2021 Community Health Needs Assessment Cannon County, Tennessee



Ascension



2021 Community Health Needs Assessment

Ascension Saint Thomas Stones River Hospital

The goal of this report is to offer a meaningful understanding of the most significant health needs across Cannon 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 Stones River Hospital Hospital Address: 324 Doolittle Road, Woodbury, Tennessee 37190 Hospital Website: https://healthcare.ascension.org/locations/tennessee/tnnas/woodbury-ascension-saint-thomas-stones -river Hospital Phone: 615-563-4001 Hospital EIN: 47-4063046

The 2021 Community Health Needs Assessment report was approved by the Ascension Saint Thomas Regional Hospitals Board of Directors on March 28, 2022 (Ascension Saint Thomas Stones River tax year 2021) and the Ascension Saint Thomas Board of Directors on April 8, 2022 (Ascension Saint Thomas Stones River tax year 2021), and 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 (<u>https://healthcare.ascension.org/chna</u>) 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 Cannon County. Ascension Saint Thomas Stones River 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 Cannon County.



Executive Summary

2021 Community Health Needs Assessment

Ascension Saint Thomas Stones River 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 Cannon 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 Stones River 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 Stones River 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 Cannon County. Ascension Saint Thomas Stones River 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, Cannon County Health Department and the Cannon County Health Council. Stratasan, a healthcare strategic planning organization, was an important contracted partner who helped Ascension Saint Thomas Stones River Hospital and community representatives 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 Stones River Hospital serves Cannon County and surrounding areas, Saint Thomas Stones River Hospital has defined its community served as Cannon County for the 2021 CHNA. Cannon County was selected as Ascension Saint Thomas Stones River 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.

- 13 community stakeholders were interviewed individually for their insights on community health issues.
- 27 people completed an online survey distributed through stakeholders and the Cannon County Health Council.
- 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 Stones River Hospital analyzed secondary data of over 95 indicators and gathered community input through individual community interviews, an online community survey, and the Stones River County Health Council to identify the needs in Cannon County. In collaboration with community partners, Ascension Saint Thomas Stones River Hospital used a phased prioritization approach to determine the most crucial needs for community stakeholders to address.

A second online community survey was conducted to receive community input into the most significant health issues.



Cannon County Significant Community Health Issues

Identified Needs: 2019 CHNA

- Obesity
- Substance use disorder (including smoking)
- · Mental health
- Education
- Access to care

Secondary Data Issues

- Adult smoking
- · Adult obesity
- Access to exercise
 opportunities
- Alcohol-impaired driving deaths
- Uninsured
- High population to primary care physicians
- Preventable hospital stays
- High school completion
- Some college
- · Injury deaths
- Long commute driving alone

Issues Identified in Interviews

- Mental health depression, suicide
- Substance misuse
- Access to healthcare for uninsured and underinsured; access to specialty care
- Obesity healthy nutrition and quality places for exercise and activity
- Retaining the healthcare workforce

Issues Identified in Surveys

- Access to affordable
 insurance and healthcare
- Poverty/lack of resources
- Nutrition/lack of a healthy diet
- · Lack of exercise
- Education on nutrition, exercise and healthy lifestyles
- Motivation, lifestyle choices
- Drug & alcohol abuse/smoking

The final community survey prioritized four issues:

- Substance misuse includes alcohol and tobacco
- Mental health depression, suicide
- Healthy lifestyles includes healthy eating, active living
- Access to affordable healthcare and insurance

Next Steps

The next steps will be to work with Ascension Saint Thomas Stones River Hospital leaders and community partners to finalize which community health needs Ascension Tenneseee and Ascension Saint Thomas Stones River 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 Stones River

Ascension Saint Thomas Stones River is a 60-bed full-service hospital providing medical services for the people of Cannon County. Ascension Saint Thomas Stones River provides a comprehensive range of medical services and high quality care including emergency services, physical therapy, basic x-ray and imaging services, lab services as well as adult and geriatric behavioral health services. Ascension Saint Thomas Stones River is a forward thinking, innovative hospital where trust, teamwork and technology come together to make a positive difference in the health of our community and region. Ascension Saint Thomas Stones River's Joint Commission accreditation demonstrates a commitment to meeting the highest standards for quality and safety.

Ascension Saint Thomas Stones River is a member of Ascension, the nation's largest Catholic and non-profit health system. Through our Christian healing ministry, we are committed to serving the greater Nashville area and surrounding communities by providing the highest quality healthcare in a caring, compassionate, and faith-based environment.



For more information about Ascension Saint Thomas Stones River Hospital, visit <u>https://healthcare.ascension.org/locations/tennessee/tnnas/woodbury-ascension-saint-thomas-stones</u> -river



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 Stones River'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 Stones River Hospital.

Timeline

In July 2021, Ascension Saint Thomas Stones River began a Community Health Needs Assessment for Cannon 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 January 2022.
- Community members participated in thirteen individual interviews for their perspectives on community health needs and issues from November 1, 2021 through February 15, 2022.
- A community survey was distributed and 27 responses were collected from October 6, 2021 through February 14, 2022.
- A second community survey was distributed from February 15, 2022 through February 28, 2022 and 77 surveys were completed.

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

^{11 | 2021} Ascension Saint Thomas Stones River Community Health Needs Assessment



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 Stones River has defined its community served as Cannon County. Although Ascension Saint Thomas Stones River serves Cannon County and surrounding areas, the "community served" was defined as such because most of our service area is contained Cannon County. From July 1, 2020 through June 30, 2021, 20% of Ascension Saint Thomas Stones River Hospital's inpatients came from Cannon County. Ascension Saint Thomas Stones River Hospital is a geriatric psychiatric hospital and ninety percent of the patients come from skilled care units. It is a referral center for many counties in the surrounding area. However, being located in Cannon County, Cannon County was selected for their service area.



Image 1: Map of Community Served

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

- Health care & social assistance 16.5%
- Retail Trade 12.6%
- Public Administration 12.2%
- Other Services 11.3%
- Accommodation & Food Services 11.0%

601 people commute into the county each day while 3,581 out migrate from the county resulting in a net out migration of 2,980 per day.



Demographic Data

Located in the Upper Cumberland region of Tennessee, Cannon County has a population of 28,128 and is 79% rural with 329 square miles. Below are demographic data highlights for Cannon County:

- The 2021 population of Cannon County is estimated to be 14,949 projected to grow .53% per year by 2026.
- 20.1 percent of the residents of Cannon 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)
- 95 percent of residents are White; 0 percent are Asian; 2 percent are Black or African American
- The total population increase from 2010 to 2021 was 8.3 percent
- The median household income is below the state median income (\$53,000 for Cannon County; \$55,276 for Tennessee)
- The percent of all ages of people in poverty was lower than the state (13.0 percent for Cannon County; 13.8 percent for Tennessee)
- The uninsured rate for the Cannon County is higher than the state (13 percent for Cannon County; 12 percent for Tennessee)



Table 1: Description of the Community

Demographic Highlights							
Indicator	Cannon County	Description					
Population							
% Living in rural communities	100%						
% below 18 years of age	19.8%						
% 65 and older	20.1%						
% Hispanic	3%						
% Asian	0%						
% Black	2%						
% White	95%						
Social and Community Conte	ext						
English Proficiency	1.6%	Proportion of community members that speak English "less than well"					
Median Household Income	\$53,000	Income where half of households in a county earn more and half of households earn less.					
Percent of Children in Poverty	20%	Percentage of people under age 18 in poverty.					
Percent of Uninsured	13%	Percentage of population under age 65 without health insurance.					
Percent of Educational Attainment	85%	Percentage of adults ages 25 and over with a high school diploma or equivalent.					
Percent of Unemployment	5.3%	Percentage of population ages 16 and older unemployed but seeking work					

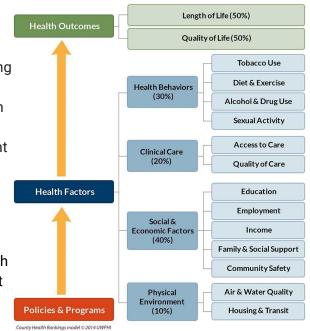
To view Community Demographic Data in its entirety, see Appendix B (page 44).



Process and Methods Used

Ascension Saint Thomas Stones River Hospital is committed to using national best practices in conducting the CHNA. Health needs and assets for Cannon 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 Stones River 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 Stones River completed its 2021 CHNA in collaboration with the following organizations and individuals.

- Cannon 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 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 Stones River collected and analyzed primary and secondary data for Cannon 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 Cannon 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 Tennessee Department of Health. These methods provided additional perspectives on how to select and address top health issues facing Cannon County. A summary of the process and results is outlined below.

Multiple methods were used to gather community input, including key stakeholder interviews, community survey and collaboration with the Cannon County Health Council. A summary of the process and results is outlined below.

Surveys

A survey was conducted to gather the perceptions, thoughts, opinions, and concerns of the community regarding health priorities for Cannon County. 27 individuals participated in the survey, held between December 2021 and February 2022. 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

- Lack of exercise and access to places to exercise were mentioned the most tied with
- Poverty and lack of resources essentially a lack of disposable income for healthy food and activity kept people from being healthy
- Drug & alcohol abuse along with smoking were mentioned.

Populations/Sectors Represented	Common Themes
 The survey was distributed county-wide through the Hospital 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. 	 What prevents all people in Cannon County from being as healthy as possible? The top responses are below with the number of mentions. Lack of exercise and access to places to exercise (8) Poverty/lack of resources (8) Nutrition/ Lack of healthy diet (6) Drug abuse/Alcohol use/Smoking (6) Access to affordable insurance and healthcare (5) Motivation, choices, lifestyle (5) Education on nutrition, exercise, and healthy lifestyles (5) If you could make 1 or 2 changes to ensure all residents of Cannon County can be as healthy as possible, what would these changes be? Increase activity and exercise - start walking clubs, provide indoor exercise space (7) Increase affordable access to health insurance and healthcare (5) Access to more affordable nutritious food (4) Eliminate the sale of vaping supplies (1) Higher incomes (1) Increase access to transportation (1)
Meaningful Quotes	

- "Many kids in the county have not seen their parents and caregivers make health-conscious practices part of their daily routines. The lack of good examples for childrens result in a continuation of poor health habits."
- "Access to potable drinking water for all county residents, access to physical fitness centers, and socioeconomic issues that are endemic to rural areas."
- "Provide accessible, affordable health insurance options."



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 Cannon County. 12 representatives from 12 different organizations and agencies participated in the focus groups, held between November 2021 and February 2022. Sectors represented by participants included

- Tennessee Department of Health
- Cannon County Schools
- United Way of Rutherford and Cannon Counties
- Cannon County government
- Ascension Saint Thomas Stones River Hospital
- Chamber of Commerce
- Tennessee Commission on Children and Families
- Tennessee Hospital Association
- End Slavery
- TennCare
- Age Well
- Tennessee Public Health Association

Key Stakeholder Interviews

Key Summary Points

• The community was most concerned by poverty and those with few resources, also the few community resources through taxes, substance abuse, access to affordable insurance and healthcare, issues brought about by COVID (lack of trust, political divisiveness, death), mental health, and healthy weight including activity and healthy nutrition. Below are the populations represented and the common themes of each question asked.

Populations/Sectors Represented	Common Themes
 Cannon County School System Cannon County Government United Way of Rutherford and Cannon Counties Chamber of Commerce Ascension Stones River Hospital Tennessee Department of Health Cannon County Schools 	 Strongest Assets The people - caring, diverse, untapped talent, traditional, involved, resourceful, volunteers Good, local healthcare with the hospital, ambulance service, and health department, access specialists Partnerships - working together, sense of community, We Care Cannon, Lions Club Schools Beautiful scenery, pretty town Communities Left Out
Interviewees represented, youth, children, businesses, seniors, the underserved, not-for-profits and the	 Those in the gap who don't qualify for TennCare and can't afford insurance Low income, uninsured



	 Seniors - lack of transportation and technology Outlying communities Top three issues most concerned about in Cannon County County financial stability and school funding and infrastructure, need more revenue/tax base Clean, accessible water Affordable housing Quality education Child welfare Good paying jobs with health insurance Top three health issues most concerned about in Cannon County Mental health - depression, suicide Substance misuse Access to healthcare for uninsured and underinsured; access to specialty care Obesity - healthy nutrition and quality places for exercise, activity Retaining the healthcare workforce Top Initiatives to Implement Environment and places for people to exercise and be physically fit, swimming pool, parks, fitness center Infrastructure - water, new jail, new schools, fully fund law enforcement, improve transportation, childcare services, transitional housing for those experiencing homelessness Telehealth readily available Health education for mental health, drug addiction, diabetes, obesity Open a mental health treatment center Increase access to healthcare, more providers, more nurses and counselors in schools Implement a drug court Implement a rise navigators
	Health education for mental health, drug addiction, diabetes,
	 Increase access to healthcare, more providers, more nurses and
	Needs emerged given COVID-19 pandemic and movements for racial
	 and social justice Limited childcare facilities
	 Limited childcare facilities Exacerbated housing concerns and instability
	 Fear of getting care due to lack of insurance
	 Delayed healthcare for fear of COVID
	Lack of broadband Internet
	 Food insecurity of children
Meaningful Quotes	

- "Would love to have a drug court. Instead of punishing a person with drug issues, rehabilitate them and help them with their addiction."
- "Make everyone understand the importance of working together and getting along, being a good neighbor and not being controversial about every issue."
- "Many rural hospitals are closing. Many rely on the hospital and health department for care. It is critical we have those two resources in the community."

To view community input data in its entirety, see Appendix C (page 47).



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
- 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 Cannon County:

- Higher adult smoking at 27%
- Higher adult obesity at 39%
- Lower access to exercise opportunities at 21%
- Higher alcohol-impaired driving deaths at 43%
- Higher percentage of uninsured at 13%
- Higher population to primary care physician at 4,820:1
- Higher number of preventable hospital stays at 5,949
- Lower percentage of highschool completion at 85%
- Lower percentage of adults with some college at 44%



The tables below are based on data vetted, compiled and made available on the County Health Rankings and Roadmaps (CHRR) website (<u>https://www.countyhealthrankings.org/</u>). 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	Cannon County	Tennessee	Top US Counties	Description		
Length of Life							
Premature Death		12,151	9,355	5,400	Years of potential life lost before age 75 per 100,000 population (age-adjusted)		
Life Expectancy		74.0	76.0	81.1	How long the average person should live.		
Infant Mortality		NA	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		16%	15%	10%	Percent of adults 14 or more days of poor physical health per month.		
Low Birth Weight		9%	9%	6%	Percent of babies born too small (less than 2,500 grams).		
Fall Fatalities 65+		14.2	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		22	16	11	Number of deaths due to suicide per 100,000.		
Morbidity							
Diabetes prevalence		11%	13%	8%	Percent of adults aged 20 and above with diagnosed diabetes.		
Cancer Incidence		427.8	466.0	n/a	Number of new cancer diagnoses per 100,000.		
Communicable Disease							



HIV Prevalence Sexually Transmitted	261	304.7	50	Number of people aged 13 years and over with a diagnosis of HIV per 100,000. Number of newly diagnosed chlamydia
Infections	232.1	569	161	cases per 100,000.

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

Healthcare Access					
Uninsured		13%	12%	6%	Percentage of population under age 65 without health insurance.
Uninsured Adults		15%	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		4,820:1	1,400:1	1,200:1	Ratio of population to primary care physicians.
Other Primary Care Providers		2,450:1	681:1	621:1	Ratio of the population to primary care providers other than physicians.
Mental Health Providers		7,340:1	630:1	270:1	Ratio of the population to mental health providers.
Hospital Utilization					
Preventable Hospital Stays		5,949	4,915	2,565	Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.
Preventative Healthcare					
Flu Vaccinations		48%	50%	55%	Percentage of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination.
Mammography Screenings		41%	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	Cannon County	Tennessee	Top US Counties	Description
Economic Stability					-
Median Household Income		\$53,000	\$56,000	\$72,900	Income where half of households in a county earn more and half of households earn less.
Unemployment		3.1%	3.8%	2.6%	Percentage of population ages 16 and older unemployed but seeking work.
Poverty		13.0%	13.8%	n/a	Percentage of population living below the Federal Poverty Line.
Childhood Poverty		20%	19%	10%	Percentage of people under age 18 in poverty.
Educational Attainment					-
High School Completion		85%	87%	94%	Percentage of adults ages 25 and over with a high school diploma or equivalent.
Some College		44%	61%	73%	Percentage of adults ages 25-44 with some post-secondary education.
Social/Community					-
Children in single-parent homes		19%	29%	14%	Percentage of children that live in a household headed by a single parent.
Social Associations		8.3	11.3	18.2	Number of membership associations per 10,000 population.
Disconnected Youth		NA	7%	7%	Percentage of teens and young adults ages 16-19 who are neither working nor in school.
Juvenile Arrests		х	х	х	Rate of delinquency cases per 1,000 juveniles.
Violent Crime		177	621	63	Number of reported violent crime offenses per 100,000 population.
Access to Healthy Foods					•
Food Environment Index		8.1	6.2	8.7	Index of factors that contribute to a healthy food environment, 0-worst 10-best.
Food Insecurity		13%	14%	9%	Percent of the population who lack adequate access to food.



Limited Access to Healthy Foods		1%	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	Cannon County	Tennessee	Top US Counties	Description	
Physical Environment						
Severe housing cost burden		8%	12%	7%	Percentage of households that spend 50% or more of their household income on housing.	
Severe Housing Problems		10%	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		8.8	8.8	5.5	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5).	
Homeownership		75%	66%	81%	Percentage of occupied housing units that are owned.	
Year Structure Built		19.9%	18.1%	27.5%	Percentage of housing units built prior to 1960.	
Source: <u>https://www.countyhealthrankings.org/explore-health-rankings</u>						



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	Cannon County	Tennessee	Top US Counties	Description
Healthcare Access					
Uninsured		13%	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		4,820:1	1,400:1	1,200:1	Ratio of population to primary care physicians.
Other Primary Care Providers		2,450:1	681:1	621:1	Ratio of the population to primary care providers other than physicians.
Mental Health Providers		7,340:1	630:1	270:1	Ratio of the population to mental health providers.
Hospital Utilization					
Preventable Hospital Stays		5,949	4,915	2,565	Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees.
Preventative Healthcare					
Flu Vaccinations		48%	50%	55%	Percentage of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination.
Mammography Screenings		41%	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	Cannon County	Tennessee	Top US Counties	Description
Healthy Life					
Adult Obesity		39%	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/m2.
Physical Inactivity		26%	27%	19%	Percentage of adults age 20 and over reporting no leisure-time physical activity.
Access to Exercise Opportunities		21%	70%	91%	Percentage of population with adequate access to locations for physical activity.
Insufficient Sleep		42%	41%	32%	Percentage of adults who report fewer than 7 hours of sleep on average.
Motor Vehicle Crash Deaths		27	15.4	9.0	Number of motor vehicle crash deaths per 100,000 population.
Substance Use and Mis	use				-
Adult Smoking		27%	21%	16%	Percentage of adults who are current smokers.
Excessive Drinking		16%	17%	15%	Percentage of adults reporting binge or heavy drinking.
Alcohol-Impaired Driving Deaths		43%	25%	11%	Percent of Alcohol-impaired driving deaths.
Opioid Hospital Visits		126	85	n/a	Rate of opioid-related hospital visits per 100,000 population.
Sexual Health					
Teen Births		32	29	12	Number of births per 1,000 female population ages 15-19.
Sexually Transmitted Infections		232.1	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 49).



Summary of COVID-19 Impact on Cannon 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 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 Cannon County (as of December 1, 2021)			
Indicator	Cannon County	Tennessee	Description
Total Cases	2,864	1,303,830	
Confirmed Cases per 100,000	3,609	19,092	
Total Deaths	44	19,829	
Deaths per 100,000	55	246	
Case Fatality Percentage	1.54%	1.52%	Percent of total confirmed cases of individuals who died of COVID-19

Source: CDC COVID Data Tracker and Tennessee 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 Stones River's previous CHNA and implementation strategy were made available to the public and open for public comment via the website: <u>https://healthcare.ascension.org/chna</u>.

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 Cannon 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 Stones River 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.

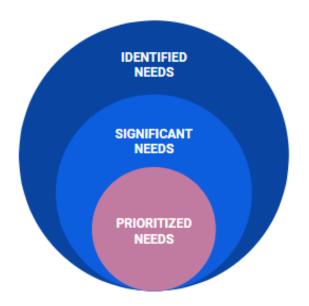


Community Needs

Ascension Saint Thomas Stones River, 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 Cannon County. In collaboration with community partners, Ascension Saint Thomas Stones River 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 Stones River 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.



The image above also describes the relationship between the needs categories.

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 Cannon 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 Stones River utilized the 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:

- Substance misuse includes alcohol and tobacco
- Mental health depression, suicide
- Healthy lifestyles includes healthy eating, active living
- Access to affordable healthcare and insurance

To view health care facilities and community resources available to address the significant needs, please see Appendix E (page 61).



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

Substance misuse				
Why is it Important?	Data Highlights			
Drug overdose deaths are a leading contributor to premature death and are largely preventable. Substance abuse impacts children and families in the community as well as the unhoused population.	 Higher opioid overdose outpatient visits per 100,000 at 126 than Tennessee at 85 Higher percentage of adult smoking at 27% than Tennessee and the U.S. Higher rate of opioid prescriptions filled per 1,000 residents at 1,035 than Tennessee at 736 Higher alcohol impaired driving deaths at 43% than Tennessee and 			
Local Assets & Resources	the U.S.			
 S2L Recovery JourneyPure - Tennessee Alcohol & Drug Rehab 				
Community Challenges & Perceptions	Individuals Who Are More Vulnerable			
 Both the community survey and the interviews identified substance misuse including alcohol and smoking as one of the top issues. Lack of recovery resources 	The stakeholders mentioned those with mental health issues are more likely to also misuse drugs in an attempt to self medicate.			



Mental Health				
Why is it Important?	Data Highlights			
The stakeholders believed that mental health and related issues affected substance abuse and impacted many other areas of health, defined as overall wellbeing.	 Higher poor mental health days at 5.8 days in the past 30 days compared to Tennessee and the U.S. Higher percentage of adults reporting 14 or more days of poor mental health per month at 18% compared to Tennessee and the U.S. 			
Local Assets & Resources	 Higher suicide rate than Tennessee and the U.S. Higher population to mental health providers at 7,339 than Tennessee and the U.S. 			
Cheer Mental Health Center	•			
Community Challenges & Perceptions	Individuals Who Are More Vulnerable			
 Both the community survey and the interviews identified mental health as a top health issue. Depression due to isolation and suicide were mentioned. Lack of mental health treatment resources 	The stakeholders determined the unhoused population were very vulnerable to mental health issues such as schizophrenia and bipolar disorder. COVID brought grief and isolation to many people in the community.			



Healthy lifestyles - healthy eating, active living			
Why is it Important?	Data Highlights		
Healthy eating and being active have positive effects on health. These include: reduced the risk of chronic diseases, such as diabetes, heart disease, high blood pressure, stroke, and some cancers and associated disabilities. They prevent weight gain and/or promote weight loss.	 Thirty nine percent of adults in the county were obese, which wass higher than Tennessee and the U.S. Access to exercise opportunities at 21% was lower than Tennessee and the U.S. 5.3 days of the past 30 were poor physical health days, higher than Tennessee and the U.S. Twenty six percent of the 20 year olds and older reported no leisure time physical activity 		
Local Assets & Resources			
 Cannon County Community Center Dillon Park 			
Community Challenges & Perceptions	Individuals Who Are More Vulnerable		
• The community surveys indicated nutrition/lack of a healthy diet and lack of exercise along with education and motivation and lifestyle choices were the top health issues.	Those with low incomes are more vulnerable due to the cost of eating healthy and time associated with exercise. If one is worried about putting food on the table and a roof over one's head, eating right and exercising are not a top need.		



Access to affordable healthcare and insurance				
Why is it Important?	Data Highlights			
Access to health services is an important step toward reducing health disparities. Health insurance coverage is an important determinant of access to health care.	 Thirteen percent of the population under age 65 was uninsured Six percent of children were uninsured and 15% of adults under age 65 were uninsured Preventable hospital stays were 5,949, which was higher than Tennessee and the U.S. and may be indicative of lack of primary 			
Local Assets & Resources	 care Population per primary care physician at 4,821 was higher than Tennessee and the U.S. 			
 Ascension Saint Thomas Stones River Cannon County Health Department Woodbury Medical Center Fast Pace Health Community Wellness Clinic Mountain View Medical Family Medicine 	 Population to other primary care providers at 2,446 was higher than Tennessee and the U.S. 			
Community Challenges & Perceptions	Individuals Who Are More Vulnerable			
• Both the community survey and the interviews revealed access to affordable healthcare and insurance for the uninsured and uninsured were top health needs.	Those who do not have insurance are negatively impacted as well as those underinsured with high deductibles. The low-income are more likely to not have health insurance.			



Prioritized Needs

Following the completion of the CHNA, Ascension Saint Thomas Stones River Hospital will select all, or a subset, of the needs below as the hospital's prioritized needs for its 2021 CHNA Implementation Strategy:

- 1. Substance misuse includes alcohol and tobacco
- 2. Mental health depression, suicide
- 3. Healthy lifestyles includes healthy eating, active living
- 4. Access to affordable healthcare and insurance

Ascension Saint Thomas Stones River 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 Stones River Hospital leaders and community partners to finalize which community health needs Ascension Tenneseee and Ascension Saint Thomas Stones River 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 63*).



Approval by Ascension Saint Thomas Regional Hospitals Board of Directors and Ascension Saint Thomas Board of Directors

To ensure the Ascension Saint Thomas Stones River's efforts meet the needs of the community and have a lasting and meaningful impact, the 2021 CHNA was presented to the Ascension Saint Thomas Regional Board of Directors for approval and adoption on March 28, 2022 and to the Ascension Saint Thomas Board of Directors on April 8, 2022. 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 Stones River serves. This report will be used by internal stakeholders, non-profit organizations, government agencies, and other community partners of Ascension Saint Thomas Stones River to guide the 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 Stones River hopes this report offers a meaningful and comprehensive understanding of the most significant needs for residents of Cannon County. As a Catholic health ministry, Ascension Saint Thomas Stones River 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 Stones River 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 (<u>https://healthcare.ascension.org/chna</u>) 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	Cannon County	Tennessee	U.S.
Total	14,949	7,025,037	333,934,112
Male	50.0%	49.0%	49.3%
Female	50.0%	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	Cannon County	Tennessee	U.S.
Asian	0%	2%	6%
Black / African American	2%	17%	13%
Hispanic / Latino	3%	6%	19%
Native American	0%	0%	1%
DeKalb	95%	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	Cannon County	Tennessee	U.S.
Median Age	43.7	40.0	38.8
Age 0-17	19.8%	21.2%	21.8%
Age 18-64	60.1%	60.8%	61.0%
Age 65+	20.1%	18.0%	17.2%
Data source: Esri, 2021			

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	Cannon County	Tennessee	U.S.
Median Household Income	\$53,000	\$55,276	\$64,730
Per Capita Income	\$26,435	\$29,859	\$34,103
People with incomes below the federal poverty guideline	13.0%	13.8%	12.3%
ALICE Households	33%	32%	29%
Data aguras: Eari 2021 Tannagaga Dant of Haalth County Data Dagkaga (US Burgay of Economic Analysis 2010) US Consus Burgay Small			0) US Conque Burgau Small

Data source: Esri, 2021, Tennessee 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



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	Cannon County	Tennessee	U.S.
High School grad or higher	85%	87%	88%
Bachelor's degree or higher	15.8%	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	Cannon County	Tennessee	U.S.
Uninsured	13%	12%	10%
Medicaid Eligible	22.1%	19%	24.8%
Data source: County Health Rankings 2021, State of Tennessee County Profiles, 2020; US Medicaid.gov			





Appendix C: Community Input Data and Sources

In July 2021, Ascension Saint Thomas Stones River began a Community Health Needs Assessment for Cannon 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 January 2022.
- Community members participated in thirteen individual interviews for their perspectives on community health needs and issues from November, 2021 through February 15, 2022.
- A community survey was distributed and 21 responses were collected from October 6, 2021 through January 31, 2022.
- A final community need prioritization survey was distributed from February 15, 2022 through February 28, 2022 and 77 surveys were completed.

Input of those with special knowledge or expertise in pubic health

The Regional Health Department was consulted prior to beginning the CHNA process for advice and counsel. Representatives of the local health department participated in the interviews.

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 Eleven community members were interviewed. Those selected were chosen based on their knowledge of Cannon 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 hospital CEO and other community stakeholders which represents a very broad swathe of the community representing many 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 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
Cannon County School System	Youth
Cannon County Government	All
United Way of Rutherford and Cannon Counties	All
Cannon County Chamber of Commerce	Businesses
Ascension Saint Thomas Stones River Hospital	All
Tennessee Hospital Association	All
End Slavery	Victims of trafficking
TennCare	All
Age Well	Seniors
Tennessee Commission on Children and Families	Youth
Tennessee Public Health Association	All



Appendix D: Additional Secondary Data and Sources

In the graphs and tables below, if a red stop sign and red title accompany a graph or table the indicator for Cannon County is worse than Tennessee. If a green star and green title accompany a table or graph, the Cannon County indicator is better than Tennessee.

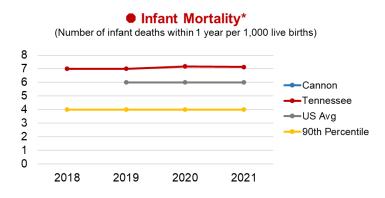
Health Outcomes

Length of Life - life expectancy, infant mortality

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

	2017-2019
Cannon County	74.0
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.



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

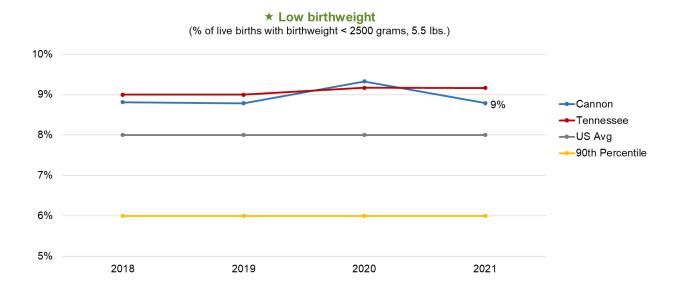
According to the State of Tennessee Commission on Children and Youth in County Profiles 2020, there were 1 infant deaths, making the rate 5.8 per 1,000. Published 1/2021

Life expectancy in Cannon County was lower than Tennessee.



Physical Health

Low birthweight babies - low birthweight babies



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



Social and Economic Factors

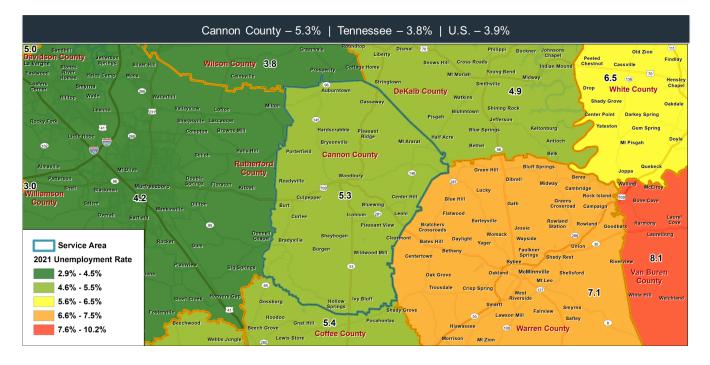
Economic Stability - median hh income, unemployment, poverty, childhood poverty, income inequality

	Cannon County	Tennessee	USA
Median Household Income	\$53,000	\$55,276	\$64,730

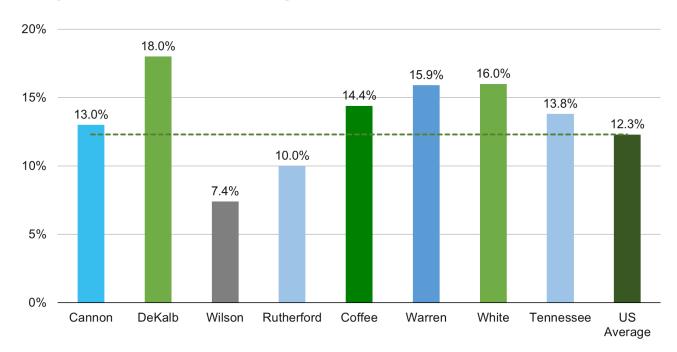
Source: Esri, 2021



Unemployment

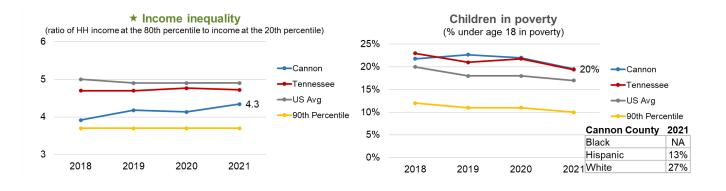


Poverty Estimates 2019 for Contiguous Counties, TN, and US



Ascension

Ascension Saint Thomas Stones River

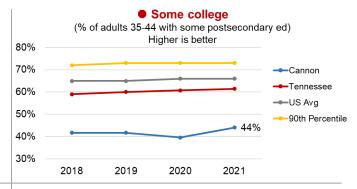


Educational Attainment - high school completion, some college, reading scores, math scores

High school completion

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

	2021
Cannon County	85%
Tennessee	87%
US Avg*	88%
90th Percentile	94%



Math scores

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

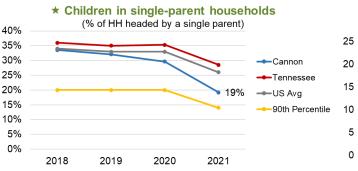
	2021
Cannon County	2.7
Tennessee	2.9
US Avg	3.0
90 th Percentile	3.4

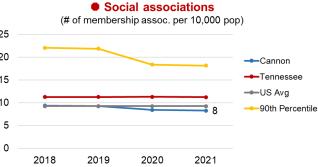
• 3rd Grade reading level

(Average grade level performance for 3rd graders on English Language Arts standardized tests)

	2021
Cannon County	2.9
Tennessee	3.0
US Avg	3.1
90 th Percentile	3.3

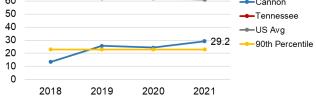
Social/Community - children in single parent homes, social associations, residential segregation -Black/White, residential segregation - nonWhite/White, disconnected youth, violent crime





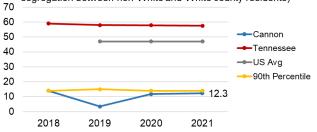
★ Residential segregation – Black/White

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

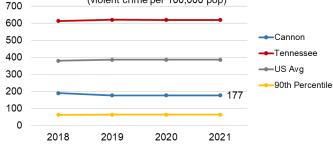


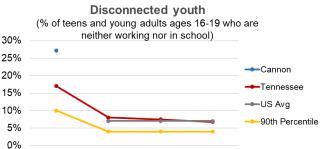
* Residential segregation – non-White/White

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









2020

2021

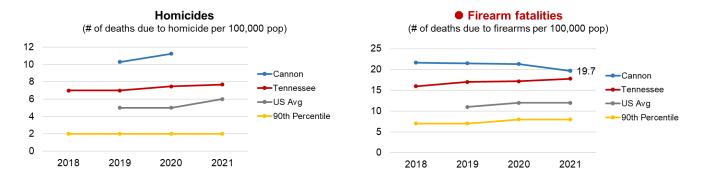
2018

2019

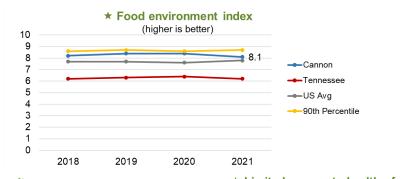


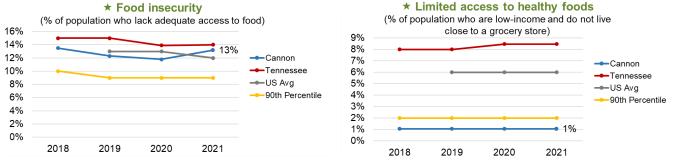


Injury Deaths - homicides, firearm fatalities



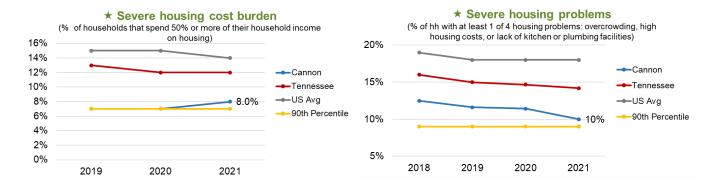
Access to Healthy Foods - food environment index, food insecurity, limited access to healthy foods





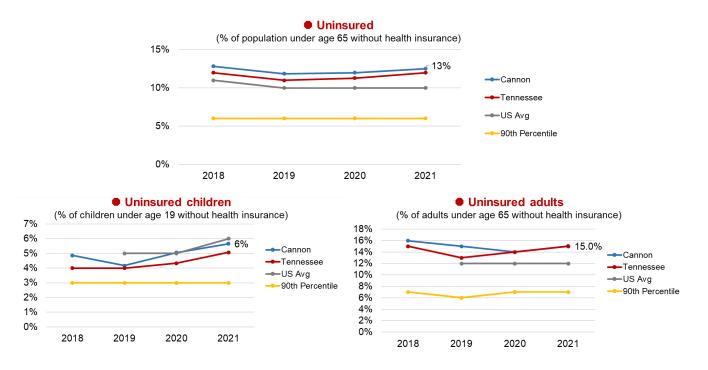


Physical Environment - Severe housing problems, severe housing cost burden





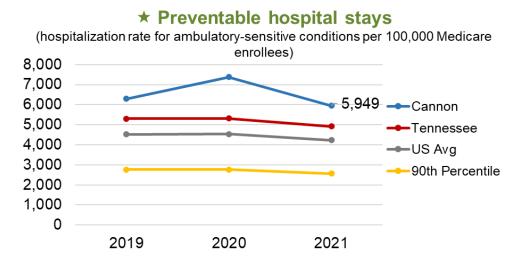
Clinical Care



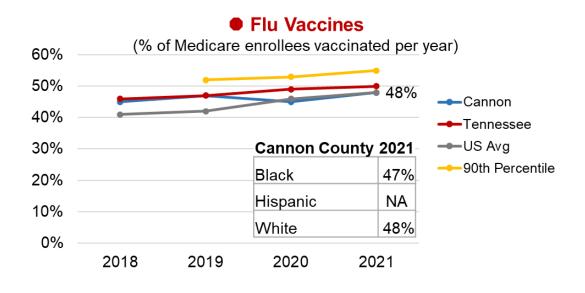
Healthcare Access - uninsured, uninsured adults, uninsured children



Hospital Utilization - Preventable hospital stays



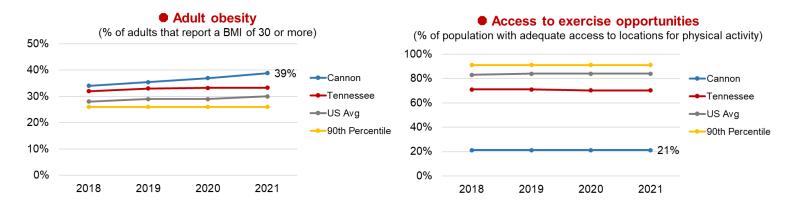
Preventative Healthcare - Flu vaccinations





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
Cannon County	126
Tennessee	85
US Avg	NA

Opioid overdose deaths

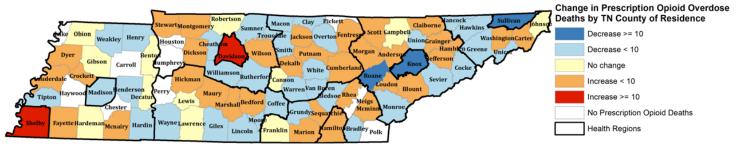
(rate of adults that died from an opioid overdose per 100,000, age adjusted)

	2020
Cannon County	NA
Tennessee	73
US Avg	15

Opioid Overdose Overdose Outpatient Visits by County



Opioid Overdose 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 Stones River has cataloged resources available in Cannon 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.

Substance Misuse

Organization Name	Phone	Website
S2L Recovery	(888) 241-8546	https://www.s2lrecovery.org/
JourneyPure - Tennessee Alcohol & Drug Rehab	(615) 410-9260	https://journeypure.com/location s/tennessee/?utm_medium=orga nic-listing&utm_source=google&u tm_campaign=tn-mufreesboro

Mental Health

Organization Name	Phone	Website
Cheer Mental Health Center	(931) 473-9649	https://www.vbhcs.org/locations/ mcminnville/

Healthy Lifestyles

Organization Name	Phone	Website
Cannon County Community Center	(615) 563-2025	https://www.facebook.com/cann onseniorcenter/
Dillon Park	NA	NA



Access to Healthcare

Organization Name	Phone	Website
Ascension Saint Thomas Stones River	(615) 563-4001	<u>Ascension Saint Thomas Stones</u> <u>River</u>
Cannon County Health Department	(615) 563-4243	<u>Cannon County Health</u> <u>Department</u>
Woodbury Medical Center	(615) 563-2891	Woodbury Medical Center, PC
Fast Pace Health	(615) 616-6010	Fast Pace Health
Community Wellness Clinic	(615) 563-7515	NA
Mountain View Medical Family Medicine	(615) 563-3245	NA





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

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

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
Maximize Use of Mobile Health Units	Started - Lagging	FY20 Community events on hold due to COVID FY21 Community events on hold due to COVID FYTD22 Planning meetings have resumed to identify opportunities to utilize mobile health units
Provide community-based organizations with financial support toward their work in one of the Prioritized Need areas.	Started - On Track	FY20 \$1,000 Family & Children's Service FY21 \$1,250 Family & Children's Service FYTD22 Still reviewing applications for the 2022 fiscal year
Improve access to care via telemedicine consultations, including when acute stroke symptoms are present.	Started, but ultimately stopped counting as Community Benefit during FY20	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 \$1,909. 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

PRIORITY NEED	Mental Health	
ACTIONS TAKEN	STATUS OF ACTIONS	RESULTS
Integrate behavioral health services with primary medical care to care for the behavioral as well as physical needs of underserved Cannon County residents.	Started - Lagging	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
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.	Not Started	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.	Started - On Track	FY20 \$5,000 Haven of Hope FY21 \$1,100 Haven of Hope FYTD22 \$1,000 Haven of Hope



PRIORITY NEED	Healthy Weight	
ACTIONS TAKEN	STATUS OF ACTIONS	RESULTS
Explore opportunities to increase active living and healthy eating, including educational opportunities with Cannon County schools.	Not Started	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.	Started - On Track	FY20 \$3,000 Second Harvest Food Bank Mobile Pantry FY21 \$6,000 Second Harvest Food Bank Mobile Pantry FYTD22 Still reviewing applications for the 2022 fiscal year

PRIORITY NEED	Substance Misuse	
ACTIONS TAKEN	STATUS OF ACTIONS	RESULTS
Increase knowledge, awareness and participation around substance abuse.	Not Started	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.	Not Started	FY20 None funded FY21 None funded FYTD22 Still reviewing applications for the 2022 fiscal year