2019
Community Health Needs Assessment

Cannon County, Tennessee
Saint Thomas Stones River Hospital
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Perspective/Overview

Creating a culture of health in the community


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

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

About Saint Thomas Stones River Hospital
Saint Thomas Stones River Hospital is a 60-bed hospital located in Woodbury, Tennessee. It provides emergency services and adult and geriatric behavioral health care.

About Ascension
Ascension is a faith-based healthcare organization dedicated to transformation through innovation across the continuum of care. As the largest non-profit health system in the U.S. and the world’s largest Catholic health system, Ascension is committed to delivering compassionate, personalized care to all, with special attention to persons living in poverty and those most vulnerable. In FY2018, Ascension provided nearly $2 billion in care of persons living in poverty and other community benefit programs. Ascension includes approximately 156,000 associates and 34,000 aligned providers. Ascension’s Healthcare Division operates more than 2,600 sites of care – including 151 hospitals and more than 50 senior living facilities – in 21 states and the District of Columbia, while its Solutions Division provides a variety of services and solutions including physician practice management, venture capital investing, investment management, biomedical engineering, facilities management, clinical care management, information services, risk management, and contracting through Ascension’s own group purchasing organization.
2019 Community Health Needs Assessment

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

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

Starting on July 1, 2019, this report is made widely available to the community via Saint Thomas Stones River Hospital’s website and paper copies are available free of charge at Saint Thomas Stones River Hospital, 324 Doolittle Road, Woodbury, TN 37190 or by phone 615-563-4001.

PROJECT GOALS

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

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

3. To support the existing infrastructure and utilize resources available in the community to instigate health improvement in the community.
We initiated the Community Health Needs Assessment with the goal to assess the health and needs of the community and create a coalition to address those needs. This process is an affirmation of what we’ve been doing and has increased awareness of available resources,” said Tracey Biles, Director, Mission Integration, Saint Thomas Health.

“The information gathered both from public health data and from community stakeholders provided the insight the community needed to set priorities for significant health issues and will be used by the community to inform and support our implementation plans,” added Brian Gill, CAO, Saint Thomas Stones River Hospital.
In January 2019, Saint Thomas Stones River Hospital began a Community Health Needs Assessment for Cannon County. Saint Thomas Stones River Hospital sought input from persons who represent the broad interests of the community using several methods:

- 28 community members, not-for-profit organizations (representing medically underserved, low-income, minority populations, and the elderly), Sheriff’s Office, health providers, senior center, local businesses and clergy, participated in a focus group and individual interviews for their perspectives on community health needs and issues on December 17, 2018 and January 31, 2019.


- A Community Health Summit was conducted on March 4, 2019 with 13 community stakeholders. The audience consisted of healthcare providers, business leaders, government representatives, schools, not-for-profit organizations, employers and other community members.
Participants

Thirty individuals from twenty-four community and healthcare organizations collaborated to implement a comprehensive CHNA process focused on identifying and defining significant health needs, issues, and concerns of Cannon County. In order to create a plan to improve the health of the community, Saint Thomas spent three months engaging stakeholders who represented broad interests, provided direction, and gave context to the needs of the community.
Participation in the focus groups and at the Community Health Summit creating the Cannon County Community Health Needs Assessment and Improvement Plan included:

<table>
<thead>
<tr>
<th>Organization</th>
<th>Population Represented (kids, low income, minorities, those w/o access)</th>
<th>How Involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Legion</td>
<td>All</td>
<td>Interview</td>
</tr>
<tr>
<td>Cannon Co. Schools, Coordinated school health</td>
<td>Kids</td>
<td>Interview, Summit</td>
</tr>
<tr>
<td>Cannon County</td>
<td>Readers</td>
<td>Summit</td>
</tr>
<tr>
<td>Cannon County Arts Center</td>
<td>All</td>
<td>Summit, Interview</td>
</tr>
<tr>
<td>Cannon County Chamber of Commerce</td>
<td>All, businesses</td>
<td>Interview</td>
</tr>
<tr>
<td>Cannon County Child Advocacy Center</td>
<td>All</td>
<td>Summit</td>
</tr>
<tr>
<td>Cannon County EMS</td>
<td>All</td>
<td>Interview</td>
</tr>
<tr>
<td>Cannon County Health Department</td>
<td>All/uninsured</td>
<td>Summit, Interview</td>
</tr>
<tr>
<td>Cannon County Library</td>
<td>All</td>
<td>Interview</td>
</tr>
<tr>
<td>Cannon County Schools</td>
<td>Kids</td>
<td>Interview</td>
</tr>
<tr>
<td>Cannon County Senior Center</td>
<td>All, Seniors</td>
<td>Summit, Focus Group</td>
</tr>
<tr>
<td>Cannon County Sheriff</td>
<td>All</td>
<td>Interview</td>
</tr>
<tr>
<td>Community Activist</td>
<td>All</td>
<td>Interview</td>
</tr>
<tr>
<td>Congressman John Rose's Office</td>
<td>All</td>
<td>Summit</td>
</tr>
<tr>
<td>Huff &amp; Puff Trucking, Inc.</td>
<td>All</td>
<td>Summit</td>
</tr>
<tr>
<td>Local business owner</td>
<td>All</td>
<td>Interview</td>
</tr>
<tr>
<td>Minister</td>
<td>All</td>
<td>Summit, Interview</td>
</tr>
<tr>
<td>Retired community member</td>
<td>All</td>
<td>Interview</td>
</tr>
<tr>
<td>Saint Thomas Health</td>
<td>All</td>
<td>Summit</td>
</tr>
<tr>
<td>Saint Thomas Stones River Hospital</td>
<td>All</td>
<td>Interview</td>
</tr>
<tr>
<td>Senior Center</td>
<td>All, Seniors</td>
<td>Interview</td>
</tr>
<tr>
<td>Upper Cumberland Human Resource Agency</td>
<td>All</td>
<td>Summit</td>
</tr>
<tr>
<td>Upper Cumberland Human Resource Agency</td>
<td>Low-income</td>
<td>Summit</td>
</tr>
<tr>
<td>Upper Cumberland Regional Health Office - TDH</td>
<td>All</td>
<td>Summit</td>
</tr>
</tbody>
</table>

In many cases, several representatives from each organization participated.
Input of the Medically Underserved, Low-income, and Minority Populations

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

Input of those with Expertise in Public Health

Representatives of the Cannon County Health Department participated in the interviews as well as presenting at and attending the Summit.

Community Engagement and Transparency

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

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

Community Selected for Assessment

Cannon County was the primary focus of the CHNA due to the service area of Saint Thomas Stones River Hospital. Used as the study area, Cannon County provided 46% of inpatient discharges. The community includes medically underserved, low-income and minority populations who live in the geographic areas from which Saint Thomas Stones River Hospital draws its patients. All patients were used to determine the service area without regard to insurance coverage or eligibility for financial assistance under Saint Thomas Stones River Hospital’s Financial Assistance Policy.

Saint Thomas Stones River Hospital - 2017

Source: Saint Thomas Stones River Hospital, 2018
Key Findings

Community Health Assessment

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

1(tie). Obesity
1(tie). Substance use disorder (including smoking)
2. Mental health
3 (tie). Education
3 (tie). Access

Process and Methods

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

Primary methods included:

• Community focus group
• Individual interviews with community members
• Community Health Summit

Secondary methods included:

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

Photo Credit Stratasan
Demographics of the Community 2018-2023

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

<table>
<thead>
<tr>
<th></th>
<th>Cannon County</th>
<th>Tennessee</th>
<th>USA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population</td>
<td>14,209</td>
<td>6,818,402</td>
<td>330,088,686</td>
</tr>
<tr>
<td>Median Age</td>
<td>43.4</td>
<td>39.4</td>
<td>38.3</td>
</tr>
<tr>
<td>Median Household Income</td>
<td>$42,054</td>
<td>$49,776</td>
<td>$58,100</td>
</tr>
<tr>
<td>Annual Pop. Growth (2018-2023)</td>
<td>0.45%</td>
<td>0.89%</td>
<td>0.83%</td>
</tr>
<tr>
<td>Household Population</td>
<td>5,647</td>
<td>2,671,026</td>
<td>124,110,001</td>
</tr>
<tr>
<td>Dominant Tapestry</td>
<td>Southern Satellites (10A)</td>
<td>Rooted Rural (10B)</td>
<td>Green Acres (6A)</td>
</tr>
<tr>
<td>Businesses</td>
<td>378</td>
<td>227,771</td>
<td>11,539,737</td>
</tr>
<tr>
<td>Employees</td>
<td>2,682</td>
<td>3,172,301</td>
<td>151,173,763</td>
</tr>
<tr>
<td>Medical Care Index*</td>
<td>79</td>
<td>89</td>
<td>100</td>
</tr>
<tr>
<td>Average Medical Expenditures</td>
<td>$1,535</td>
<td>$1,733</td>
<td>$1,950</td>
</tr>
<tr>
<td>Total Medical Expenditures</td>
<td>$8.7 M</td>
<td>$4.6 B</td>
<td>$242.0 B</td>
</tr>
</tbody>
</table>

Racial and Ethnic Make-up

<table>
<thead>
<tr>
<th></th>
<th>Cannon County</th>
<th>Tennessee</th>
<th>USA</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>95%</td>
<td>76%</td>
<td>70%</td>
</tr>
<tr>
<td>Black</td>
<td>2%</td>
<td>17%</td>
<td>13%</td>
</tr>
<tr>
<td>American Indian</td>
<td>0%</td>
<td>0%</td>
<td>1%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>0%</td>
<td>2%</td>
<td>6%</td>
</tr>
<tr>
<td>Other</td>
<td>1%</td>
<td>3%</td>
<td>7%</td>
</tr>
<tr>
<td>Mixed Race</td>
<td>2%</td>
<td>2%</td>
<td>3%</td>
</tr>
<tr>
<td>Hispanic Origin</td>
<td>2%</td>
<td>6%</td>
<td>18%</td>
</tr>
</tbody>
</table>

Source: ESRI

1 The median is the value at the midpoint of a frequency. There is an equal probability of falling above or below the median.
• The population of Cannon County was projected to increase from 2018 to 2023 (0.45% per year). Tennessee was projected to increase 0.89% per year. The U.S. was projected to increase 0.83% per year.

• Cannon County had a higher median age (43.4 median age) to TN, 39.4 and the U.S. 38.3. Cannon County percentage of the population 65 and over was 19%, higher than the US population 65 and over at 16%.

• Cannon County had lower median household income at $42,054 than TN ($49,776) and the U.S. ($58,100). The rate of poverty in Cannon County was 15.5% which was higher than the U.S (14%), but lower than TN (15.8%).

• The household income distribution of Cannon County was 12% higher income (over $100,000), 64% middle income and 26% lower income (under $24,999).

• The medical care index measures how much the population spent out-of-pocket on medical care services. The U.S. index was 100. Cannon County was 79, indicating 21% less spent out of pocket than the average U.S. household on medical care (doctor’s office visits, prescriptions, hospital visits).

• The racial and ethnic make-up of Cannon County was 95% white, 2% black, 2% mixed race, 2% Hispanic Origin, and 1% other. (These percentages total to over 100% because Hispanic is an ethnicity, not a race.)

• 8.7% of the population in Cannon County was uninsured from 2013-2017.

2018 Population by Census Tract and Change (2018-2023)
Census tracts generally have a population size between 1,200 and 8,000 people, with an optimum size of 4,000 people. South of the hospital had the largest population track with 5,000-6,999 people. North of the hospital had the second largest population tract with 3,500-4,999 people. The tract in the South of the county had fairly low population with up to 3,499.

2018 Median Age & Income

These maps depict median age and median income by census tract. Looking at age and income by census tract is helpful to demonstrate all areas of a county are not the same. The tracts south of the hospital had median ages of 42 and 43. The tract to the north of the hospital had an older median age of 45.

Looking at median household income by census tract can help determine different community needs within the county. South of the hospital had the lowest income with $38,100. The tract north of the hospital had a higher income with $46,100. The Southeast corner of the county had the highest median household income with $46,500.

The cost of living was lower in Cannon County (99 index) than the U.S., but slightly higher than TN (96 index). The median home cost in Cannon County was much lower at $133,100 then TN at $153,800 and the U.S. at $216,200.

Additionally, Cannon County’s September 2018 preliminary unemployment was 3.5%, compared to 3.7% for Tennessee and the U.S., which is a large decline in unemployment since 2014. These figures do not include those who have ceased looking for work and dropped out of the workforce. However, indications are these people have begun to reenter the workforce.
Business Profile
Sixty-nine percent of employees in Cannon County were employed in:

- Health care and social assistance (19.9%)
- Public administration (15.0%)
- Retail trade (12.6%)
- Educational services (12.0%)
- Other services (ex. Public administration) (9.5%)

Retail trade offers health insurance at a lower rate than healthcare, public administration and educational services. Many residents leave the county for retail shopping, thus harming the county’s ability to build retail/dining, which could make leaving for healthcare easier. Cannon County loses 2,980 net commuters per day commuting outside the county for work, with 3,581 commuting out of the county and 601 commuting into the county.

Tapestry Segmentation
The dominant Tapestry Segments in the county were Southern Satellites (40%), Rooted Rural (29%), and Small Town Simplicity (19%). There is a very brief description of the segments on the right of the map and on the next two pages. There is much more information on Tapestry Segments, at http://doc.arcgis.com/en/esri-demographics/data/tapestry-segmentation.htm. Studying the Tapestry Segments in the study area help determine health habits and communication preferences of residents enabling more effective communication and implementation of solutions.

Demographics are population, age, sex, race. Psychographics are adding behavior data in the form of spending habits and survey data on top of demographics. 88% of households in Cannon County are included in these three Tapestry Segments. The map is color coded by LifeMode, which are groupings of Tapestry Segments that behave similarly.
Southern Satellites

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

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

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

Rooted Rural

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

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

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

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

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

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

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

1. How do you define health?
   • Active, functionality
   • Being able to participate in the community, socialize
   • Being able to do the things you want to do
   • Enjoying life
   • Being happy, and have good mental health
   • Being independent
   • Healthy interaction with families
   • Wellbeing – both mentally and physically
   • How well we pay attention to diet, exercise, lifestyle, stress and disease
   • Multi-faceted - physical, mental, overall feeling of happiness, and emotional health

2. Generally, how would you describe the community’s health?
   • Not good – not enough healthy activities, or places to exercise
   • People have to exercise near where they work
   • Cannon County is a small community – not a lot of jobs, low income
   • At the jail, most people are incarcerated for drugs and they don’t know what health means
   • Average – not excellent, not poor
   • Not very good – bedroom community where people work elsewhere and have little time to make healthy meals

3. How would you describe senior’s health?
   • Good, the Senior Center is a lifesaver – a great place to exercise and socialize
   • Many seniors lack motivation to live healthy lives

4. Based on your experience, what are the top three issues that you are most concerned about in your community?
   • Lack of population and retention of young people, aging population
   • The lack of industry and investment
   • Education is poor (bad school system)
   • Lack of resources due to tax base
   • Lack of insurance
   • Lack of specialty care in Cannon
   • Everyone has to travel for work
   • It’s a small cute town but there is nothing here
   • Drugs (meth, heroin, opioid)
   • Domestic Violence
Focus Group Results, cont.

- Lack of parenting – children with poor lifestyle and lack motivation
- Low pay for teachers with lack of experience
- Senior center doesn’t have a social worker on staff
- Lack of knowledge of nutrition
- Obesity rates are high
- Education, socioeconomic stresses for small community
- Need more support for drug rehab
- County is in financial distress
- Cancer rates
- Children in foster care due to parents being on drugs.
- Housing
- Jobs – pay is low, lack of opportunities
- Crime is embarrassing
- Low income
- School system needs to improve
- Government is in bad financial shape
- Lack of preparation for retirement/savings among citizens
- Physical ailments, physical disabilities, not exercising/ eating right, nutritional
- Mental health concerns: depression, schizophrenia, bipolar

5. What are the most important health issues facing Cannon County?

- Lack of parenting skills – they don’t educate their kids about health or life skills, balancing a checkbook, insurance, nutrition
- Opioids are a big issue – they get prescription drugs from friends and family
- Hypertension
- Poverty (food stamps- more processed foods)
- Smoking
- Respiratory diseases
- Diabetes
- Heart disease
- Obesity
- Cancer
- Lack of exercise, diet, and knowledge of health
- Mental health – depression, bipolar
- Not exercising or eating right
- Grandparents raising children need more support and technical skills
Focus Group & Interview Results, cont.

6. What are the most important health issues facing various segments of the population, children, seniors, low income, medically underserved, minorities?
   
   **Children**
   - Poverty
   - Instability in homelife, dads are absent
   - Behavioral issues
   - Younger population feels entitled - not used to hard work
   - Obesity and diabetes
   - School menu serves nothing green, won’t find vegetables
   - Chronic absenteeism due to lack of specialists
   - Kids sick many times due to poor home life

   **Seniors**
   - Dementia
   - Loss of mobility impairs their ability to function as well
   - Food issues, lack education of what is a good diet
   - Lack of transportation

   **Low-income, medically underserved, minority populations**
   - No insurance
   - Anxiety
   - Stress
   - No coping skills
   - Smoking
   - Alcohol use masking some mental health issues
   - Lack of financial resources
   - Lack healthy food choices and availability
   - There’s an educational component
   - Knowledge to make good decisions
   - “Good enough for me” generational issues
   - Lifestyle choices
   - Subpar housing issues
   - People can’t afford to eat well, so the body breaks down and gets sick
   - People are in survival mode – caring about the day to day

7. What behaviors have the most negative impact on health?
   - Screen time, phones, X-box
   - Kids don’t play outside
   - Prescription drugs and antianxiety drugs running rampant
   - Still see some meth and heroin
   - Rural areas lack activities/opportunities for kids (unless they play sports), nothing to do here. Need activities here

8. What environmental factors have the biggest impact on community health?
   - Very clean air, fresh air which is especially beneficial for children
   - Water quality is poor in the city and even worse out in the county where people have wells. People feel you must have a water filter.
   - Most everyone works outside the county, long commutes
Focus Group & Interview Results, cont.

- Need more zoning enforcement for people to clean up their yards, cut their grass, remove cars from the yards
- Homes – still lack of water and electricity in some homes with kids. Some kids get their best meals at school
- Negative generational trends
- No greenway, but two city parks if people choose to and are encouraged to get exercise. Used to have a pool, but do not anymore.
- Lack of education – don’t see parents eating well or exercising

9. What are the barriers to improving health going forward?
   - Lack of education
   - Need to take leadership and form partnerships to provide health education for the communities. Saint Thomas could help partner with schools to provide health education
   - Economics, funding. The county commission isn’t funding the schools beyond the minimum required by the federal government.

10. What has changed most in the health status in the last 3 years?
    - Access has improved – more diagnostics, more primary care, telehealth in schools, community health clinic, addition of cardiology, SilverCare (geriatric psych), certified stroke center
    - Infant mortality has improved
    - Community leaders have opened their eyes to the issues in the community

11. What community assets support health and wellbeing?
    - Senior Center – has great programs, workout space, speakers, socialization, lunch
    - Ambulance service
    - Senior Center
    - Two walking trails
    - Hiking trails
    - People just need motivation to be active
    - Employers support the community
    - We Care Cannon – has been great to see how the community as come together, great collaboration
    - Faith based communities and schools
    - The school’s partnership with businesses – funding sports facilities
    - Children’s services
    - United Way
    - Huff & Puff Trucking sponsors athletic programs
    - Having a local hospital is important because of emergency care.
Focus Group & Interview Results, cont.

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

- Substance abuse (including tobacco) and mental health
- Wellness and disease prevention (nutrition and active living)
- Social determinants
- Access to care

How do these priorities compare to the issues today?

- Those sound correct
- Substance abuse is a big issue
- Mental health is a big issue especially with seniors
- Access to care is still an issue with transportation. However, UCHRA is very good, but only goes outside of town twice a week.
- Access to care has improved
- Obesity is still an issue
- Lack of funds in rural communities for law enforcement
- Improvement in teen pregnancy
- Increase in drug addiction – meth, marijuana, prescription drug use, opioids (kids get them from home)

Photo Credit Cannon County Instagram
Focus Group & Interview Results, cont.

13. What does the community need in order to manage health conditions or stay healthy?
- Make sure people are aware they can take drugs to sheriff’s department to dispose of
- Healthier places to eat or healthy choices at existing restaurants
- Get people to stay at the senior center for the speakers, not just lunch
- Educate kids in school about the importance of getting a flu shot and they can educate the parents.
- If kids can’t get the education they need at home, provide it at school, primarily life skills
- Better schools – example of a school system in northwest Georgia 50 miles from Atlanta having the best school system in the state, but no business or industry. People elect to live in the town for the school system and commute into Atlanta.
- For people to care about their fellow man as much as they care about themselves
- Access to more dermatology and podiatry, more specialists
- Swimming pool
- Continuing education for adults – classes in baking and gardening

14. Where do members of the community turn for basic healthcare needs?
- Most go to Murfreesboro, but a few see primary care providers in Woodbury
- Three local doctors
- Wellness Clinic
- Hospital
- Health Department

15. If you had a magic wand, what priority health improvement action should Cannon County focus on?
- Getting home economics and shop classes back in school, not everyone needs to go to college
- Educate kids on what it means to be an adult – parenting, how to balance a check book
- Instill and promote self-confidence in the kids. Tell kids to not let their circumstances dictate their future. Don’t be dictated how successful you can be by others.
- Healthy home life contributes to health
- Don’t discount smaller communities - their people are important
- Engaging the people in the community to buy-in and have ownership. Get engaged in the community and get resources for kids’ physical activities, reading programs, education on good lifestyle.
- Hospital and school system are largest employers. In years past, didn’t have to leave the community for jobs. Most people aren’t engaged in the community since they leave for work.
- Need more primary care here so people don’t have to go to Murfreesboro
- Hire an additional counselor and a social worker for schools. Add another nurse to the schools. Add another music teacher – helps with mental and emotional health.
- More after-school programs for kids
- Education is an asset not a liability. Pay teachers more
Health Status Data

Based on the 2018 County Health Rankings study performed by the Robert Wood Johnson Foundation and the University of Wisconsin\(^1\), Cannon County ranked 49\(^{th}\) healthiest County in Tennessee out of the 95 counties ranked (1 = the healthiest; 95 = unhealthiest), 58\(^{th}\) for health outcomes and 40\(^{th}\) for health factors.

County Health Rankings suggest the areas to explore for improvement in Cannon County were: higher adult smoking, higher obesity percentage, lower percentage of access to exercise opportunities, higher population to primary care physicians, higher preventable hospital stays, lower percentage of adults with some college, high rate of injury deaths, and a higher percentage of long commute – driving alone. The areas of strength were identified as better food environment index, lower percentage of alcohol-impaired driving deaths, and lower income inequality.

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

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

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

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

Health Outcomes (Length of Life and Quality of Life)

Health Outcomes are a combination of length of life and quality of life measures. Cannon County ranked 58th in health outcomes out of 95 Tennessee counties.

Length of Life
Length of life was measured by years of potential life lost per 100,000 population prior to age 75, lower is better. For example, if a 25-year-old is killed in an accident, that is 50 years of potential life lost prior to age 75. Cannon County ranked 77th in length of life in TN. Cannon County lost 11,260 years of potential life which is higher than TN and the U.S.

Source: County Health Rankings; National Center for Health Statistics – Mortality File 2012-2014
Leading Causes of Death: Age-Adjusted Deaths per 100,000

<table>
<thead>
<tr>
<th>Cause of Death</th>
<th>Cannon County</th>
<th>Tennessee</th>
<th>US</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart diseases</td>
<td>245.7</td>
<td>198.8</td>
<td>196.6</td>
</tr>
<tr>
<td>Cancer</td>
<td>173.9</td>
<td>179.9</td>
<td>185.1</td>
</tr>
<tr>
<td>Accidents (unintentional injuries)</td>
<td>100.5</td>
<td>61.1</td>
<td>44.0</td>
</tr>
<tr>
<td>Respiratory diseases</td>
<td>69.1</td>
<td>54.7</td>
<td>47.8</td>
</tr>
<tr>
<td>Stroke</td>
<td>51.3</td>
<td>46.0</td>
<td>49.9</td>
</tr>
<tr>
<td>Alzheimer’s disease</td>
<td>39.5</td>
<td>44.2</td>
<td>35.9</td>
</tr>
</tbody>
</table>

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

Red areas had death rates higher than the state. The leading causes of death in Cannon County were heart disease followed by cancer, like TN and the U.S. Lagging as causes of death were accidents, respiratory diseases, stroke and Alzheimer’s Disease.

Infant Mortality Per 1,000 Births

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tennessee</strong></td>
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<td></td>
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<tr>
<td>Number</td>
<td>562</td>
<td>569</td>
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<tr>
<td>Rate</td>
<td>6.9</td>
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<td>7.4</td>
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<td><strong>Cannon County</strong></td>
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<td></td>
</tr>
<tr>
<td>Number</td>
<td>2</td>
<td>0</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Rate</td>
<td>14.1</td>
<td>0.0</td>
<td>12.7</td>
<td>5.3</td>
</tr>
</tbody>
</table>

Source(s): Kids Count 2018

Cannon County’s infant mortality rate was 5.3 deaths per 1,000 births 2017.
Quality of Life

Quality of life was measured by: % reporting fair or poor health, the average number of poor physical health days and poor mental health days in the past 30 days, and % of live births with birthweight less than 2500 grams, or 5.5 lbs. Cannon County ranked 34th out of 95 counties in Tennessee for quality of life.

![Graphs showing quality of life metrics for Cannon County, Tennessee, and US average.]

Source: County Health Rankings; Behavioral Risk Factor Surveillance System (BRFSS) 2016

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

Quality of Life STRENGTHS

- 19% of Cannon County reported poor or fair health, the same as TN.
- 9% of Cannon County births were less than 2500 grams or 5.5 lbs., similar to TN.
- Cannon County had lower death rates due to cancer and Alzheimer's than TN.

Quality of Life OPPORTUNITIES

- Years of potential life lost per 100,000 population prior to age 75 in Cannon County were higher than TN.
- Cannon County had a higher number of poor physical health days of the past 30 days than TN with 4.6.
- Cannon County also had a higher number of poor mental health days in the past 30 days than TN with 4.7.
- Cannon County had higher death rates due to heart disease, respiratory disease, accidents, and stroke than TN.
Health Factors or Determinants

Health factors or determinants were comprised of measures related to health behaviors, clinical care, social & economic factors, and physical environment. Cannon County ranked 40th in health factors out of 95 TN counties.

Health Behaviors

Health behaviors are made up of nine measures and account for 30% of the county ranking, and Cannon County ranked 25th out of 95 counties in Tennessee.

- **Adult obesity** (% of adults that report a BMI of 30 or more)
- **Physical inactivity** (% 20 yo and older reporting no leisure time physical activity)
- **Access to exercise opportunities** (% of population with adequate access to locations for physical activity)
- **Adult smoking** (% that report every day or "most days")
- **Excessive Drinking** (% of adults reporting binge or heavy drinking)
- **Alcohol impaired driving deaths** (percentage of driving deaths with alcohol involvement)
- **Sexually transmitted infections** (chlamydia rate per 100,000 pop)
- **Teen birth rate** (# of births per 1,000 female pop ages 15-19)

Source: Obesity, physical inactivity - County Health Rankings; CDC Diabetes Interactive Atlas based on responses to BRFSS, 2014
Source: Access to exercise opportunities - County Health Rankings; ArcGIS Business Analyst, Delorme map data, Esri and U.S. Census Tigerline Files, 2016. Measures the percentage of individuals in a County who live reasonably close to a location for physical activity, defined as parks or recreational facilities (local, state national parks, gyms, community centers, YMCAs, dance studios and pools)
Source: Smoking - County Health Rankings; Behavioral Risk Factor Surveillance System (BRFSS), 2016
The food environment index is a comprised of % of the population with limited access to healthy foods and % of the population with food insecurity. Limited access to foods estimates the % of the population who are low income and do not live close to a grocery store. Food insecurity is the % of the population who did not have access to a reliable source of food during the past year.

Although the County Health Rankings Food Index does not indicate an issue, the State of TN Food Desert project, based on different criteria, shows the Woodbury census tract rates poor on the Food Desert Impact Areas.
Health Behaviors STRENGTHS

- Sexually transmitted infections measured by chlamydia rate per 100,000 population were lower in Cannon County than TN and the U.S.
- The percentage of driving deaths with alcohol involved in Cannon County was 7%, lower than TN and the U.S. in the top 10% of all counties in the U.S.
- The food environment index was high (better) than TN. However, according to the TN Food Desert Impact Assessment indicates Cannon County rated high for food desert indicators.

Health Behaviors OPPORTUNITIES

- Adult obesity in Cannon County (34%) was higher than TN and the U.S. Obesity in Tennessee and the U.S. continue to rise, putting people at increased risk of chronic diseases including: diabetes, kidney disease, joint problems, hypertension and heart disease. Obesity can cause complications in surgery and with anesthesia. It has been implicated in Alzheimer’s and often leads to metabolic syndrome and type 2 diabetes.
- At 14%, excessive drinking was higher in Cannon County than TN and the U.S.
- Although the numbers were low, Cannon County had a higher rate of children with neonatal abstinence syndrome at 21.7 than TN at 13.5 in 2017.
- Physical inactivity was higher in Cannon County (33%) than TN and the U.S.
- Access to exercise opportunities was lower in Cannon County than TN and the U.S. at 21%.
- Adult smoking in Cannon County was the same as TN, but higher than the U.S. at 21%. Each year approximately 443,000 premature deaths can be attributed to smoking. Cigarette smoking is identified as a cause of various cancers, cardiovascular disease, respiratory conditions, low birthweight, and other adverse health outcomes.
- Mothers who smoked during pregnancy was higher than TN.
- The teen birth rate was higher in Cannon County than TN and the U.S. with 37 births per 1,000 females age 15 to 19.
- Cannon County’s drug overdose mortality rate was 36 drug poisoning deaths per 100,000 population. This was higher than TN (22) and the U.S. (20).

Births to Mothers who Smoked During Pregnancy

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tennessee</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number</td>
<td>12,150</td>
<td>11,545</td>
<td>10,788</td>
<td>10,325</td>
</tr>
<tr>
<td>Percent</td>
<td>15%</td>
<td>14%</td>
<td>13%</td>
<td>13%</td>
</tr>
<tr>
<td><strong>Cannon County</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number</td>
<td>27</td>
<td>41</td>
<td>39</td>
<td>35</td>
</tr>
<tr>
<td>Percent</td>
<td>19%</td>
<td>24%</td>
<td>25%</td>
<td>19%</td>
</tr>
</tbody>
</table>

*Source(s): Kids Count 2018*
Clinical Care

Clinical care ranking is made up of seven indicators, and they account for 20% of the county rankings. Cannon County ranked 80th out of 95 Tennessee counties in clinical care.

Source: Uninsured - County Health Rankings; Small Area Health Insurance Estimates, 2015
Source: Preventable hospital stays, mammography screening, diabetic screening - County Health Rankings; Dartmouth Atlas of Health Care, Medicare claims data, 2014

Source: Pop to PCP - County Health Rankings; Area Health Resource File/American Medical Association, 2015
Source: Pop to Dentists - County Health Rankings; Area Health Resource File/National Provider Identification file, 2016
Source: Pop to mental health provider (psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists and advanced practice nurses specializing in mental health) County Health Rankings; CMS, National Provider Identification, 2017
Clinical Care, cont.

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

<table>
<thead>
<tr>
<th>Specialist Product Line</th>
<th>Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allergy and Immunology</td>
<td>0</td>
</tr>
<tr>
<td>Cardiology</td>
<td>0</td>
</tr>
<tr>
<td>Cardiothoracic Surgery</td>
<td>0</td>
</tr>
<tr>
<td>Colorectal Surgery</td>
<td>0</td>
</tr>
<tr>
<td>Dermatology</td>
<td>0</td>
</tr>
<tr>
<td>Endocrinology</td>
<td>0</td>
</tr>
<tr>
<td>Family Medicine</td>
<td>3,158 : 1</td>
</tr>
<tr>
<td>Gastroenterology</td>
<td>0</td>
</tr>
<tr>
<td>General Surgery</td>
<td>0</td>
</tr>
<tr>
<td>Geriatrics</td>
<td>0</td>
</tr>
<tr>
<td>Hematology/Oncology</td>
<td>0</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>14,209 : 1</td>
</tr>
<tr>
<td>Nephrology</td>
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<tr>
<td>Neurology</td>
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</tr>
<tr>
<td>Neurosurgery</td>
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<tr>
<td>Obstetrics and Gynecology</td>
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<tr>
<td>Orthopedic Surgery</td>
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<td>Otolaryngology</td>
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<tr>
<td>Pediatrics</td>
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<tr>
<td>Physical Medicine and</td>
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</tr>
<tr>
<td>Rehabilitation</td>
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</tr>
<tr>
<td>Pulmonology</td>
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<tr>
<td>Rheumatology</td>
<td>0</td>
</tr>
<tr>
<td>Urology</td>
<td>0</td>
</tr>
<tr>
<td>Vascular Surgery</td>
<td>0</td>
</tr>
</tbody>
</table>

**Cannon County Total** 2,583 : 1

Using more recent data than the County Health Rankings, and including more specialties, there were 2,583 population to physician.

**Rates of Persons Living with HIV**

<table>
<thead>
<tr>
<th>County</th>
<th>Persons Living with HIV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cannon County</td>
<td>161 of every 100,000 people</td>
</tr>
<tr>
<td>Warren County</td>
<td>93 of every 100,000 people</td>
</tr>
<tr>
<td>White County</td>
<td>99 of every 100,000 people</td>
</tr>
<tr>
<td>DeKalb County</td>
<td>210 of every 100,000 people</td>
</tr>
</tbody>
</table>

161 of every 100,000 people in Cannon County were living with HIV.

Source: aidsvu.org/state/tennessee

**Cancer Incidence Rates for Counties in Tennessee**

The cancer incidence rate was 456.6 in Cannon County compared to 456.4 in TN.

Source: SEER, statecancerprofiles.cancer.gov
Clinical Care STRENGTHS

• The percent of diabetic Medicare enrollees receiving diabetic screening was the same as TN and the U.S. at 87%.
• The percent of adults over 20 who had been diagnosed with diabetes, 13%, was the same as TN.
• Cancer incidence rates for Cannon County were the same as TN.

Clinical Care OPPORTUNITIES

• The percent of population under sixty-five without health insurance was higher in Cannon County than TN at 13%. Tennessee did not expand Medicaid, therefore their percent uninsured is higher than the U.S.
• The percent of adults over 20 who had been diagnosed with diabetes, 13%, was higher than TN and the U.S.
• The rate for hospitalization for ambulatory-sensitive conditions per 1,000 Medicare enrollees was higher in Cannon County than TN and the U.S. This indicator measures potential shortages of outpatient/physician providers.
• Mammography screening at 55% was lower than TN and the U.S.
• The population per primary care physician was higher in Cannon County than TN and the U.S. at 4,613 people per primary care physician. When all providers are accounted for the ratio drops to 2,583 which was still higher than TN and the U.S. at 1,320.
• The population per dentist was higher in Cannon County than TN and the U.S. at 4,676 population per dentist.
• The population per mental health provider was higher in Cannon County than TN and the U.S. at 3,507 population per mental health provider.
• The rate of persons living with HIV was high (161 our of every 100,000). Cannon County was placed in the 7th of 10 categories of HIV rates in the state.
Social & Economic Factors

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

- **High school graduation** (% of 9th grade cohort graduating in 4 yrs) Higher is better
- **Some college** (% of adults 35-44 with some postsecondary ed) Higher is better
- **Children in poverty** (% under age 18 in poverty)
- **Social associations** (# of membership assoc. per 10,000 pop)
- **Income Inequality** (ratio of HH income at the 90th percentile to income at the 20th percentile)
- **Children in single-parent households** (% of HH headed by a single parent)
- **Injury deaths** (Injury mortality per 100,000)
- **Violent crime rate** (violent crime per 100,000 pop)

Social & Economic Factors STRENGTHS

• The percentage of children in poverty was lower than TN at 22%, but higher than the U.S.
• The percentage of children in single-parent households in Cannon County (34%) was lower than TN, but similar to the U.S.
• At 3.9, income inequality was lower in Cannon County than in TN and the U.S.
• Violent crime per 100,000 population was lower in Cannon County at 190 violent crimes per 100,000 population than in TN and the U.S.
• The poverty rate at 15.5% was slightly lower than TN, but higher than the U.S.

Social & Economic Factors OPPORTUNITIES

• High school graduation in Cannon County was slightly lower than TN at 88%, but higher than the U.S.
• The percentage of adults 35-44 years old with some postsecondary education was lower at 42% than TN and the U.S.
• Social associations were lower in Cannon County than TN and the same as the U.S. at 9 memberships per 10,000 population. Associations include membership organizations such as civic organizations, bowling centers, golf clubs, fitness centers, sports organizations, religious organizations, political organizations, labor organizations, business organizations, and professional organizations. Poor family support, minimal contact with others, and limited involvement in community life are associated with increased morbidity and early mortality.
• Injury deaths were higher in Cannon County (140 per 100,000) than TN and the U.S.
• The median household income was lower at $42,054 than TN and the U.S.
Physical Environment

Physical environment contains four measures in the category and accounts for 10% of the County rankings. Cannon County ranked 25th out of 95 Tennessee counties in physical environment.

**Physical Environment STRENGTHS**

- Cannon County had no drinking water violations.
- Cannon County had a lower percentage of severe housing problems than TN and the U.S. at 12%.
- The average daily measure of matter in micrograms per cubic meter at 9 was lower than TN.

**Physical Environment OPPORTUNITIES**

- 59% of workers who commuted alone commuted over 30 minutes which was higher than TN, and the U.S.

There were Four Broad Themes that Emerged in this Process:

• Cannon County needs to create a "Culture of Health" which permeates throughout the towns, employers, churches, and community organizations to engender commitment to health improvement.

• There is a direct relationship between health outcomes and affluence (income and education). Those with the lowest income and education generally had the poorest health outcomes.

• While any given measure may show an overall good picture of community health, subgroups such as the census tract of Woodbury, may experience lower health status measures.

• It will take a partnership with a wide range of organizations and citizens pooling resources to meaningfully impact the health of the community. However, the county has many assets to improve health.

Photo Credit Cannon County Chamber of Commerce
Results of the CHNA: Community Health Summit Prioritized Health Needs, Goals and Actions

Prioritization of Health Needs

![Post-it notes with health needs prioritization](Photo Credit Stratasan)

### Prioritization Criteria

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

<table>
<thead>
<tr>
<th>Magnitude / scale of the problem</th>
<th>How big is the problem? How many people does the problem affect, either actually or potentially? In terms of human impact, how does it compare to other health issues?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seriousness of Consequences</td>
<td>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)?</td>
</tr>
<tr>
<td>Feasibility</td>
<td>Is the problem preventable? How much change can be made? What is the community's capacity to address it? Are there available resources to address it sustainably? What's already being done, and is it working? What are the community's intrinsic barriers and how big are they to overcome?</td>
</tr>
</tbody>
</table>
Most Significant Community Health Needs

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

1 (tie). Obesity

1 (tie). Substance use disorder (including smoking)

2. Mental health

3 (tie). Education

3 (tie). Access

1 (tie). Obesity—(10 sticky notes)
- Obesity (6 sticky notes)
- Decrease obesity rates
- Physical Inactivity (2 sticky notes)
- Lack of exercise

1 (tie). Substance use disorder (including smoking) — (10 sticky notes)
- Drugs (4 sticky notes)
- Treatment for drug and alcohol addiction
- Substance abuse
- Opioid abuse
- Smoking (3 Sticky notes)

2. Mental health - (6 sticky notes)
- Mental health (2 sticky notes)
- Mental health access
- Mental health providers
- Mental health treatment
- Counseling and treatment for victims of child abuse and neglect

3 (tie). Education - (3 sticky notes)
- Education
- Lack of concern
- Lack of knowledge of how to feed children and babies

3 (tie). Access – (3 sticky notes)
- Low Income
- Reduce preventable hospital stays
- Inadequate primary care

Other Issues
- Cancer
Community Health Summit Brainstorming

Community Health Goals and Actions

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

**Significant Health Need 1 (tie): Obesity**

**Goal 1 – Utilize resources to increase exercise and health opportunities in the community.**
- **Action 1** – Open a community center with exercise classes, equipment, etc. at low to no cost.
- **Action 2** – Make a community garden program.
- **Action 3** – Increase physical activity by making it part of life again, implement a walking challenge, make areas such as downtown more walkable, etc.

*Resources/ Collaborators needed: schools, churches, regional health department, health council*

**Goal 2 – Focus on kids and teach healthy habits at a young age.**
- **Action 1** – Use the diabetes grant to revamp school cafeterias and increase the number of kids eating breakfast and lunch at school. Lessen the stigma for the free lunch program.
- **Action 2** – Develop education programs on healthy lifestyle choices and food preparation.
- **Action 3** – Provide Jr. Chef classes to teach kids how to cook and eventually expand the program to include adults.

*Resources/ Collaborators needed: schools, churches, volunteers, education materials*
Significant Health Need 1 (tie): Substance use disorder (including smoking)

Goal 1 – Increase access to programs and support.
Action 1 – Build a treatment facility in Cannon County that is more accessible and affordable than Stones River Recovery.
Action 2 – Establish a drug coalition in the county with community stakeholders.
Action 3 – Utilize The Upper Cumberland Human Resource Agency’s regional opioid coordinator.
Resources/ Collaborators Needed: Funds for a recovery center, hospital, The Upper Cumberland Human Resource Agency’s opioid coordinator, health department, community stakeholders.

Goal 2 – Decrease the number of people smoking and vaping in the community.
Action 1 – Educate adults so they realize what vaping is.
Action 2 – Change state, federal, and school policies to focus on limiting vaping.
Action 3 – Encourage medical professionals to stop smoking.
Action 4 – Smoking is used to deal with stress so increasing stress relief exercise and education can help people quit smoking.
Resources/ Collaborators Needed: schools, federal and state governments, hospitals, medical professionals.

Significant Health Need 2: Mental Health

Goal 1 – Increase training, support and number of providers for mental health.
Action 1 – Teach appreciation, thankfulness, and gratitude training in schools and the workplace.
Action 2 – Encourage more training programs and trained professionals in the community.
Action 3 – Create support groups for grief, child sexual abuse, resilience, HIV, etc.
Action 4 – Focus on therapy and counseling for kids rather than just medication.
Action 5 – Work with colleges and universities to get people to go into mental health and enter the community.
Resources/ Collaborators Needed: Trained professionals/programs, schools, hospital, community stakeholders, state and federal funding, transportation, publicize resources

Goal 2 – Decrease the mental health stigma.
Action 1 – Utilize churches to spread mental health awareness.
Action 2 – Teach mindfulness and breathing in school, and create a mental health week to break the stigma.
Resources/ Collaborators Needed: Schools, trained professionals, churches
Impact of 2016 CHNA and Implementation Plan

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

1. Substance abuse (including tobacco) & mental health
2. Wellness and disease prevention (nutrition and active living)
3. Social determinants
4. Access to care

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

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

---

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

<table>
<thead>
<tr>
<th>SIGNIFICANT HEALTH NEED Identified in Prior CHNA and Addressed in Implementation Strategy</th>
<th>MENTAL HEALTH &amp; SUBSTANCE ABUSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACTIONS PROPOSED to Address Significant Health Need</td>
<td>STATUS OF ACTIONS</td>
</tr>
<tr>
<td><strong>Strategy 1:</strong> Integrate behavioral health services with primary medical care to care for the behavioral as well as physical needs of community members.</td>
<td>Not Completed.</td>
</tr>
<tr>
<td><strong>Strategy 2:</strong> Offer inpatient geriatric psychiatric services to care for the mental and emotional needs of elderly community members.</td>
<td>Completed.</td>
</tr>
<tr>
<td><strong>Strategy 3:</strong> Provide community-based organizations with financial support toward their work addressing needs of Mental Health &amp; Substance Abuse.</td>
<td>Completed.</td>
</tr>
<tr>
<td>Additional Strategies: Increase inpatient psychiatric services to include adult population.</td>
<td>Completed.</td>
</tr>
</tbody>
</table>
| Additional Strategies: Support the community with partnerships and programs that provide education on mental health and substance abuse. | Completed. | Multiple programs and screening geared towards students during this CHA cycle including:
  * Kick Butts Day partner/anti-tobacco
  * Mental Health Awareness Month – guest speakers at multiple locations |
### Evaluation of Impact of Actions Taken to Address Needs Identified in Previous (2016) CHNA cont.

<table>
<thead>
<tr>
<th>SIGNIFICANT HEALTH NEED Identified in Prior CHNA and Addressed in Implementation Strategy</th>
<th>WELLNESS &amp; DISEASE PREVENTION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ACTIONS PROPOSED</strong> to Address Significant Health Need</td>
<td><strong>STATUS OF ACTIONS</strong></td>
</tr>
</tbody>
</table>
| **Strategy 1:** Improve the health of community students and impact obesity rates through expanding wellness screenings and other programming. | Completed. | Multiple programs and screenings geared towards students during this CHNA cycle including:  
- Healthy Heart Choices Booth  
- Partnership with Coordinated School Health – Try It Day (healthy food samples)  
- Health Habits Day – Guest Speaker at Cannon County Elementary Schools/Woodbury Grammar, West Side Elementary, Eastside Elementary |
| **Strategy 2:** Provide community-based organizations with financial support toward their work addressing needs of Wellness & Disease Prevention. | Completed. | Multiple Organizations Funded:  
- **FY17:**  
  - *Cannon County Schools:* funded for purchase of 7 AED machines and CPR manikin to be used for staff training.  
  - *Cannon County Schools:* funded paved walking trail at Short Mountain.  
  - *We Care Cannon:* provided in-kind support through supply donations.  
- **FY18:**  
  - *One Generation Away:* funding to provide support of their work in increasing access to healthy foods to those experiencing food insecurity. |
| **Additional Strategies:**  
Support the community with partnerships and programs that provide education to Seniors on healthy living. | Completed. | Multiple programs and screenings geared towards Seniors during this CHNA cycle including:  
- Dining with Diabetes  
- Saint Thomas Cancer Care – Q&A  
- Health Heart Choices |

<table>
<thead>
<tr>
<th>SIGNIFICANT HEALTH NEED Identified in Prior CHNA and Addressed in Implementation Strategy</th>
<th>SOCIAL DETERMINANTS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ACTIONS PROPOSED</strong> to Address Significant Health Need</td>
<td><strong>STATUS OF ACTIONS</strong></td>
</tr>
<tr>
<td><strong>Strategy 1:</strong> Implement an anti-human trafficking initiative throughout Saint Thomas Health so that victims of human trafficking who seek medical care will be identified and connected with the assistance they need.</td>
<td>In Progress.</td>
</tr>
<tr>
<td><strong>Strategy 2:</strong> Provide resource navigation support to community members in need, recognizing how critical economic stability and social environments that promote good health are to improve an individual’s and a community’s health.</td>
<td>Not Completed.</td>
</tr>
</tbody>
</table>
Evaluation of Impact of Actions Taken to Address Needs Identified in Previous (2016) CHNA cont.

<table>
<thead>
<tr>
<th>Strategy 3: Implement community-wide Medical Missions at Home that integrate medical, dental, vision, and behavioral health, along with broader community resources.</th>
<th>Completed.</th>
</tr>
</thead>
</table>
| **FY17:** Saint Thomas Health conducted three medical mission events in FY17, one in Davidson County, one in Warren County, and one in Rutherford County, each held within a low-income community. Volunteers from all Saint Thomas Health entities participated, and community volunteer providers offered health screenings, referrals, consultations, dental care, eye exams, glasses, health education, lab/pharmacy services, behavioral health, and other services to persons who otherwise have limited access to health care. In FY17, these events served 1,395 community members in a total of 3,702 encounters resulting in 155 scheduled follow-up appointments.  
**FY18:** Saint Thomas Health conducted three medical mission events in FY18, one in Davidson County, one in Warren County, and one in Rutherford County, each held within a low-income community. Volunteers from all Saint Thomas Health entities participated, and community volunteer providers offered health screenings, referrals, consultations, dental care, eye exams, glasses, health education, lab/pharmacy services, behavioral health, and other services to persons who otherwise have limited access to health care. In FY18, these events served 1,211 community members in a total of 3,519 encounters resulting in 205 scheduled follow-up appointments.  
**FY19:** At time of written report, Saint Thomas Health conducted two events in FY19, one in Warren County and one in Davidson County with two additional medical missions planned (one in Rutherford County and one in Warren County) each held within a low-income community. YTD for FY19, these events served 1,024 community members in over 3,535 encounters resulting in 178 scheduled follow-up appointments. |

<table>
<thead>
<tr>
<th>Strategy 4: Create a comprehensive resource guide to equip both community members and service providers to best connect those in need with available services.</th>
<th>Not Completed.</th>
</tr>
</thead>
<tbody>
<tr>
<td>This action was to be in conjunction with Upper Cumberland Human Resource Agency and the Chamber of Commerce. This work was more intense than anticipated. The development of the website <a href="https://www.auntbertha.com/">https://www.auntbertha.com/</a> has helped to meet this need within the community.</td>
<td></td>
</tr>
</tbody>
</table>
### Evaluation of Impact of Actions Taken to Address Needs Identified in Previous (2016) CHNA cont.

<table>
<thead>
<tr>
<th>SIGNIFICANT HEALTH NEED Identified in Prior CHNA and Addressed in Implementation Strategy</th>
<th>ACTIONS PROPOSED to Address Significant Health Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCESS TO CARE</td>
<td>STATUS OF ACTIONS</td>
</tr>
</tbody>
</table>
| **Strategy 1**: Engage state legislators and other key stakeholders to advocate for expanded access to care in Tennessee. | Completed | January-May 2018  
January-May 2019  
All Tennessee legislators from all counties and neighboring counties/districts we serve were engaged weekly via in person visits, calls, or e-mails by Chief Advocacy Officer or senior leaders during the months of the legislative sessions listed above. In addition, meetings with TennCare Director and Deputy Director as well as Commissioner of Health and Commissioner of Mental Health and Disabilities. During the Summer and Fall, legislators are engaged as well during hospital ministry tours or Summer study meetings, but less frequently.  
Chief Advocacy Officer conducted follow up:  
Federal legislators and staff visits made in-person and engaged regularly in Washington and in local district regarding health policy.  
FY17: 36 Legislative visits and follow up in-person visits.  
FY18: 30 Legislative visits.  
FY19: 25 Legislative visits at time of report – additional planned – including visit with Governor Lee. Chief Advocacy Officer appointed to Tennessee Access to Care Board.  
Health Policies:  
100% Access and 100% Coverage for All Medicaid Expansion  
Insure Tennessee  
3-Star Healthy Plan  
Hospital Assessment  
Expansion of Ascension PACE  
Opioid Epidemic Policy  
Balanced Billing  
Compact Medicine Policy  
Nurse Practice Act  
Certificate of Need  
340B  
Corporate Practice of Medicine  
Sexual Assault Transports  
Psych Patient Transports  
Rural Hospitals  
Rural Health Access  
Behavioral Health/Substance Abuse  
Future of Medicaid |
### Evaluation of Impact of Actions Taken to Address Needs Identified in Previous (2016) CHNA cont.

<table>
<thead>
<tr>
<th>Strategy 2: Increase access to healthcare by removing traditional financial and insurance hurdles, through financial assistance and emergency care policies.</th>
<th>Completed.</th>
<th>Policy change enacted July 1, 2016 (FY17) to provide community members with income levels at or below 400% of the Federal Poverty Level with financial assistance as outlined in the Saint Thomas Health Financial Assistance Policy.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strategy 3: Implement community-wide Medical Missions at Home that integrate medical, dental, vision and behavioral health, along with broader community resources.</td>
<td>Completed.</td>
<td>FY17: Saint Thomas Health conducted three medical mission events in FY17, one in Davidson County, one in Warren County, and one in Rutherford County, each held within a low-income community. Volunteers from all Saint Thomas Health entities participated, and community volunteer providers offered health screenings, referrals, consultations, dental care, eye exams, glasses, health education, lab/pharmacy services, behavioral health, and other services to persons who otherwise have limited access to health care. In FY17, these events served 1,395 community members in a total of 3,702 encounters resulting in 155 scheduled follow-up appointments. FY18: Saint Thomas Health conducted three medical mission events in FY18, one in Davidson County, one in Warren County, and one in Rutherford County, each held within a low-income community. Volunteers from all Saint Thomas Health entities participated, and community volunteer providers offered health screenings, referrals, consultations, dental care, eye exams, glasses, health education, lab/pharmacy services, behavioral health, and other services to persons who otherwise have limited access to health care. In FY18, these events served 1,211 community members in a total of 3,519 encounters resulting in 205 scheduled follow-up appointments. FY19: At time of written report, Saint Thomas Health conducted two events in FY19, one in Warren County and one in Davidson County with two additional medical missions planned (one in Rutherford County and one in Warren County) each held within a low-income community. YTD for FY19, these events served 1,024 community members in over 3,536 encounters resulting in 178 scheduled follow-up appointments.</td>
</tr>
<tr>
<td>Strategy 4: Increase breast cancer screening compliance through Our Mission in Motion Mobile Mammography.</td>
<td>Completed.</td>
<td>FY18: One event in Cannon County serving 15 patients, with 10 qualifying for free care. 6 patients had never had a mammogram and for 6, it had been greater than two years. FY19: One event in Cannon County serving 13 patients. 4 patients had never had a mammogram and for 5 it had been greater than two years.</td>
</tr>
<tr>
<td>Strategy 5: Expand access to primary care through expanded presence and availability of providers, allowing more community members to access preventive and other services through a medical home.</td>
<td>Completed</td>
<td>During this CHNA cycle, increased partnerships with local providers defined and solidified.</td>
</tr>
</tbody>
</table>
### Evaluation of Impact of Actions Taken to Address Needs Identified in Previous (2016) CHNA cont.

| Strategy 6: Strengthen and expand the specialty care services available within the community to increase access to needed care. | Completed. | Surgical services discontinued at Saint Thomas Stones River September 2017 due to low volume, difficulty retaining medical staff to perform procedures, and expense of maintaining equipment for procedures. Saint Thomas Stones River opened a 6-bed inpatient adult psychiatry unit in April 2018 to serve Cannon and surrounding counties. In February 2019, new contract in place with Middle Tennessee Emergency Physicians (MTEP) to provide emergency services. Additionally, there is STMC Woodbury Heart Clinic cardiologist services available every other Wednesday, so patients may access that specialized care within their county. |
| Strategy 7: Improve access to care via telemedicine consultations when acute stroke symptoms are present. | Completed. | Telemedicine stroke services implemented at Saint Thomas Stones River Hospital in FY18 with management of services through Saint Thomas Health transfer center. |
| Additional Strategies: Support the community with partnerships and programs that provide education on access to care. | Completed. | Multiple programs and screenings geared towards access to care this CHNA cycle including:  
  - Breakfast with a Healthcare Professional held at Senior Center  
  - Saint Thomas Caner Care – Guest speaker Q&A at Senior Center |
| Additional Strategies: Provide community-based organizations with financial support toward their work addressing need of Access to Care. | Completed. | Multiple Organizations Funded:  
  **FY17:**  
  - *Tennessee Charitable Care Network (TCCN)*: Saint Thomas Health funded work to support coordination of statewide network of charitable healthcare clinics with specific facilitation of partnerships in Cannon/DeKalb/Warren/White Counties.  
  **FY17/FY18/FY19:**  
  - *Hope Smiles*: funded work to provide outreach dental care to areas with increased need and lack of dental resources.  
  **FY18/FY19:**  
  - *Tennessee Justice Center*: funded work to increase access to care in target communities through individual advocacy, education, and policy improvement.  
  **FY19:**  
  - *Family and Children Services*: funding for Healthcare Access Program for in-person and phone-based individual case management to connect people with affordable health care options. |
Appendix

Community Asset Inventory

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

**Cannon County, TN**

**Towns**
County Seat - Woodbury
Auburntown

**Unincorporated Communities**
Bluewing
Bradyville
Gassaway
Hopewell
Iconium
Midway
Readyville
Sugar Tree Knob

**Transportation**

**Major Highways**
US 70.svg U.S. Route 70
Tennessee State Route 53. SR 53
Tennessee State Route 146. SR 146

**Media**

**AM Radio**
WBRY (1540 AM; Woodbury TN)

**FM Radio**
W300CV (107.9 FM; Woodbury, TN)

**Newspaper**
Cannon Courier
113 West Main Street
Woodbury, TN 37190
(615) 563-2512

**Government**

**County Department Phone Numbers**

**County Executive**
(615) 563-2320

**Hwy Chief Admin Off**
(615) 563-4213

**Administrator of Elections**
(615) 563-5650

**Assessor of Property**
(615) 563-5437

**Circuit Court Clerk**
615-563-4461

**Clerk & Master**
(615) 563-5936

**County Attorney**
(615) 597-0530

**County Clerk**
(615) 563-4278

**Director of Schools**
(615) 563-5752

**General Sessions Court Jud**
(615) 563-4461

**Register of Deeds**
(615) 563-2041

**Sheriff**
(615) 563-5934

**Trustee**
(615) 563-2282
Highway Commissioner
Edward D Duke
81 Richardson RD
Bradyville, TN 37026

Highway Commissioner
Terry L Horn
95 Bradford Way
Woodbury, TN 37190

Highway Commissioner
Jimmy H Williams
977 Gassaway Main ST
Liberty, TN 37095

County Board of Commissioners

County Commissioner
Karen A Ashford
3137 Wilmouth Creek Rd.
Liberty, TN 37095

County Commissioner
Robert B Brandon
1308 Will Daniel Rd
Woodbury, TN 37190-5451

County Commissioner
Sterling B Bush Jr
187 Rogers Rd
Bradyville, TN 37026-5036

County Commissioner
James R Reed
2220 Murfreesboro Road
Woodbury, TN 37190
(615) 563-5934

County Commissioner
Corey S Davenport
182 New St
Woodbury, TN 37190-5234

County Commissioner
Kimela A Davenport
521 Old Manchester Rd
Woodbury, TN 37190-1330

County Commissioner
Jeannine A Floyd
3511 Murfreesboro Rd
Readyville, TN 37149-5035

County Commissioner
Randy D Gannon
3897 Jim Cummings Hwy
Woodbury, TN 37190-5864

County Commissioner
Ronnie Mahaffey Jr
230 Houston Hills Dr
Woodbury, TN 37190-7300

County Commissioner
Greg S Mitchell
6012 Jim Cummings Hwy
Woodbury, TN 37190-5853
Elected County Officials

County Executive
Brent Bush
107 William Bryant Dr.
Woodbury, TN 37190
(615) 563-2320
bbushcannoncoexecutive@gmail.com

Hwy Chief Admin Off
Earl Hancock
P.O. Box 260
Woodbury, TN 37190
(615) 563-4213
cannonhwy@dtccom.net

Administrator of Elections
Matt Tepley
301 West Main Street
Woodbury, TN 37190
(615) 563-5650

Assessor of Property
Angela Schwartz
200 West Main Street
Woodbury, TN 37190
(615) 563-5437
angela.schwartz@cot.tn.gov

Circuit Court Clerk
Katina L George
200 West Main Street
Woodbury, TN 37190
615-563-4461
katinageorge.cannoncircuit@gmail.com

Clerk & Master
Dana Davenport
200 West Main Street
Woodbury, TN 37190
(615) 563-5936
dana.davenport@tncourts.gov

Cannon County Officials

Director of Schools
William F. Curtis
301 West Main
Woodbury, TN 37190
(615) 563-5752

General Sessions Court Judge
Susan Melton
200 West Main Street
Woodbury, TN 37190
(615) 563-4461

Register of Deeds
Sandy K Hollandsworth
204 College Street
Woodbury, TN 37190
(615) 563-2041
shollandsworth@vcourthouse.net

Sheriff
Jackie D Young
110 Alexandria Drive
Woodbury, TN 37190
(615) 563-5934
sheriffyoung@gmail.com

Trustee
Norma J Knox
200 West Main Street
Woodbury, TN 37190
(615) 563-2282
cctrustee@dtc.com
Cannon County Government Offices
Public Square
Woodbury TN, 37190

Human Resources
325 Bryant Lane
Woodbury TN, 37190
(615)563-4051

County Clerk
Lana S Jones
200 West Main Street
Woodbury, TN 37190
(615) 563-4278

Public Safety

Law Enforcement
Cannon County Sheriff's Office
Sheriff Darrell Young
110 Alexander Drive
Woodbury, TN 37190
(615) 563-1000

Woodbury Police Department
965 West Main St.
Woodbury, TN 37190
(615) 563-5940

Chief of Police:
Tony Burnett
Woodbury Police Department
965 West Main Street
Woodbury, TN 37190
(615) 563-5940

Public Safety

Fire Departments
Auburntown Volunteer Fire Dept
Chief: Chris Blackburn
166 East Main Street
Auburntown, TN 37016
(615) 464-4213

Bradyville Volunteer Fire Dept
6469 Dug Hollow Road
Bradyville, TN 37026
(615) 765-5240

East Side Volunteer Fire Dept
Chief: Grady George Jr.
McMinnville Highway
Woodbury, TN 37190
(615) 563-4627

Kittrell Volunteer Fire Dept
8067 John Bragg Road
Readyville, TN 37149
(615) 890-8740

Midway Volunteer Fire Dept
11917 Jim Cummings Highway
Bradyville, TN 37026
(615) 765-5050

Mooretown Volunteer Fire Dept
473 Hollow Springs Road
Woodbury, TN 37190
(615) 765-5929
(615) 542-0282
Email: mooretownvfd@dtccom.net

Short Mountain Volunteer Fire Dept
5 Judge Purser Hill Road
Woodbury, TN 37190
(615) 563-9360

West Side Volunteer Fire Dept
Chief: John Naylor
3752 Murfreesboro Road
Readyville, TN 37149
(615) 563-9260
Health Care

Hospitals
Saint Thomas Stones River Hospital
324 Doolittle Road
Woodbury, TN 37190
(615) 563-4001

Home Health Services
SunCrest Home Health
828 McMinnville Highway
Woodbury, TN 37190
(615) 563-8665

Woodbury Home Health
110 West Main Street
Woodbury, TN 37190-1142
Phone: (615)-733-3600

Columbia Homecare
324 Doolittle Rd
Woodbury, TN 37190
(931) 563-1020

Dentist
Smile Creations
313 West High Street
Woodbury, TN 37190
(615) 563-2112

Woodbury Dental Partners
801 W Main St
(615) 563-2266
Woodbury, TN 37190

William, Jennings DDS
301 W Main St
(615) 563-5029
Woodbury, TN 37190

Clinics
Bernard Coomes, DC
313 West Main Street
Woodbury, TN 37190
(615) 563-4443

Williams Foot Center
Melvin L Williams, DPM
342 Doolittle Road
Woodbury, TN 37190

Community Wellness Clinic
Tabitha M. Smith – F.N.P.C
322 So. McCrary St.
Woodbury, TN 37190
(615) 563-7515

Mountain View Medical – Woodbury
James R. Spurlock, DO
Holly S Blankenship, DO
370 Doolittle Road, Ste 1
Woodbury, TN 37190
615-563-3245

Other health services
Woodbury Health and Rehabilitation Center
119 West High Street
Woodbury, TN 37190
(615) 563-5939

Durable Medical Equipment
Action DME
205 S McCravy St #3
Woodbury, TN 37190
(615) 933-3331
actiondme.com
Health Department
Tennessee Department of Public Health
https://www.tn.gov/health

Cannon County Health Department
301 W Main St #200
Woodbury, TN 37190
Phone: (615) 563-4243

Major Programs:
Child health care services
Children’s Special Services (CSS)
Family planning training
Health Education: provide educational services to patients, schools, and community groups upon request.
Immunization (shots and vaccines)
Nutrition, nutritional information and training
Paternity Acknowledgment
Prenatal care: testing and presumptive eligibility screening for TennCare and referral for prenatal care
Primary care
Sexually Transmitted Disease Control
Vital records: birth and death information is collected and sent to the State’s Office of Vital Records.
Women, infants and children (WIC): vouchers to buy nutritious foods are issued to women who are pregnant or breastfeeding and children under five years of age who are at nutritional risk and meet income guidelines. Training and educational services to WIC participants.

Major Employers
Saint Thomas Stones River Hospital
Cannon County School District
Cannon County Government
Upper Cumberland Human Resources
Hotlines

Immediate Emergencies
911

Cannon County Ambulance Service
(615) 563-5959

Emergency Management Agency (EMA)
(615) 563-2026

Tennessee Coalition Against Domestic & Sexual Violence
Phone: (615) 386-9406 or (800) 289-9018

Tennessee Child Abuse Hotline
(877) 237-0004

National Human Trafficking Hotline
(888) 373-7888

American Association of Poison Control Centers
(800) 222-1222

ASPCA Animal Poison Control Center
(888) 426-4435 or (855) 333-SAFE (7233)

Southern Migrant Legal Services
(615) 750-1200 or (866) 721-7828

National Domestic Violence Hotline
800-799-SAFE (7233)

Family And Children's Services
Phone: (615) 320-059

National Suicide Lifeline
(800) 273-8255
Community, Civic, Non-Profit Organizations

Basic needs assistance
Goodwill Industries
Address: 109 Lester St, Woodbury, TN 37190
Phone: (423) 629-2501
Services: Long-standing nonprofit chain with a range of pre-owned clothing, furniture, housewares & more.

Community food partners
Address: 331 Great Circle Road, Nashville, TN 37228
Phone: (615) 329-3491
Services: Provides food to agencies that feed senior citizens, poor children, struggling parents, the homeless, the disabled, and those recovering from addiction, allowing the agencies to devote more resources to caring for people and fewer resources on food; serves Rutherford and Cannon Counties.

Women’s services
S.A.V.E. Service & Violence Education
Address: P.O. Box 329, Woodbury, TN 37190
Services: Cannon County SAVE is a not for profit agency committed to stopping the cycle of domestic violence in our community. Save strives to eliminate barriers victims confront in seeking services for domestic violence and work to assist them in taking their lives back.

Senior Services
Cannon County Senior Citizen Center
609 Lehman Street
Woodbury, TN 37190
(615) 563-5304

Economic development organizations
Cannon County Chamber of Commerce
1424 John Bragg Hwy.
Woodbury, TN
(615) 563-2222
Cannon County Industrial Development Board
1424 John Bragg Highway
Woodbury, TN 37190
(615) 563-2222
UT Extension
Address: 614 Lehman Street, Woodbury, TN 37190
Phone: (615) 563-2554
Services: UT Extension delivers educational programs and research-based information to citizens throughout the state of Tennessee. Working with farmers, families, youth, and communities.
Community, Civic, Non-Profit Organizations, Cont.

Church outreach ministries
Ignite Missions & Ministries, Inc.
Woodbury, TN 37190
(615) 439-5839

Community service organizations
FCE Club
614 Lehman Street
Woodbury, TN 37190
(615) 563-2554

Gassaway Fire Department and Community Center
217 Gassaway Main Street
Woodbury, TN 37190
(615) 563-2944

Cannon County Historic Chamber of Commerce
1424 John Bragg Highway
Woodbury, TN 37190
(615) 563-2222

Mid-Cumberland Community Action Agency
Address: 630 West Lehman Street, Woodbury, TN 37190
Phone: (615) 563-5852
Services: Services include low-income home energy assistance; assistance for people who do not have prescription medical insurance; provides food items to eligible people and families; Head Start and Early Head Start.
Community Service Organizations, Cont.

Upper Cumberland Human Resource Agency
301 West Main Street
Address: Adams Memorial Building, Room 302, Woodbury, Tennessee 37190
Phone: (615) 563-2916
Services include low income home energy assistance; child and adult care food programs; home delivered meals; public transportation services, Head Start.

Children and Youth Organizations
R.E.A.C.H. (After School Program)
Address: 612 Lehman Street, Woodbury, TN 37190
Telephone: (615) 563-5518

We Care Cannon
Services: CCYD partners with We Care Cannon to provide children with free health physicals, school supplies, hygiene products, underwear, socks, and shoes to get their new school year started off right.

Child Advocacy Center
Address: 214 West Water Street, Woodbury, TN 37190
Phone: (615) 563-9915
Services: The Child Advocacy Center works as a multidisciplinary team with Department of Children's Services, law enforcement, mental health counselors, and the District Attorney's Office to investigate and prosecute child abuse, child sexual abuse, and drug endangered children cases, and help children and their families heal from the trauma; serves Rutherford and Cannon Counties.

Behavioral and Addiction Services
D.A.R.E. Program
Address: 965 West Main Street, Woodbury, TN 37190
Phone: (615) 563-5940

Addiction Campuses- Spring to Life
Address: 3180 Hill Creek Rd, Woodbury, Tennessee 37190
Phone: (615) 229-8193

Other groups
Woodbury Lions Club
Auburntown Lions Club
Masonic Lodge #774
American Legion Post 279
Cannon County Cattlemen’s Association
Cannon County Walking Horse Association
Parks and Outdoor Recreation

Headwaters Wildlife Management Area
Short Mountain State Natural Areas
Cannon County Recreation Center
Dillon Park, Woodbury
Brown-Spurlock Park, Woodbury

Education Resources

Libraries
Adams Memorial Library
212 College Street
Woodbury, TN 37190
(615) 563-5861

Auburntown Branch Library
43 E Main Street
Auburntown, TN 37016
(615) 464-2622

Public Schools
Auburn Elementary School
150 Vantrease Av
Auburntown, TN 37016
(615)464-4342

Cannon County High School
1 Lion Dr
Woodbury, TN 37190
(615)563-2144

Kittrell Elementary School
7801 Old Woodbury Hw
Readyville, TN 37149
(615)893-7604

Education Resources

Public Schools
Short Mountain Elementary School
5988 Short Mountain Rd
Woodbury, TN 37190
(615)563-4418

West Side Elementary School
3714 Murfreesboro Rd
Readyville, TN 37149
(615)563-4482

Woodbury Grammar Elementary School
530 West Adams St
Woodbury, TN 37190
(615)563-2220

Woodland Elementary School
8383 Jim Cummings Hw
Bradyville, TN 37026
(615)765-5498

Private Schools
Woodbury Sda School
Po Box 290
Woodbury TN, 37190
615-765-5330

Grace Emmanuel Christian Academy
P.O Box 86
Woodbury TN, 37190
615-542-3303
Child Care Centers

West Side Preschool
3714 Murfreesboro Rd
Readyville, TN 37149
(615) 563-4482

Woodbury Grammar Preschool
530 West Adams St
Woodbury, TN 37190
(615) 563-2220

Woodland Elementary Preschool
8383 Jim Cummings Highway
Bradyville, TN 37026
(615) 765-5498

Ymca Fun Company At Kittrell
7801 Woodbury Rd
Readyville, TN 37149
(615) 948-8068

Kittrell Elementary Pre-K
7801 Old Woodbury Pike
Readyville, TN 37149
(615) 893-7604

Woodbury Preschool
100 E. Water Street
Woodbury TN, 37190
(615) 563-5119

Children's Playhouse
Trail Street
Woodbury TN 37190
(615) 563-9540

Sandy's Day Care
Murfreesboro Road
Woodbury, TN 37190
(615) 563-4307

Woodbury Head Start
630 W. Lehman St
Woodbury, TN 37190
(615) 563-5852

Short Mountain Head Start
630 Lehman St
Woodbury, TN 37190
(615) 563-1090

Museums, Attractions, Festivals, and Events

James Stembridge & Friends Open Jam
A country music jam session set for the first and third Friday of each month at the Pocahontas community center

Farmer's Market
The Cannon County Farmers Market is located at the Cannon County Arts Center every Saturday beginning at 6:00am. Some Growers to set up on Tuesday afternoons between 3pm and 6pm.

The Arts Center of Cannon County
1424 John Bragg Highway
Woodbury, TN 37190
(615) 563-2787
Services: The award-winning Arts Center of Cannon County is a 501C3 not for profit corporation. It is a unique model for rural arts organizations. Situated in an underserved rural area in a town of 2,000 and a county of 12,000, The Arts Center annually commands a worldwide audience of 40,000 through its facility and over 100,000 through web sites, publications, and recording projects.

Old Feed Store Antique Mall
Small town Shopping and retail antique store.
Museums, Attractions, Festivals, and Events, Cont.

Short Mountain Distillery
Short Mountain Distillery is Tennessee's sixth distillery making authentic small-batch, Tennessee Moonshine, Bourbon and other fine products from corn grown & stone-milled on our 300 acre working farm in Cannon County, Tennessee.

Bird Song Studio
Recording studio set in Woodbury TN

Churches and Religious Organizations
Cannon Community Church
Church of Christ at Elkins
First Baptist Church
Full Gospel Assembly Church
Grace Assembly of God
Ivy Bluff Church of Christ
Leoni Church of Christ
Plainview Baptist Church
Sycamore Baptist Church
Woodbury Church of Christ
Woodbury Church of God
Woodland Baptist Church
Pleasant View Baptist Church
Pleasant View Church of Christ
Church of Christ

Churches and Religious Organizations
United Methodist
Sugar Tree Knob Church of Christ
West High Church of Christ
Wood Church of Christ
Woodbury SDA Church
Dillion Street Independent Missionary Baptist Church
Iconium Church of Christ
Mount Ararat Church of Christ
Short Mountain Church of God
New Short Mountain United Methodist Church
Woodburys Pentecostals
Burt Baptist Church
Center Hill Baptist Church
Sources

City-data.com
Internet research
Cannon county chamber of commerce
https://cannontn.com
Cannon County Wikipedia
https://en.wikipedia.org/wiki/Cannon_County,_Tennessee
Tennessee Encyclopedia
https://tennesseeencyclopedia.net/entries/cannon-county
Cannon county TN website
http://www.cannoncounty.net
County Technical assistance service – Cannon county
http://www.ctas.tennessee.edu/county/cannon
To update or add information, complete the form below

Name of Organization:

Contact Name:

Phone #: Fax #:

Email:

Web page:

Mailing Address:

List services:

Is there a cost for services _____ Yes _____ No

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

If yes, please explain

What are your business hours:

Any additional information needed to understand your resource?

Submit updated information to: Shan.Williams@ascension.org
Community Health Needs Assessment for Cannon County

Completed by Saint Thomas Stones River Hospital in partnership with:

Stratasan