Hardin County Community Health Council

Community Needs Assessment

1998

Volume I
A report on the county's health status and strategies developed by the community

Community Development
Tennessee Department of Health
295 Summar Avenue
Jackson, TN

TABLE OF CONTENTS

	Page
INTRODUCTION	
Mission Statement	3
County Description	3
Local Economy	3
Medical Community	4
DEMOGRAPHICS	
Population Growth	4
Population Categories	4
Households	5
Education	5
Employment	6
Poverty Status	6
HISTORY OF THE PROCESS	
Community Diagnosis	7
Council Make-up	8
Data Gathered	8
HEALTH ISSUES AND PRIORITIES	
Community Surveys	9
Health Concerns	9
Prioritization Method	9
PRIORITIES WITH JUSTIFICATION	
Community Health Priorities	9
Community Resources	10
COUNCIL MEMBERS	13

INTRODUCTION

Mission Statement

The Mission of the Community Health Council is to determine the health needs of the community and develop a plan of action for improving the health status of people in Hardin County, Tennessee.

COUNTY DESCRIPTION

History

Hardin County was founded in 1819 by Colonel Joseph Hardin who served in the Revolutionary War. The county seat of Savannah was originally known as Rudd's Ferry. Savannah, known as a great shipping center for freight and crossties, later gained a reputation based on its historical homes and antebellum mansions. Hardin County has three other incorporated towns: Crump, Counce/Pickwick, and Saltillo.

The county is divided by the Tennessee River. The heritage of Hardin County revolves around the river which provides one of the south's most spectacular water recreation areas. Hunting, fishing, hiking, golf and pleasure boating are favorite local pastimes.

The county was the site of the pivotal Battle of Shiloh during the War Between the States. Each year more than one-half million people tour Shiloh National Military Park.

LOCAL ECONOMY

Hardin County enjoys a dynamic economy fueled by an abundance of natural resources and outdoor recreational activities. Tenneco Packaging, Angelica Manufacturing, Parris Manufacturing, Clayton Homes, and Cross County Apparel are the leading employers in the county.

The local economy is linked directly to the quality of life associated with the Tennessee River. World class fresh water fishing attracts anglers from across the country. Pickwick Lake, formed by TVA's Pickwick Dam, is one of the premier fishing spots in the United States. Sailing and other recreational water sports are also enjoyed. The area's five golf courses, including Shiloh Falls, also attract visitors from across the southeast.

Agriculture remains an important part of the economy. Leading crops include corn, cotton, milo, okra, peppers, soybeans, and wheat. Ball clay for the ceramic industry is found in abundance as are gravel and cert. High quality white sand for use in glass, golf courses and beaches is also abundant.

Demographics of Hardin County

MEDICAL COMMUNITY

Hardin County General Hospital, a county-owned facility, is a full-service 58 bed, not-for-profit general acute care facility offering a wide range of services on both an inpatient and outpatient basis. Services include general surgery, physician services, outpatient clinics, radiology, laboratory, respiratory therapy and physical therapy. The hospital operates a 24 hour emergency room, intensive and cardiac care and obstetrical services. Community education services include childbirth education programs, dietary and diabetic counseling, and CPR classes. The hospital also offers a hospital-based home health agency, nursing home and home medical equipment.

Quinco Mental Health offers a variety of services from early childhood intervention to stress management. Home health agencies provide services to those in need of special treatment. The Hardin County Health Department offers a wide range of services including family planning, prenatal care, WIC, nutritional counseling, child immunizations, Childrens' Special Services, STD testing, adolescent pregnancy prevention programs, child safety seats and health education services. Physician services available in the community include general surgery, obstetrics/gynecology, family practice, pediatrics, internal medicine, podiatry, chiropractic and radiology.

DEMOGRAPHICS

Total Population

1990	**22,633**
1980	**22,280**
1970	**18,212**

POPULATION CATEGORY

Hardin County

	Number	%	TN Percent
Sex			
Female	**12,880**	**52**	**52**
Male	**11,866**	**48**	**48**
Race			
White	**23,470**	**95**	**83**
Black	**1,276**	**5**	**16**
Other	**115**	**-**	**-**

Demographics of Hardin County

HOUSEHOLDS

Total Number of Households: 8,726

	County	Region	State
Percent of households that are family households	76	74.7	72.7
Percent of households that are families headed by a female with no husband present	10.1	11.8	12.6
Percent of households that are families headed by a female with no husband present and with children under 18 years	4.9	6.4	6.9
Percent of households with the householder 65 and up	26.4	27.5	21.8

EDUCATION

	County	Region	State
Number of persons age 25 and older	14,892	294,457	3,139,066
Percent of persons 25 and up that are high school graduates or higher	54.8	56.5	67.1
Percent of persons 25 and up with a bachelor’s degree or higher	6.1	7.6	16.0

Demographics of Hardin County

EMPLOYMENT

	County	Region	State
Number of Persons 16 and Older	17,730	352,668	3,799,725
Percent In Work Force	57.9	59.6	64.0
Number of Persons 16 and Older in Civilian Work Force	10,274	209,376	2,405,077
Percent Unemployed	6.5	7.4	6.4

POVERTY STATUS

	County	Region	State
Per capita income in 1989	$9,654	$9,850	$12,255
Percent of persons below the 1989 poverty level	20.1	19.0	15.7
Families with children under 18 years, percent with income in 1989 below poverty level	24.7	23.8	20.7
Percent of persons age 65 years and older with income in 1989 below the poverty level	31.2	27.4	20.9

Sources: U.S. Department of Commerce, Bureau of the Census, 1990 Census of Population General Population Characteristics, Tennessee, and 1990 Census of Population and Housing, Summary Social, Economic, and Housing Characteristics Tennessee.

COMMUNITY NEEDS ASSESSMENT

HISTORY OF THE PROCESS

In 1997 local health care providers and community leaders in Hardin County began an on-going dialogue about the challenges facing the community's health care delivery system. It was becoming apparent that the pressures of reform including changes in Medicaid, AFDC, and reimbursement rates for rural hospitals were beginning to strain the community's limited resources. Local leaders responded by forming a Community Health Council to serve as a mechanism for evaluating the health status of the community and pooling resources to address shared problems. The Health Council conducted a comprehensive assessment of the health status of Hardin County residents and developed a strategy to address the needs identified.

COMMUNITY DIAGNOSIS

The "Community Diagnosis" process developed by the Tennessee Department of Health was the basis for the assessment. Community Diagnosis is a data-driven assessment process which helps communities identify and prioritize health problems. Information regarding the community's health status, in addition to data available from the State, was collected and analyzed. Primary data was collected through questionnaires administered throughout the community. Particular attention was paid to ensure that surveys reflected the geographic and ethic diversity of the community. A separate questionnaire was administered in the school system to ensure that the health concerns of the county's young people were considered. Data from a behavioral risk factor survey conducted by the University of Tennessee was also reviewed. Secondary data available from the Department of Health and other sources was then studied in order to focus discussion. Using this approach a Community Health Problems List was developed. Once a comprehensive list of problems had been compiled, the problems were prioritized based on size, seriousness, and effectiveness of interventions. Work groups then developed specific goals and began the process of designing appropriate interventions.

"Health Departments across the country have not developed good assessment capabilities, but we must concentrate on this function if we are to enter the 21st century with the data and system to recognize health problems as well as resolve them."

Fredia Wadley, M.D., Commissioner
Tennessee Dept of Health
February 1995

COMMUNITY NEEDS ASSESSMENT

COUNCIL MAKE-UP

The Hardin County Community Health Council consists of a diverse group of community leaders which is representative of the community in terms of geography, race, profession, and institutional factors. A list of council representatives is attached as Appendix A.

DATA GATHERED

Demographic and Socioeconomic Data

Population Demographics
Life Cycle of Residents
Labor Force Status
Marital Status
Poverty Status
Family/Household Status

Health Professionals Data

Primary Care Physicians
OB/GYN Physicians
Internists
Pediatricians
Specialists
Dentists
Nurse Practitioners/Nurse Midwives

Health and Vital Statistics Data

Fertility Data
Cancer
Adolescent Pregnancy Rates
Diabetes
Live Births by Age and Race
Heart Conditions
Birthweight Trends
Hypertension
Infant Deaths by Race
HIV/Aids
Leading Causes of Death
Stress
Mothers Exhibiting Maternal Risk Factors
Tobacco Use
Motor Vehicle Mortality
Hospital Discharge Data
Accidental Death Mortality
Violent Deaths
Sexually Transmitted Diseases
Obesity

Family Data

Domestic Violence Patterns
Child Abuse and Neglect
Alcohol and Drug Abuse

COMMUNITY NEEDS ASSESSMENT

Community Health Surveys

The Council supplemented published data by conducting a survey of community residents regarding the health status of the community. Approximately 500 surveys were collected and analyzed. Results from a behavioral risk factor survey conducted by the University of Tennessee were also carefully reviewed.

Community Health Concerns Identified

- **Heart Disease and Stroke**
- **Cancer**
- **After School Programs**
- **Alcohol/Drug Abuse**
- **Child Abuse/Neglect**
- **Nutrition**
- **Motor Vehicle Accidents**
- **Domestic Violence (Victim's Assistance)**
- **Access to OB/Prenatal Services**
- **Lack of Affordable Day Care**

PRIORITIZED PROBLEMS

The Council discussed an increasing range of pressing health problems that the community must address with limited resources. To direct those resources well, the Council established priorities from among the problems identified. For this task the Council chose a modification of the method developed by J.J. Hanlon who is a nationally known public health professional. This method sets priorities on the basis of the size and seriousness of the problem in conjunction with knowledge about the effectiveness of potentially available interventions. Each problem being considered was given a numerical score on a scale of 0 to 10 based on the size of the population affected, the seriousness of the problem and the effectiveness of potential interventions. The following formula was used for the calculation of total scores (D) where A = Size; B = Seriousness, and C = Effectiveness of Interventions,

$$D = A + (2B) \times C$$

Community Health Priorities 1997-98

Heart Disease and Stroke
Access to OB/Prenatal Care

The Community Health Council selected two problems from the list of health concerns to be addressed during the first project year. These community health priorities are heart disease/stroke and access to obstetrical/prenatal care. When selecting these priorities for 1997-98, the Council worked through the entire sequence of interacting factors that contribute to each community health problem identified. Links between problems, barriers to effective intervention and the availability of resources were all important considerations.

Community Resources

HEART DISEASE AND STROKE

- Hardin County Health Department
- Schools
- Churches
- Hardin County General Hospital
- Quinco Community Mental Health Center
- University of Tennessee Extension Services
- Local Physicians
- American Heart Association
- Resource Mothers

ACCESS TO OB/PRENATAL CARE

- Hardin County General Hospital
- Hardin County Health Department
- Department of Human Services
- Local Physicians
- University of Tennessee Extension Services

Heart Disease and Stroke

Heart disease and stroke account for fifty percent of all Hardin County Deaths. In 1996, one hundred twenty-two lives were lost to heart disease and stroke in Hardin County. Based on four year age adjusted rates, 1992-96, Hardin County ranks 15th worst among Tennessee's ninety-five counties in terms of the rate of death from heart disease. In a community survey conducted by the Health Council, 85 percent of respondents identified heart conditions as a community health problem. Hypertension and stress, which are related to heart disease and stroke were also identified as community health priorities by more than 80 percent of respondents. Similar results were found from the Behavioral Risk Factor Survey conducted by the University of Tennessee.

Access to OB/Prenatal Services

Access to obstetrical, prenatal and delivery services has been historically limited in rural communities and Hardin County is no exception. With only one OB/GYN physician in the community, expectant mothers do not receive adequate prenatal care. It is not unusual for new mothers to deliver outside the county, thereby, eliminating an important revenue stream for the local hospital. According to the Tennessee Department of Health, only 57 percent of births to residents of Hardin County occurred in the county.

Actions and Strategies

Subcommittees were formed to serve as working groups for each priority identified and were expanded to include individuals with knowledge and experience related to each problem. Each subcommittee was charged with the responsibility of developing a plan of action which included objectives, activities and evaluation criteria.

Appendix A

Hardin County
Community Health Council

Charlotte Burns, Administrator
Hardin County General Hospital

Joe Barker
County Executifve

Jack Cherry
Mayor of Savannah

Bobby Cromwell
Schools Superintendent

Betty Warmath
Tenneco

Gigi Woods-Davis, M.D.
Local Physician

Rev. Billy Allegood
Local Pastor

Dan Record, Director
County Health Dept.

Bob Polk, City Manager
City of Savannah

John Harrison
Local Optician

Mildred White
County DHS

Cathy Turner
Hardin County General

Linda Walkup, R.N.
County Health Dept.

Pat Bond,
Quinco Mental Health Ctr.

Bo Higgonbottom
Local Pharmacist

Jennifer Melson
City of Savannah

Janice Smith
Consumer

Becky Holt
Hardin County Skills

Polly Dinsmore
Retired

Phyllis McDaniel, R.N.
School Nurse

Kay Blakney,
Quinco Mental Health Ctr.