654 encounters FY21 541 encounters

support social determinants of health.		FYTD22 200+ encounters
Maximize Use of Mobile Health Units	<i>Started - On Track</i>	FY20 Events on hold due to Covid FY21 11 visits to Hickman County where 4 uninsured women received mammograms FYTD22 2 visits to Hickman County so far this year. 3 uninsured women have received mammograms
Address transportation concerns by partnering with South Central Area Transit Service (SCATS) <i>This partnership began in FY19 with a \$10,000 grant to help Hickman County residents in need of transport to medical facilities/appointments.</i>	<i>Started - On Track</i>	FY20 724 rides reported FY21 1397 rides reported FYTD22 Data is still being collected for this year, but we are forecasting more than 1700 rides this year for the people of Hickman County
Provide community-based organizations with financial support toward their work in one of the Prioritized Need areas.	<i>Started - On Track</i>	FY20 \$1,000 Family & Children's Service FY21 \$1,250 Family & Children's Service \$2,000 Tennessee Justice Center FYTD22 Still reviewing applications for the 2022 fiscal year
Improve access to care via telemedicine consultations, including when acute stroke symptoms are present	<i>Started, but ultimately stopped counting as Community Benefit during FY20</i>	FY20 Approximately 140 community members were able to use this service in the first two quarters of FY20, resulting in a net loss to AST of \$1909. During the pandemic, more emphasis was placed on the need to reimburse for telehealth visits, thus changing this to a service that is now reimbursed. FY21 No longer counted as Community Benefit FYTD22 No longer counted as Community Benefit

Empower victims of sexual assault through the provision of Sexual Assault Nurse Examiner care and advocacy, ensuring that victims receive trauma-informed care and are connected to appropriate resources.	<i>Not Started</i>	FY20 No action steps taken FY21 No action steps taken FYTD22 No action steps taken
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PRIORITY NEED	Mental Health	
ACTIONS TAKEN	STATUS OF ACTIONS	RESULTS
Offer emotional support through the hosting of a support group for those in the role of caring (or supporting those who are caring) for someone with Alzheimer's Disease or any chronic medical condition.	<i>Started - On Track</i>	FY20 In-person meetings were paused in FY20 due to Covid-19 and will resume when safe to do so FY21 The group has started to meeting virtually FYTD22 Data is still being collected for this year
Provide community-based organizations with financial support toward their work in one of the Prioritized Need areas.	<i>Started - On Track</i>	FY20 \$4,000 Women Are Safe FY21 None funded FYTD22 Still reviewing applications for the 2022 fiscal year.
Integrate behavioral health services with primary medical care to care for the behavioral as well as physical needs of underserved Hickman County residents.	<i>Started - On Track</i>	FY20 No action steps taken FY21 Added a behavioral health screening questionnaire to the check-in process at our some pilot primary care clinics and emergency departments to help identify potential needs FYTD22 More than 78,000 community members in Tennessee have received a behavioral health screening since we began collecting data in FY21
Educate hospital and ER staff on suicide prevention and warning signs through Zero Suicide Initiative	<i>Started - Lagging</i>	FY20 No actions taken FY21

		ER staff has been connected to materials/information from TN Suicide Prevention Network; continue to embed staff into TN Suicide Prevention Network FYTD22 No further actions taken
Improve community knowledge of wellness and disease prevention by offering a series of educational courses, approaching both the physical and mental aspects of priority health areas in Hickman County.	<i>Not Started</i>	FY20 No action steps taken FY21 No action steps taken FYTD22 No action steps taken

PRIORITY NEED	Healthy Weight	
ACTIONS TAKEN	STATUS OF ACTIONS	RESULTS
Provide food boxes, sensitive to chronic conditions, to community members who are experiencing food insecurity.	<i>Started - On Track</i>	FY20 273 food boxes distributed to community members in need FY21 175 food boxes distributed to community members in need. FYTD22 Due to staffing changes we do not have data for the current fiscal year, but will work to collect it before the end of the year.
Provide community-based organizations with financial support toward their work in one of the Prioritized Need areas.	<i>Started - On Track</i>	FY20 None funded FY21 \$5,000 Nunnally Community Center Walking Track \$8,750 Inspiritus FYTD22 Still reviewing applications for the 2022 fiscal year.
Provide CPR/First Aid Classes for Hickman County Schools Faculty and Staff.	<i>Not Started</i>	FY20 No action steps taken FY21 No action steps taken FYTD22 No action steps taken
Improve community knowledge of wellness and	<i>Not Started</i>	FY20 No action steps taken

disease prevention by offering a series of educational courses, approaching both the physical and mental aspects of priority health areas in Hickman County.		FY21 No action steps taken FYTD22 No action steps taken
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PRIORITY NEED	Substance Misuse	
ACTIONS TAKEN	STATUS OF ACTIONS	RESULTS
Integrate and develop partnership with Buffalo Valley, Inc. by offering substance misuse services to community members who are suffering from addiction.	<i>Started - Lagging</i>	FY20 Partnership Initiated and developed with Buffalo Valley Inc - COVID delays FY21 Searching to hire a LCSW FYTD22 Continue to search to hire a LCSW
Identify vulnerable populations at risk for opioid misuse at ER and RHC and provide resources for prevention, support and treatment.	<i>Not Started</i>	FY20 No action steps taken FY21 No action steps taken FYTD22 No action steps taken
Provide community-based organizations with financial support toward their work in one of the Prioritized Need areas.	<i>Not Started</i>	FY20 No action steps taken FY21 No action steps taken FYTD22 No action steps taken