

II. INTRODUCTION

Mission Statement:

The Bedford County Health Council is to act as an independent advisory organization whose purpose is to facilitate the availability and affordability of quality health care within the South Central Tennessee Public Health Region.

Definition of Community Diagnosis:

A simple definition used by the North Carolina State Center for Health and Environmental Statistics of a community diagnosis is “a means of examining aggregate health and social statistics, liberally spiced with knowledge of the local situation in order to determine the health needs of the community.” By using this definition, we acknowledge that significant input from residents of the local area is essential to performing a community diagnosis effectively. Although a great deal of quantified health data can be obtained from the State, the process will only be successful if local citizens are fully involved and are comfortable with the eventual findings. This is why the formation and effective utilization of county health councils are vital in achieving accurate results.

History/Summary:

Bedford County, Tennessee was the second county initiated to the Community Diagnosis process in the South Central Region. Community members formed the council on September 10, 1996. The initiating meeting was held at the Shelbyville Inn and was hosted and facilitated by the South Central Region’s Community Development staff.

Those present at the initiating meeting were given an overview of the Community Diagnosis process. The group was informed of the intent of the Department of Health to improve their assessment and planning by giving residents an opportunity to assess health problems at the local level. Everyone present was given the opportunity to become a member of the Bedford County Health Council by indicating their interest on a questionnaire provided by the Community Development staff. They were also encouraged to nominate any community member who might be interested in serving on such a council. The Council elected to meet on the second Tuesday of each month.

The first meeting was scheduled for October 14, 1996. At the first meeting, the Council elected Morton Renegar, retired pharmacist, to serve as Chairman. Morton Renegar resigned as chair after serving eight months but remained a council member. Price Pass was elected as the new chair at the July 15, 1997 meeting. Lynne Farrar was elected vice-chair. Under the leadership of Mr. Pass and Mrs. Farrar, the Council completed their community diagnosis and began a community assessment using the *Communities That Care* model. The Community Development staff analyzed and prepared health data from several sources for the review of the Health Council. A survey was distributed throughout