

## Cocke County Selected Economic Indicators

### Labor Force Estimates (1996)

Total Labor Force: 3,240

Male: 860

Female: 1,380

Unemployment Rate: 10.4

### Tax Structure

County Property Tax Rate per \$100: \$2.65

Per Capita Income (1994): \$14,139

### Health Care Resources

	County	Region	State
Persons per Primary Care Physician	1,625	1,776	1,053
Persons per Nurse Practitioner	3,250	7,429	7,134
Persons per Physician Assistant	0	15,053	18,664
Persons per Registered Nurse	164	178	106
Females 10-44 per OB/GYN	7,332	4,509	2,100
Persons per Dentist	4,178	2,414	1,853
Persons per Staffed Hospital Bed	552	491	245
Percent occupancy in community hospitals	59.2	57.3	57.7
Person per Staffed Nursing Home Bed	142	119	135
Percent occupancy in community nursing homes	98.5	96.4	93.6
Physician shortage area for OB	YES		
Physician shortage area for Primary Care	NO		

Note: Manpower data are 1996; shortage areas, 1995; facilities, 1994.

#### Hospital

Baptist Hospital of Cocke County—74 beds

#### Nursing Homes

Baptist Convalescent Center—56 beds

Mariner Health of Newport—150 beds

## B. County Process—Overview

### The Assessment Process

The Tennessee Department of Health has made a strong commitment to strengthening the performance of the public health system in performing those population-based functions that support the overall health of Tennessee's assessment, assurance and policy development.

Community Diagnosis is a public-private partnership to define the county's priority health problems and to develop strategies for solving these problems. The Cocke County Health Council in collaboration with the East Tennessee Regional Health Office conducted an extensive assessment of the status of health in Cocke County. The health council contains community representatives from various geographic locations, social-economic levels, and ethnic groups. An extensive amount of both primary and secondary data were collected and reviewed as the first step in the process. Major issues of concern identified by the community were perception and knowledge of health problems, which were important factors in analyzing the data. Council members identified major issues of concern and each issue was then ranked according to size, seriousness, and effectiveness of intervention (Table 15).

### Resources

A focus will be placed on identifying existing resources. Cooperation of various agencies could allow redirection of such resources to target identified priorities. Additional resources will be sought for the development of intervention and implementation strategies identified by the health council.