



Macon Community Hospital

Macon County, Tennessee

2024 – 2027

Community Health Needs Assessment

Approved by Board: September 3rd, 2024



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Executive Summary

Macon Community Hospital (“MCH” or the “Hospital”) performed a Community Health Needs Assessment (CHNA) together in partnership with Ovation Healthcare (“Ovation”) to determine the health needs of the local community and an accompanying implementation plan to address the identified health needs. This CHNA report consists of the following information:

- 1) a definition of the community served by the Hospital and a description of how the community was determined;
- 2) a description of the process and methods used to conduct the CHNA;
- 3) a description of how the Hospital solicited and considered input received from persons who represent the broad interests of the community it serves;
- 4) commentary on the 2021 CHNA Assessment and Implementation Strategy efforts;
- 5) a prioritized description of the significant health needs of the community identified through the CHNA along with a description of the process and criteria used in identifying certain health needs as significant and prioritizing those significant health needs; and
- 6) a description of resources potentially available to address the significant health needs identified through the CHNA.

Data was gathered from multiple well-respected secondary sources to build an accurate picture of the current community and its health needs. A broad community survey was performed to review and provide feedback on the prior CHNA and to support the determination of the Significant Health Needs of the community in 2024.

The Significant Health Needs identified by Macon Community Hospital are:

- Access to Behavioral Health Services: Mental Health, Drug/Substance Abuse
- Health Prevention, Education, and Screening: Cancer, Prevention Services, Smoking/Vaping/Tobacco Use
- Access to Healthcare Services: Affordability, Types of Services

In the Implementation Strategy section of the report, the Hospital addresses these areas through identified programs and resources with metrics included for each health need to track progress towards improved community health outcomes.

Community Health Needs Assessment

Overview

CHNA Purpose

A CHNA is part of the required documentation of “Community Benefit” under the Affordable Care Act for 501(c)(3) hospitals and fulfills requirements for accreditation for many health and public health entities. However, regardless of status, a CHNA provides many benefits to an organization. This assessment provides comprehensive information about the community’s current health status, needs, and disparities and offers a targeted action plan to address these areas, including programmatic development and partnerships.

Organizational Benefits

- Identify health disparities and social determinants to inform future outreach strategies
- Identify key service delivery gaps
- Develop an understanding of community member’s perceptions of healthcare in the region
- Support community organizations for collaborations

CHNA Process

1 

Survey the Community

Develop a CHNA survey to be deployed to the broad community in order to assess significant health priorities.

2 

Data Analysis

Review survey data and relevant data resources to provide qualitative and quantitative feedback on the local community and market.

3 

Determine Top Health & Social Needs

Prioritize community health and social needs based on data gathered from the community survey, secondary sources, and organizational input.

4 

Implementation Planning

Build an implementation plan to address identified needs with actions, goals, and metrics to track progress toward improved outcomes.

Process & Methods

This assessment takes a comprehensive approach to determining community health needs and includes the following methodology:

- Several independent data analyses based on secondary source data
- Augmentation of data with community opinions through a community-wide survey
- Resolution of any data inconsistency or discrepancies by reviewing the combined opinions formed by local expert advisors and community members

Data Collection and Analysis

This assessment relies on secondary source data, which primarily uses the county as the smallest unit of analysis. Most data used in the analysis is available from public internet sources and proprietary data. Any critical data needed to address specific regulations or developed by the community members cooperating in this study are displayed in the CHNA report appendix.

All data sources are detailed in the appendix of this report with the majority of the data used for this assessment coming from:

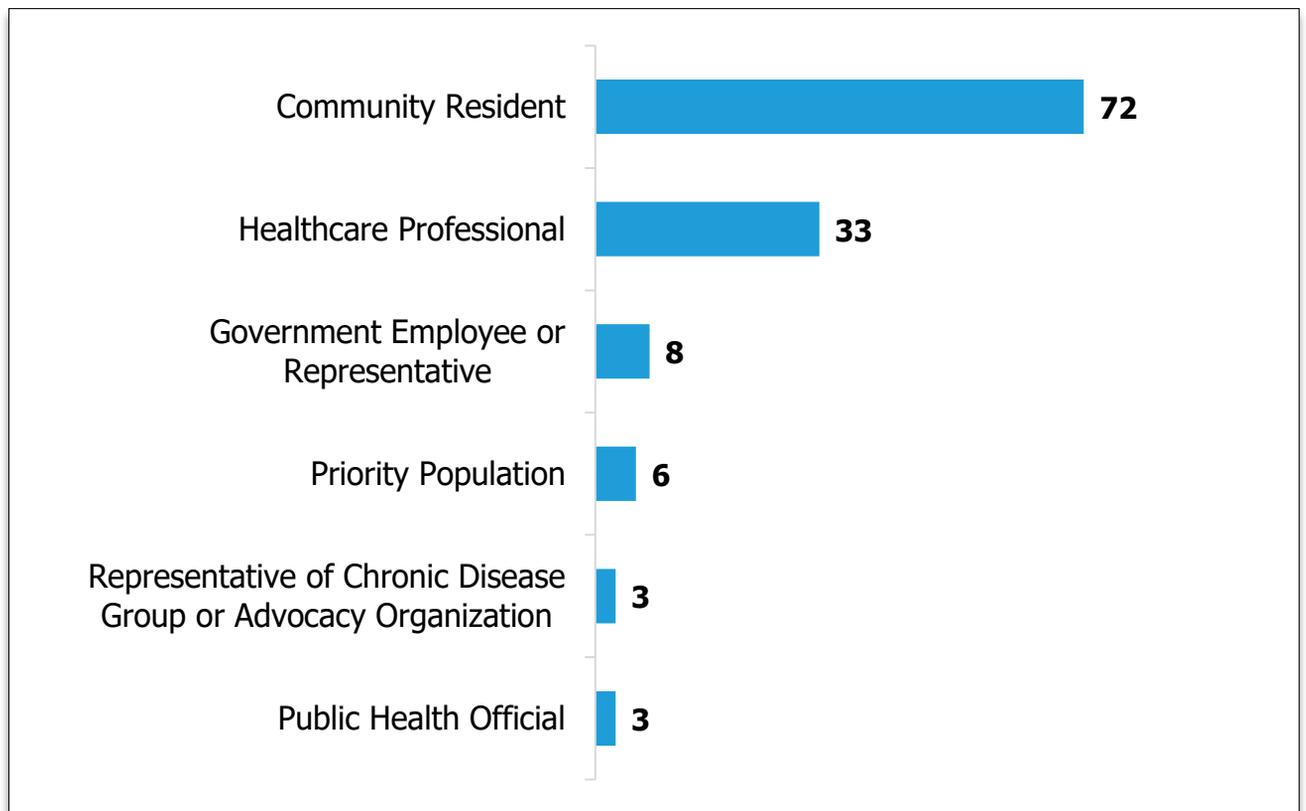
- County Health Rankings 2024 Report
- Tennessee Department of Health
- Centers for Medicare & Medicaid Services - CMS
- Centers for Disease Control and Prevention – CDC

A standard process of gathering community input was utilized. In addition to gathering data from the above sources, a CHNA survey was deployed to local expert advisors and the general public to gain input on local health needs and the needs of priority populations. Local expert advisors were local individuals selected according to criteria required by the Federal guidelines and regulations and the Hospital's desire to represent the region's economic, racial, and geographically diverse population. One hundred eight (108) survey responses from community members were gathered between March and April 2024.

Community Input

Input was obtained from the required three minimum federally required sources and expanded to include other representative groups. The Organization asked all those participating in the written comment solicitation process to self-identify into any of the following representative classifications, which are detailed in the appendix to this report. Additionally, survey respondents were asked to identify their age, race/ethnicity, and income level to ensure a diverse range of responses were collected.

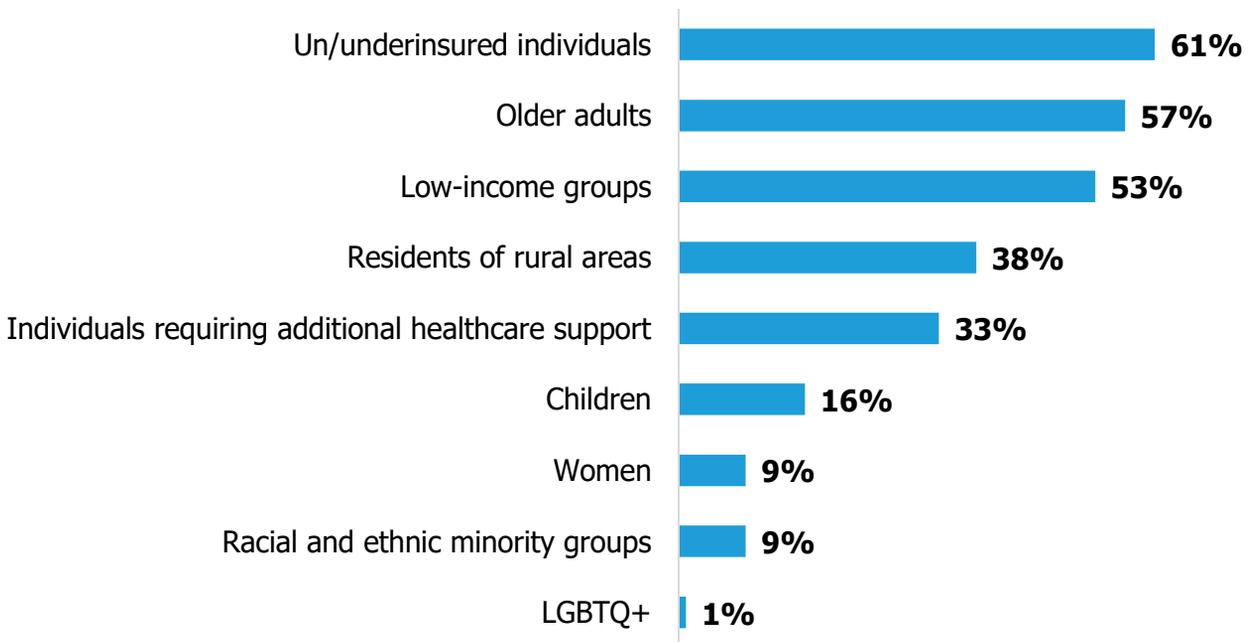
Survey Question: Please select all roles that apply to you (n=108)



Input on Priority Populations

Information analysis augmented by local opinions showed how Macon County compares in terms of primary and chronic needs and other issues of uninsured persons, low-income persons, and minority groups. Respondents commented on whether they believe certain population groups (“Priority Populations”) would benefit from additional focus and elaborated on their key needs.

Survey Question: Which groups would you consider to have the greatest health needs (rates of illness, trouble accessing healthcare, etc.) in your community? (please select your top 3 responses if possible)



Local opinions of the needs of Priority Populations, while presented in their entirety in the appendix, were abstracted into the following “take-away” bulleted comments:

- The top three priority populations identified were un/underinsured individuals, older adults, and low-income groups.
- Summary of unique or pressing needs of the priority groups identified by the respondents:

Affordable
Healthcare

Lack of
Transportation

Access to
Specialists

Input on 2021 CHNA

The Hospital considered written comments received on the prior CHNA and Implementation Strategy as a component of the development of the 2024 CHNA and Implementation Strategy. Comments were solicited from community members to provide feedback on any efforts and actions taken by MCH since the 2021 CHNA and Implementation Plan were conducted. These comments informed the development of the 2024 CHNA and Implementation Plan and are presented in full in the appendix of this report. The health priorities identified in the 2021 CHNA are listed below with a selection of survey responses.



Behavioral Health



Affordability



Accessibility



Chronic Disease Management

"They are always active in the community and promoting the low-cost or free services they have going on at the time. They are part of the driving force of the Macon County Health Council and have done more than many of the other Health Councils I have seen."

"Macon Community Hospital now has a Behavioral Health Clinic established to help with the needs of the community. They continue to open Specialty Clinics for other disease management."

Impact of Actions to Address the 2021 Significant Health Needs

- Continued to provide free and discounted screening services and educational programs throughout the year to promote health and increase access to affordable care
- Implementation of the outpatient Behavioral Health Clinic including therapy, case management services, and crisis intervention
- Expansion of specialty service offerings, availability, and imaging services to increase local access to healthcare

Community Served

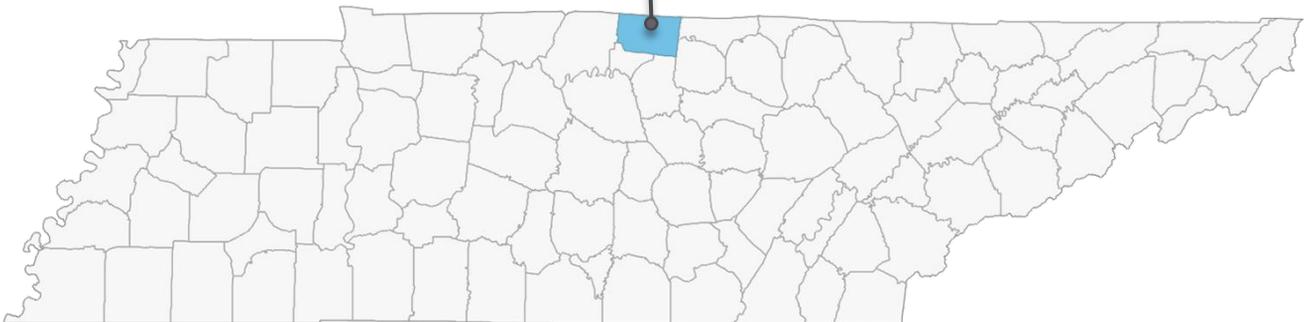
For the purpose of this study, the service area is defined as Macon County in Tennessee. The data presented in this report uses this county-based service area to present population health data wherever possible. The Hospital has identified Macon County as its service area for this assessment as 84% of MCH inpatient discharges came from this area in 2022.

Service Area

Macon County, Tennessee

Total Population: **26,229**

ZIP	City
37083	Lafayette
37150	Red Boiling Springs



Source: County Health Rankings 2024 Report

Service Area Demographics

	Macon County	Tennessee
Demographics		
Total Population	26,229	7,051,339
Age		
Below 18 Years of Age	25%	22%
65 and Older	16%	17%
Race & Ethnicity		
Non-Hispanic White	91%	73%
Non-Hispanic Black	1%	16%
American Indian or Alaska Native	1%	1%
Asian	1%	2%
Native Hawaiian or Other Pacific Islander	0%	0%
Hispanic	6%	6%
Gender		
Female	51%	51%
Male	49%	49%
Geography		
Rural	76%	34%
Non-Rural	24%	66%

Source: County Health Rankings 2024 Report

Methods of Identifying Health Needs

Collect & Analyze

Analyze existing data and collect new data



737 indicators collected from data sources



108 surveys completed by community members

Evaluate

Evaluate indicators based on the following factors:



Worse than benchmark



Identified by the community



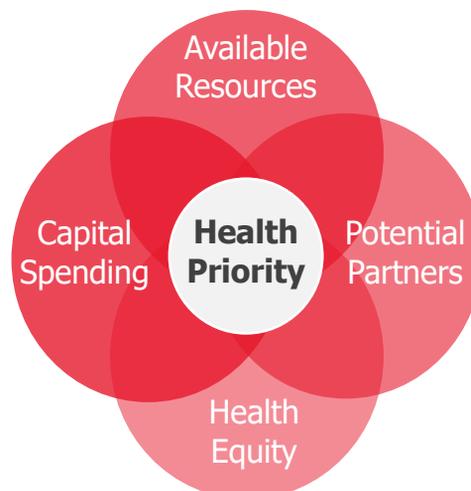
Impact on health disparities



Feasibility of being addressed

Select

Select priority health needs for implementation plan



Prioritizing Significant Health Needs

The survey respondents participated in a structured communication technique called the "Wisdom of Crowds" method. This approach relies on the assumption that the collective wisdom of participants is superior to the opinion of any one individual, regardless of their professional credentials.

In the Hospital's process, each survey respondent had the opportunity to prioritize community health needs. The survey respondents then ranked the importance of addressing each health need on a scale of 1 (not at all) to 5 (extremely), including the opportunity to list additional needs that were not identified.

The ranked needs were divided into "Significant Needs" and "Other Identified Needs." The determination of the breakpoint — "Significant" as opposed to "Other" — was a qualitative interpretation where a reasonable breakpoint in rank order occurred. The Hospital analyzed the health issues that received the most responses and established a plan for addressing them.

Ranked Health Priorities

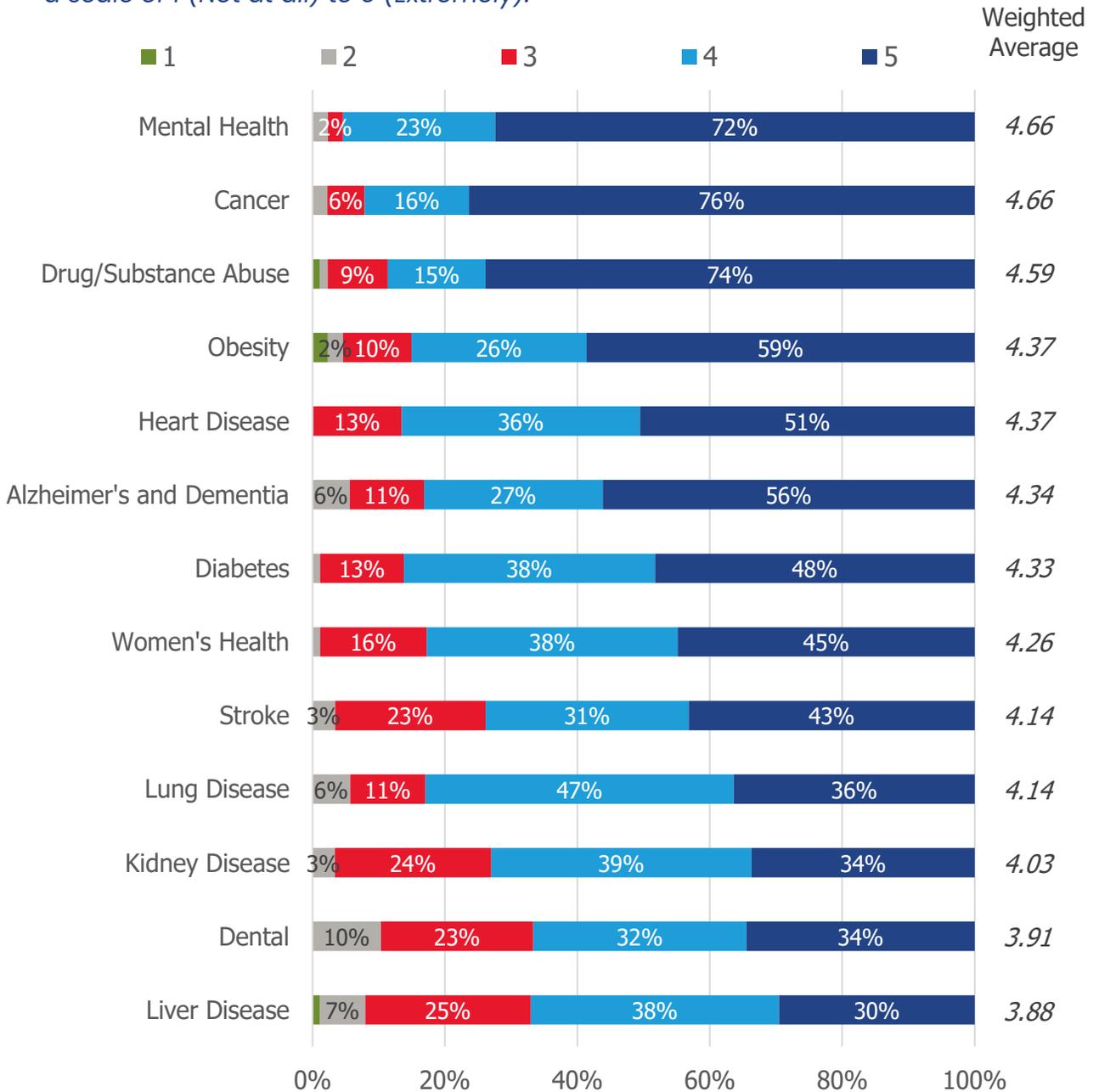
The health priority ranking process included an evaluation of health factors, community factors, and personal factors, given they each uniquely impact the overall health and health outcomes of a community:

- Health factors include chronic diseases, health conditions, and the physical health of the population.
- Community factors are the social drivers that influence community health and health equity.
- Behavioral factors are the individual actions that affect health outcomes.

In our community survey, each broad factor was broken out into more detailed components, and respondents rated the importance of addressing each component in the community on a scale from 1 to 5. The results of the health priority rankings are outlined below:

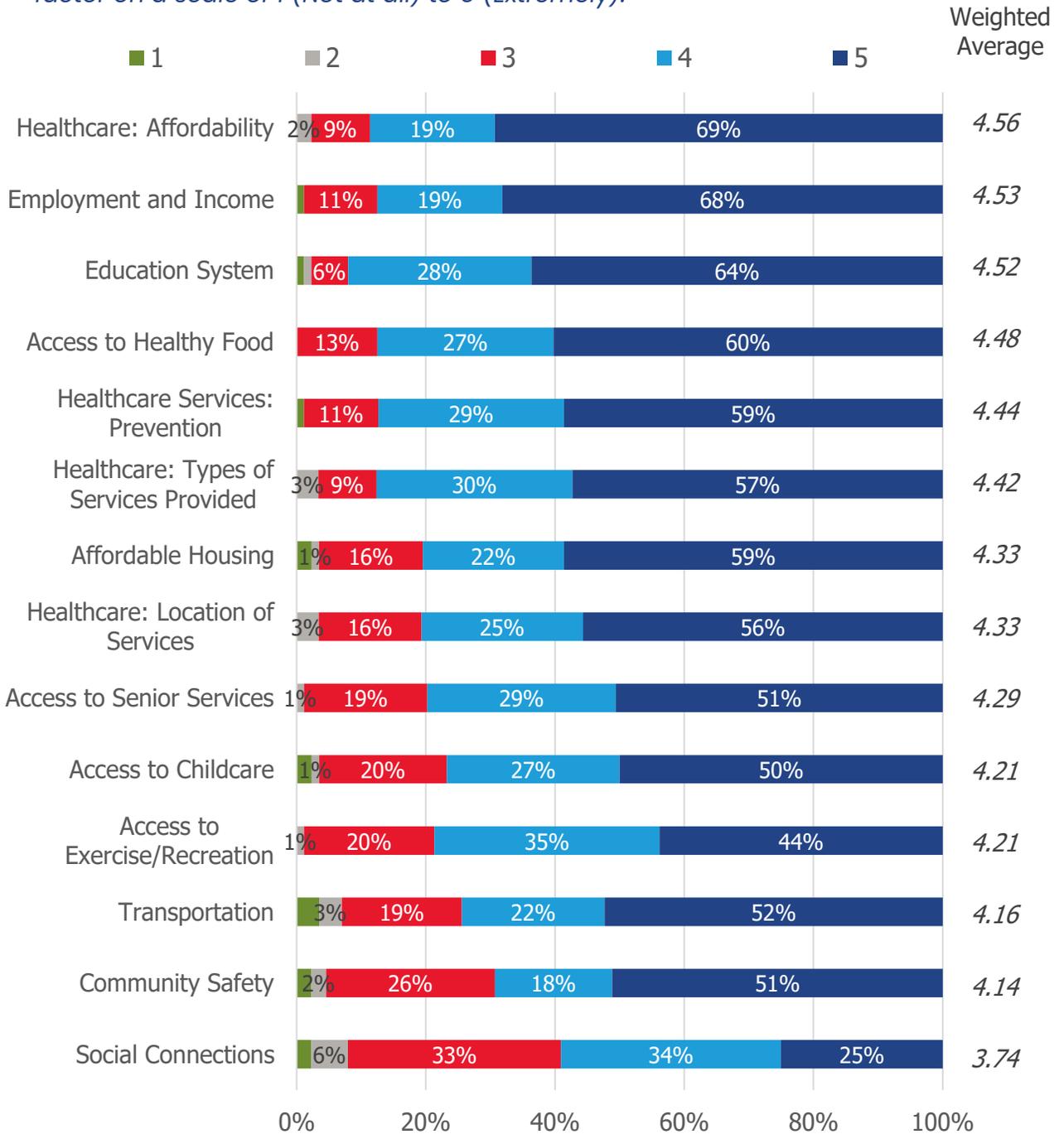
Health Factors

Survey Question: Please rate the importance of addressing each health factor on a scale of 1 (Not at all) to 5 (Extremely).



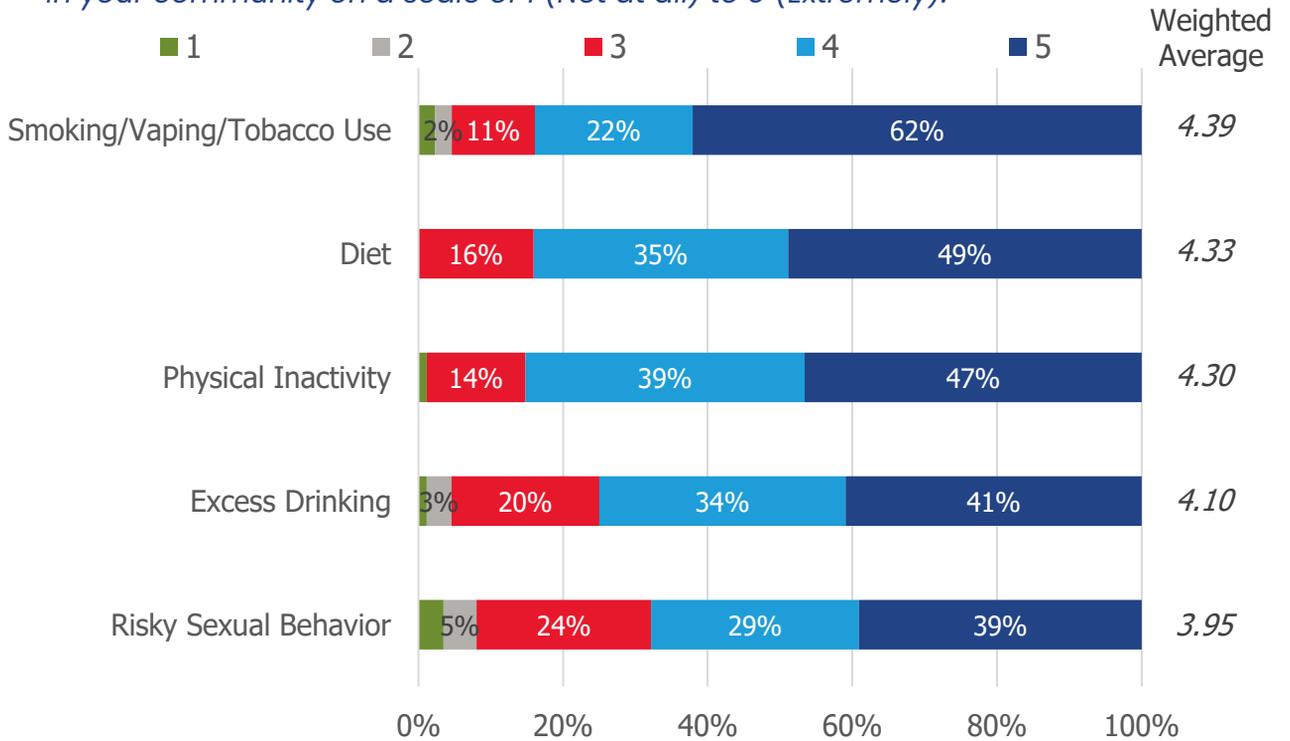
Community Factors

Survey Question: Please rate the importance of addressing each community factor on a scale of 1 (Not at all) to 5 (Extremely).



Behavioral Factors

Survey Question: Please rate the importance of addressing each behavioral factor in your community on a scale of 1 (Not at all) to 5 (Extremely).



Overall Health Priority Ranking

Health Issue	Weighted Average (out of 5)	Combined 4 (Important) and 5 (Extremely Important) Rating
Mental Health	4.7	95%
Cancer	4.7	92%
Drug/Substance Abuse	4.6	89%
Healthcare: Affordability	4.6	89%
Employment and Income	4.5	88%
Education System	4.5	92%
Access to Healthy Food	4.5	88%
Healthcare: Prevention Services	4.4	87%
Healthcare: Types of Services Provided	4.4	88%
Smoking/Vaping/Tobacco Use	4.4	84%
Heart Disease	4.4	87%
Obesity	4.4	85%
Alzheimer's and Dementia	4.3	83%
Diabetes	4.3	86%
Healthcare: Location of Services	4.3	81%
Affordable Housing	4.3	80%
Diet	4.3	84%
Physical Inactivity	4.3	85%
Access to Senior Services	4.3	80%
Women's Health	4.3	83%
Access to Exercise/Recreation	4.2	79%
Access to Childcare	4.2	77%
Transportation	4.2	74%
Lung Disease	4.1	83%
Stroke	4.1	74%
Community Safety	4.1	69%
Excess Drinking	4.1	75%
Kidney Disease	4.0	73%
Risky Sexual Behavior	4.0	68%
Dental	3.9	67%
Liver Disease	3.9	67%
Social Connections	3.7	59%

Community Health Characteristics

This section highlights health status indicators, outcomes, and relevant data on the health needs in Macon County. The data at the county level is supplemented with benchmark comparisons to the state data.

Behavioral Health

Mental Health

Mental health issues were the #1 community-identified health priority with 95% of respondents rating it as important to be addressed in the community (important is categorized as a 4 or 5 rating on the community survey).

Poor mental health disproportionately affects people in priority populations like racial and ethnic minority groups and residents of rural areas due to a lack of access to providers and an inclusive behavioral health workforce ([NAMI](#)).

While it's difficult to measure the true rate of mental illness in the community, the following data points give insight into the health priority:

	Macon County	Tennessee
Suicide Mortality Rate per 100,000 (2021)	20.3	17.0
Poor Mental Health Days past 30 days (2021)	6.6	5.8
Population per 1 Mental Health Provider (2023)	13,115	532

Source: CDC Final Deaths, County Health Rankings 2024 Report

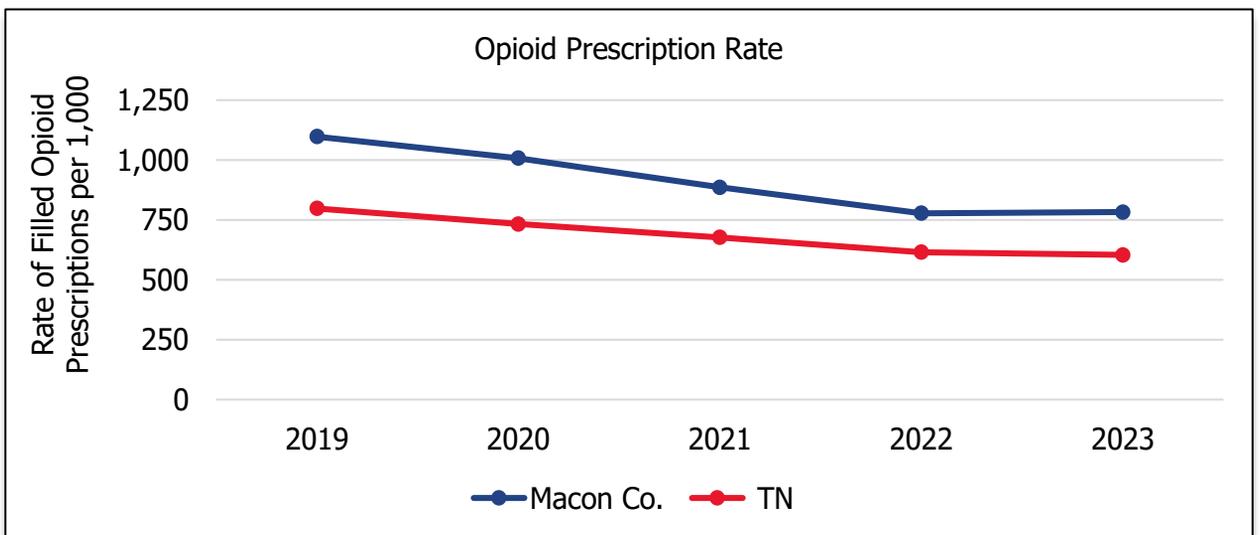
Drug, Substance, and Alcohol Use

Drug and substance abuse was identified as the #3 health priority with 89% of survey respondents rating it as an important factor to address in the community.

Macon County has lower rates of drug-related overdose deaths, excessive drinking, and alcohol-impaired driving deaths compared to the state. Alternatively, Macon County has significantly higher rates of adult smoking than the state on average. While opioid prescriptions have decreased in Macon County over the past 5 years, the rate of filled opioid prescriptions is still greater than the Tennessee average.

	Macon County	Tennessee
Drug-Related Overdose Deaths per 100,000 (2020-2022)	30.6	43.2
Excessive Drinking (2021)	15%	17%
Alcohol-Impaired Driving Deaths (2017-2021)	10%	24%
Adult Smoking (2021)	27%	20%

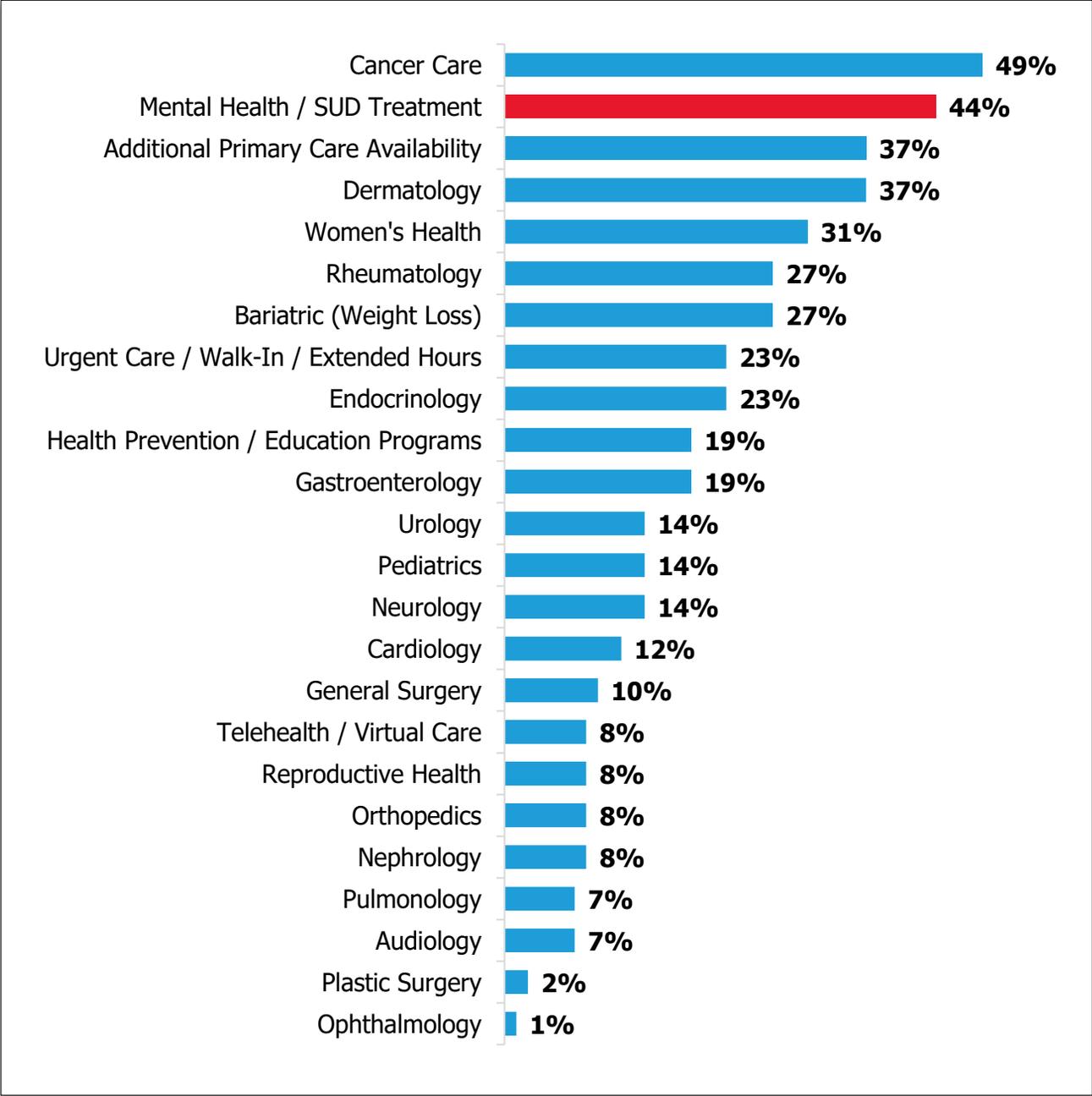
Source: County Health Rankings 2024 Report



Source: Tennessee Department of Health

In the community survey, respondents were asked to identify what healthcare services and programs they would like to see available in their community. Forty-four percent (44%) of survey respondents said they would like to see more mental health and substance use disorder (SUD) treatment available in Macon County.

Survey Question: What additional services/offerings would you like to see available in Macon County? (select all that apply)



Chronic Diseases

Cancer

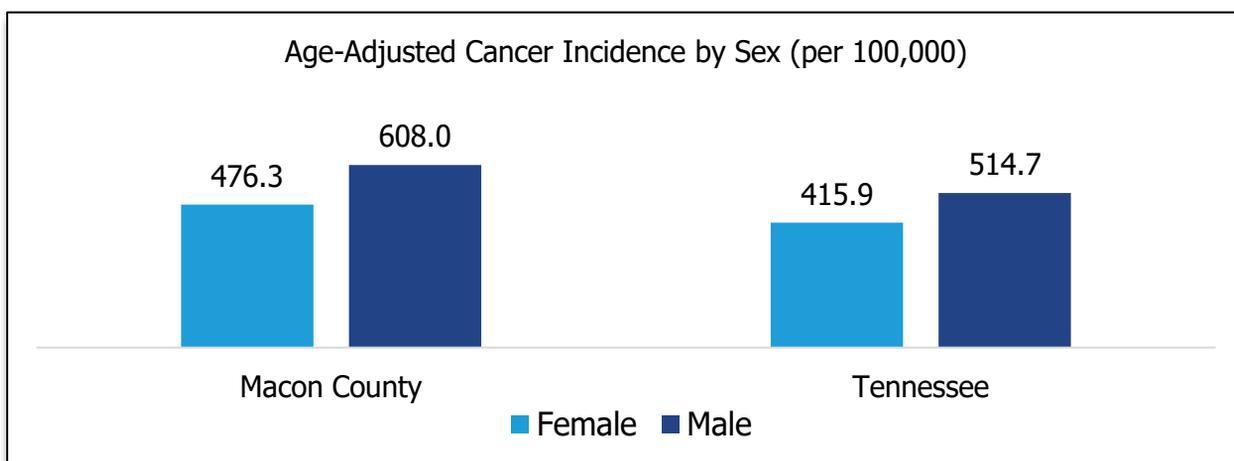
Cancer was identified as the #2 community health issue with 92% of survey respondents rating it as important to address in the community. Cancer is the 2nd leading cause of death in Macon County ([CDC Final Deaths](#)). Additionally, 49% of survey respondents said they would like to see additional access to cancer care in Macon County.

Macon County has a higher cancer mortality rate than the state overall. In both Macon County and Tennessee, men have a higher incidence of cancer than women, though the disparity between incidence rate and sex is greater in Macon County than in the state.

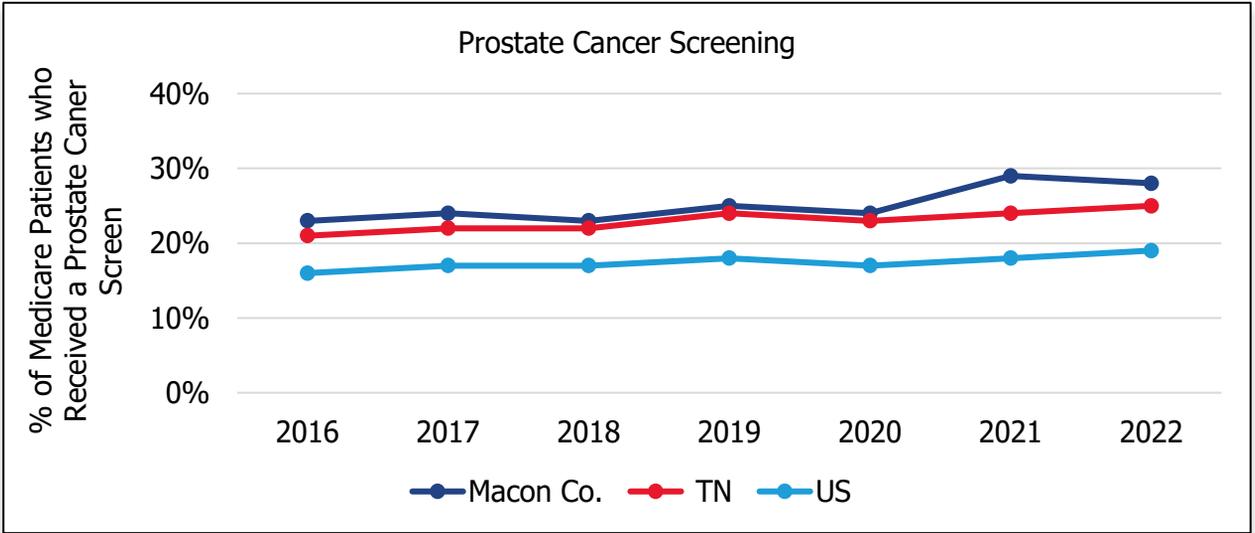
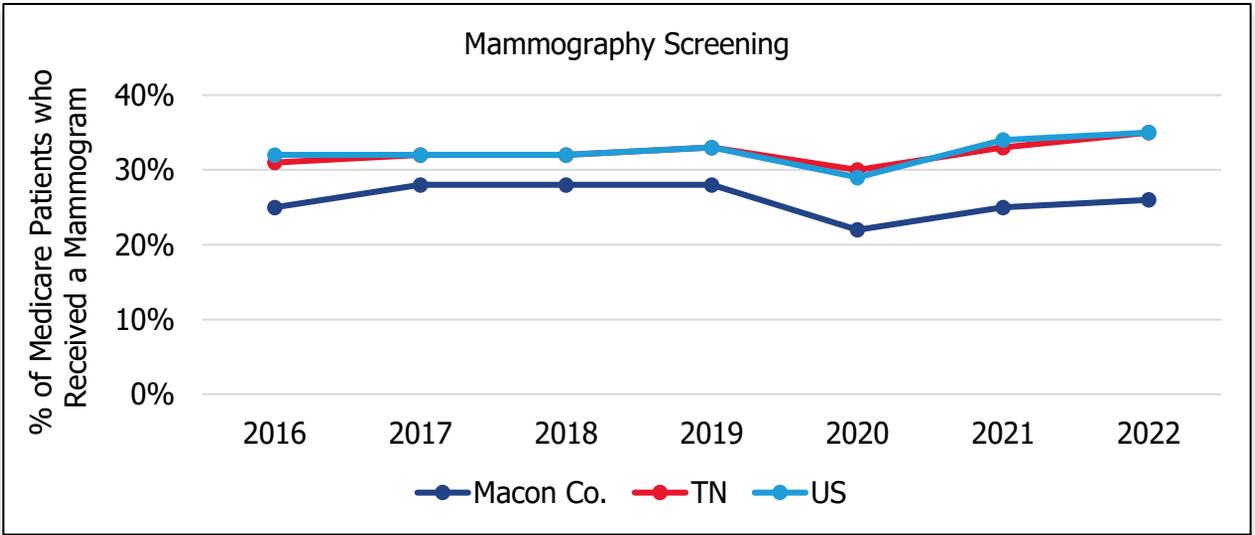
Rates of Medicare enrollees (women age 65+) who have received a mammogram in the past year are lower in Macon County than in Tennessee, though rates have remained relatively stable over the past decade with a dip downward during the COVID-19 pandemic. Among Medicare enrollees (men age 65+), Macon County has had a higher prostate cancer screening rate in the past year compared to both the state and the US.

	Macon County	Tennessee
Cancer Incidence Rate Age-Adjusted per 100,000 (2016-2020)	530.8	457.7
Cancer Mortality Rate per 100,000 (2021)	220.9	166.3

Source: CDC, National Cancer Institute



Source: National Cancer Institute

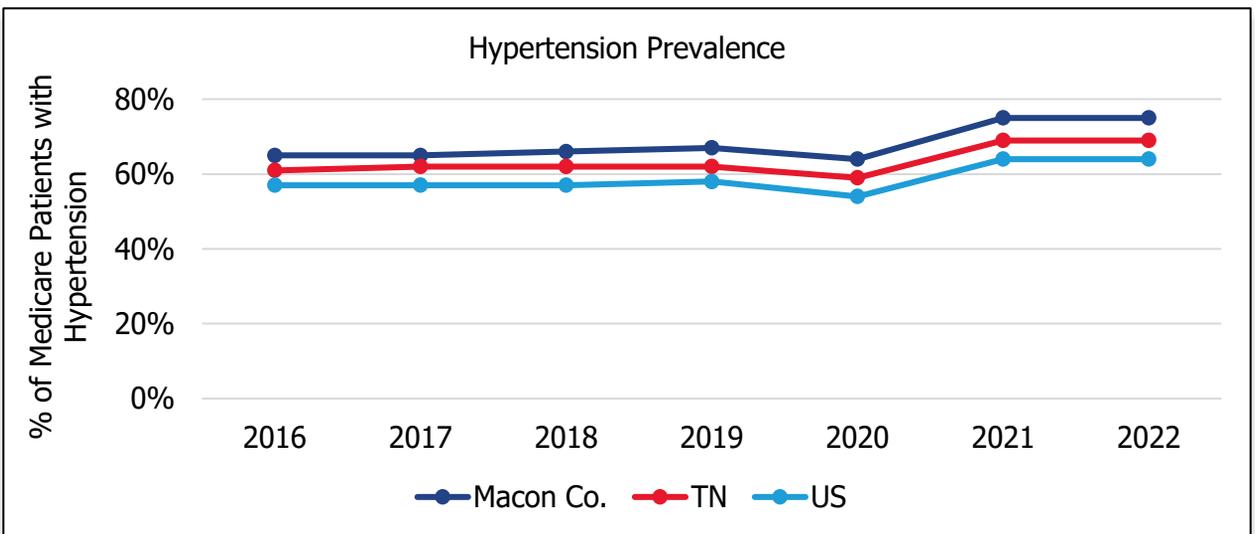
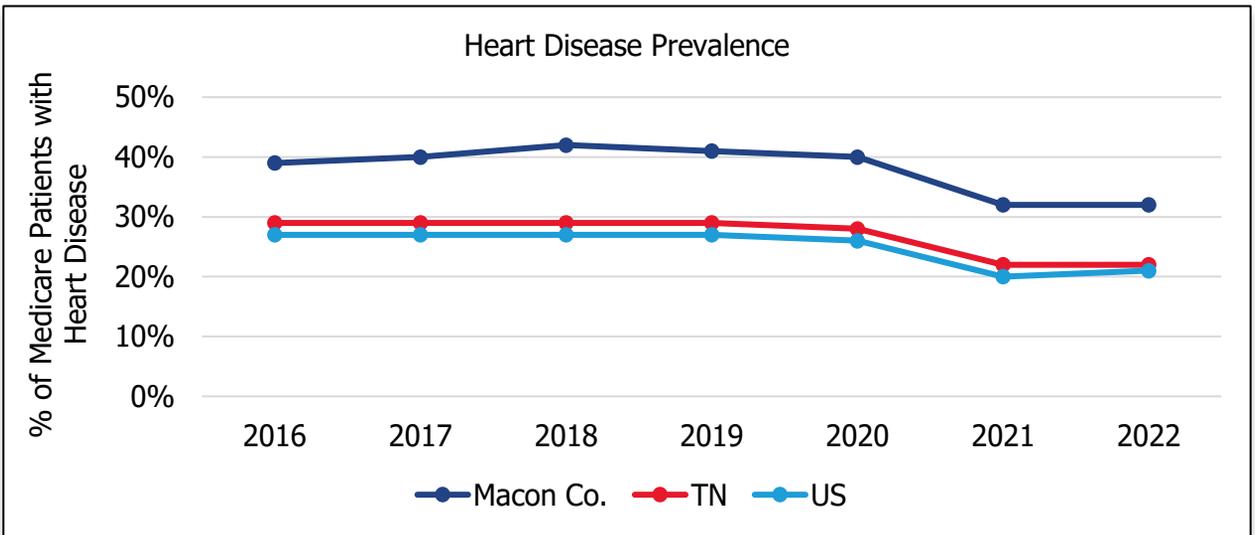


Source: Centers for Medicare & Medicaid Services: Mapping Medicare Disparities by Population

Cardiovascular Health

Heart disease is the leading cause of death in Macon County and the county has a higher mortality rate than the state (259.2 compared to 223.8 *per 100,000* respectively) (CDC Final Deaths).

In the Medicare population, Macon County has a higher prevalence of both heart disease and hypertension than Tennessee. Additionally, it is important to evaluate health disparities in the community for cardiovascular health outcomes, as racial and ethnic minority groups are more likely to die of heart disease than their white counterparts ([CDC](#)).



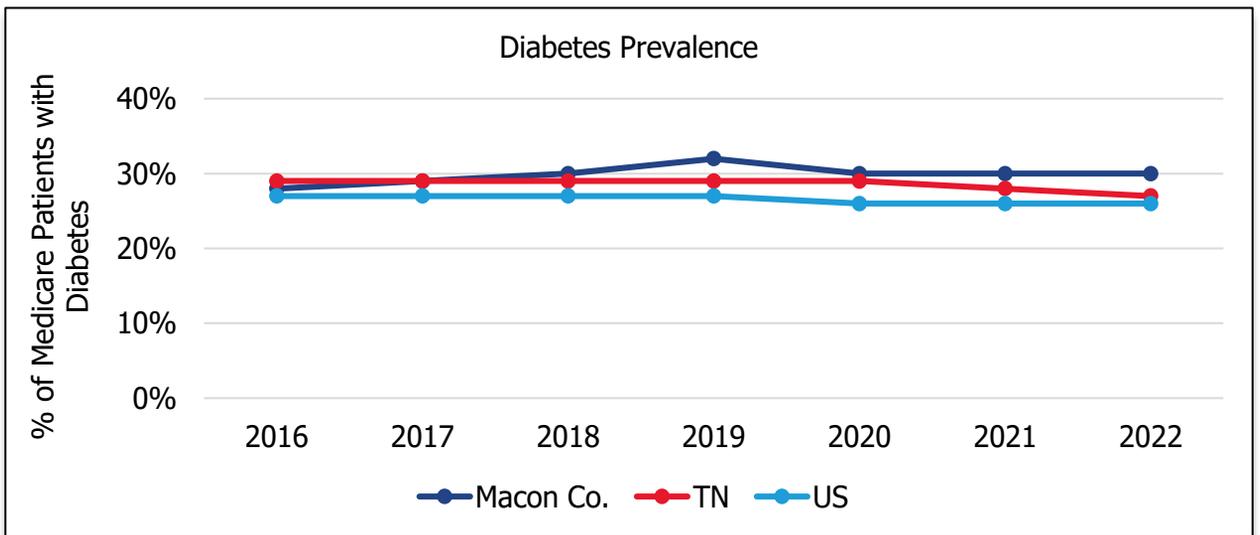
Source: Centers for Medicare & Medicaid Services: Mapping Medicare Disparities by Population

Diabetes

The prevalence of diabetes in Macon County is similar to Tennessee though the county sees a lower diabetes mortality rate compared to the state ([CDC Final Deaths](#)). When evaluating the Medicare population, Macon County has a slightly higher prevalence of diabetes compared to the state though rates have remained stable over the past decade.

	Macon County	Tennessee
Diabetes Mortality Rate per 100,000 (2021)	25.9	31.4
Diabetes Prevalence (2021)	12%	12%

Source: CDC Final Deaths, County Health Rankings 2024 Report



Source: Centers for Medicare & Medicaid Services: Mapping Medicare Disparities by Population

Obesity and Unhealthy Eating

In Macon County, adults have similar rates of obesity as in Tennessee on average. Additionally, the county sees higher rates of physical inactivity than the state, since they also see lower rates of access to exercise opportunities (proximity to a park or recreation facility). Obesity, physical inactivity, and diet are well-established risk factors for type 2 diabetes development and other chronic diseases ([American Diabetes Association](#)).

	Macon County	Tennessee
Adult Obesity (2021)	37%	36%
Limited Access to Healthy Foods (2019)	7%	9%
Physical Inactivity (2021)	33%	27%
Access to Exercise Opportunities (2023)	49%	67%

Source: County Health Rankings 2024 Report

Healthcare Access

Access & Affordability

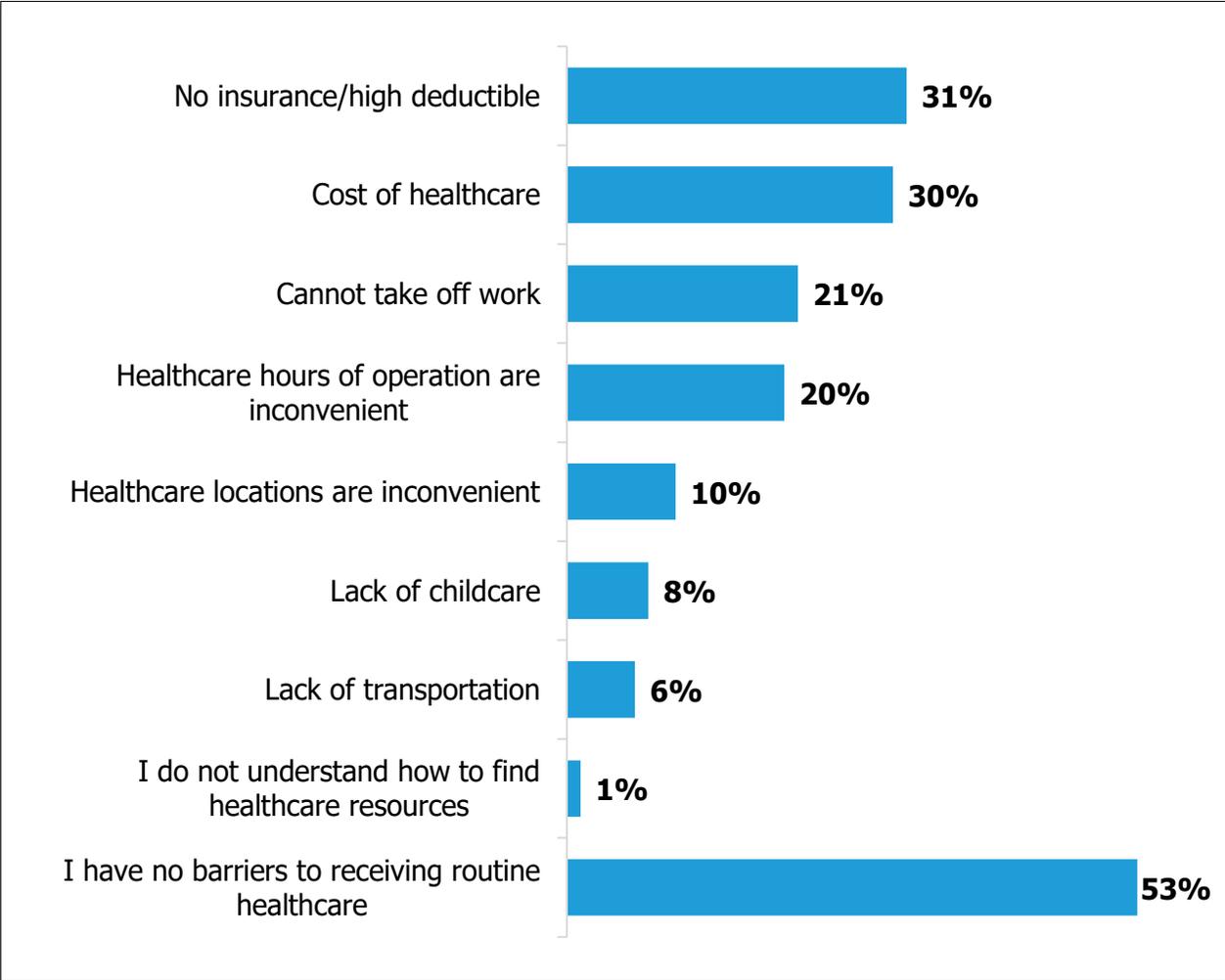
Access to affordable and quality healthcare services is a key driver to improved health outcomes, economic stability, and health equity. In the community survey, 37% of respondents said they would like to see additional primary care availability in the county. Macon County has a lower household income than the Tennessee average and also has a higher uninsured population than the state. Additionally, Macon County has less access to primary care physicians, mental health providers, and dentists as shown in the following provider ratios and health professional shortage areas (HPSA).

	Macon County	Tennessee
Uninsured Population (2021)	13%	12%
Median Household Income (2022)	\$56,817	\$65,231
Population per 1 Primary Care Physician (2021)	5,140	1,437
Population per 1 Dentist (2022)	6,557	1,779

Source: County Health Rankings 2024 Report

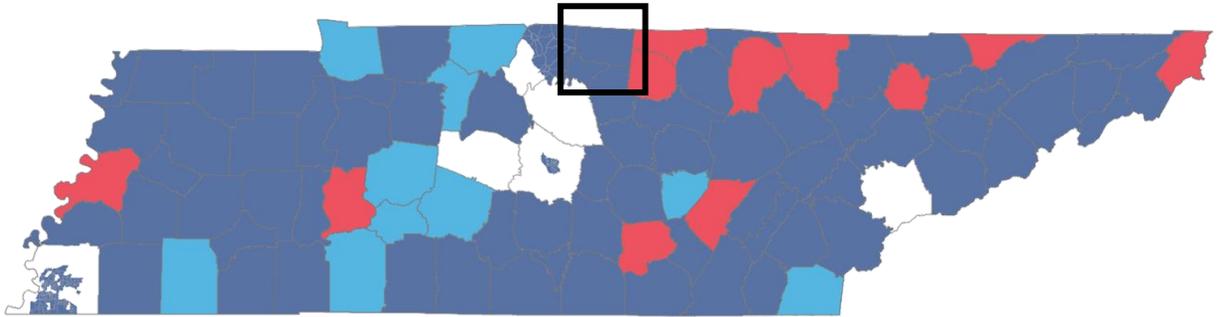
When survey respondents were asked about their barriers to care, affordability of healthcare was the top barrier with 31% saying no insurance/high deductible is a barrier and 30% saying the cost of healthcare is a barrier.

Survey Question: What barriers keep you or anyone in your household from receiving routine healthcare? (Please select all that apply)

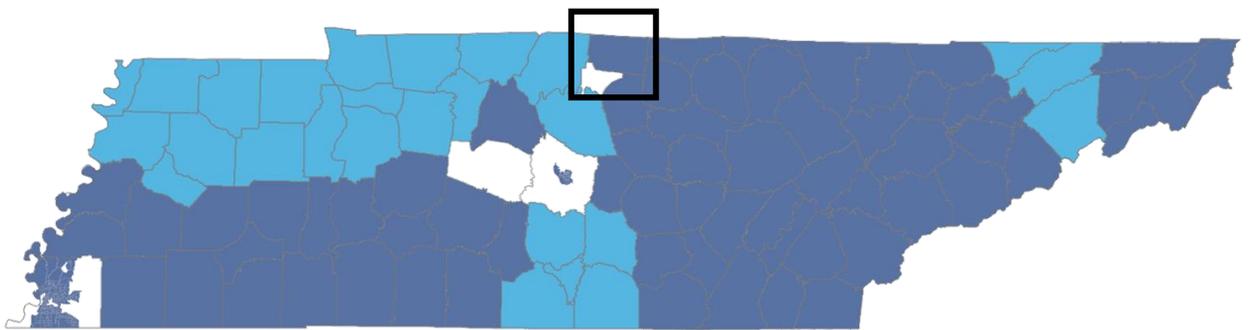


Tennessee Health Professional Shortage Areas (HPSA)

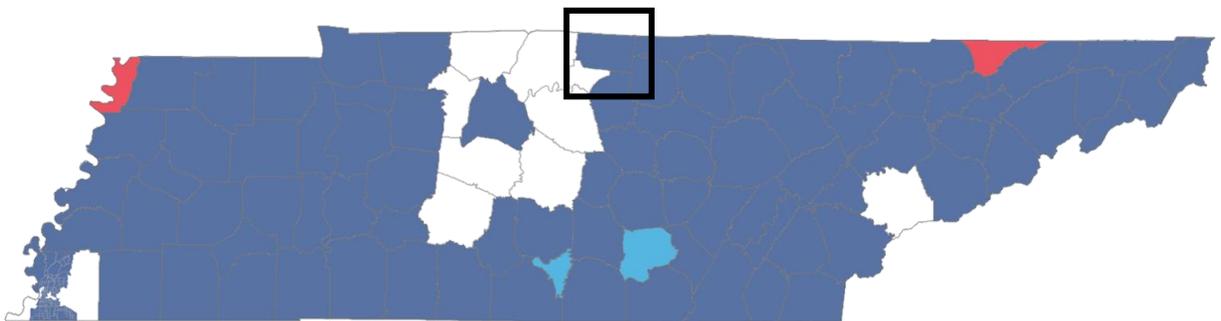
Primary Care



Mental Health



Dental



 HPSA
Population

 Geographic
HPSA

 High Needs
Geographic HPSA

Source: data.hrsa.gov

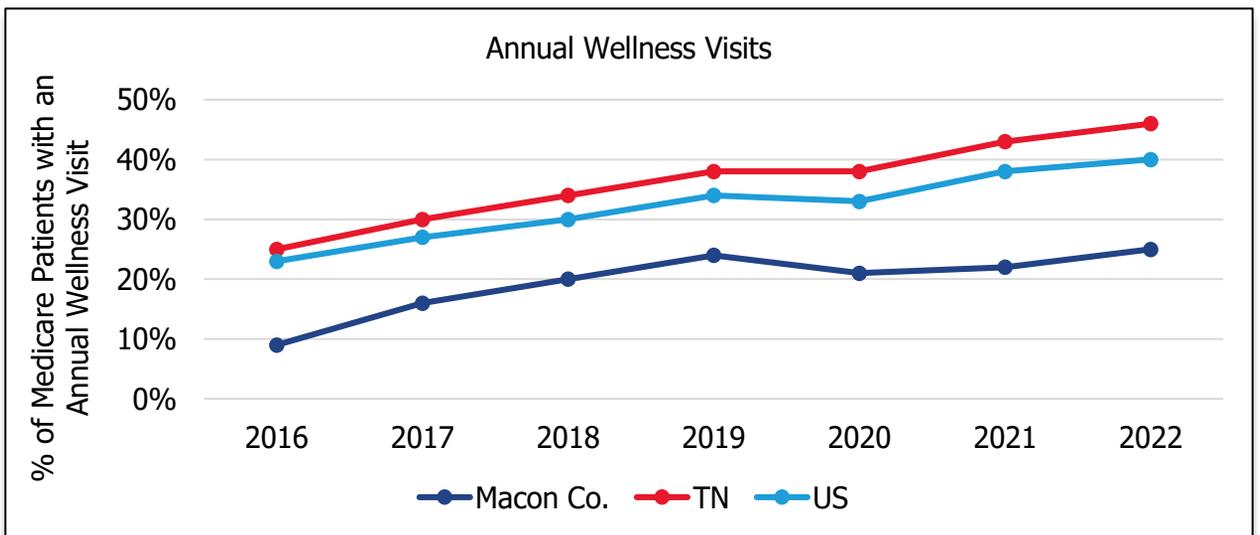
Prevention Services

Prevention services including routine check-ups, health screenings, and education can help prevent or detect diseases early when they are easier to treat. Preventive care reduces the burden on healthcare systems by preventing unnecessary hospital stays and costly care. In the community survey, 19% of respondents said they would like to see additional health prevention and education programs available in the community.

Macon County has lower annual mammography screening and flu vaccine adherence rates than the state and also sees higher rates of preventable hospital stays (hospital stays for ambulatory-care sensitive conditions). While the rate of annual wellness visits in the Medicare population is lower in Macon County than in the state, rates have been increasing in recent years.

	Macon County	Tennessee
Preventable Hospital Stays per 100,000 (2021)	6,254	2,896
Mammography Screening (2021)	32%	42%
Flu Vaccination (2021)	44%	47%

Source: County Health Rankings 2024 Report



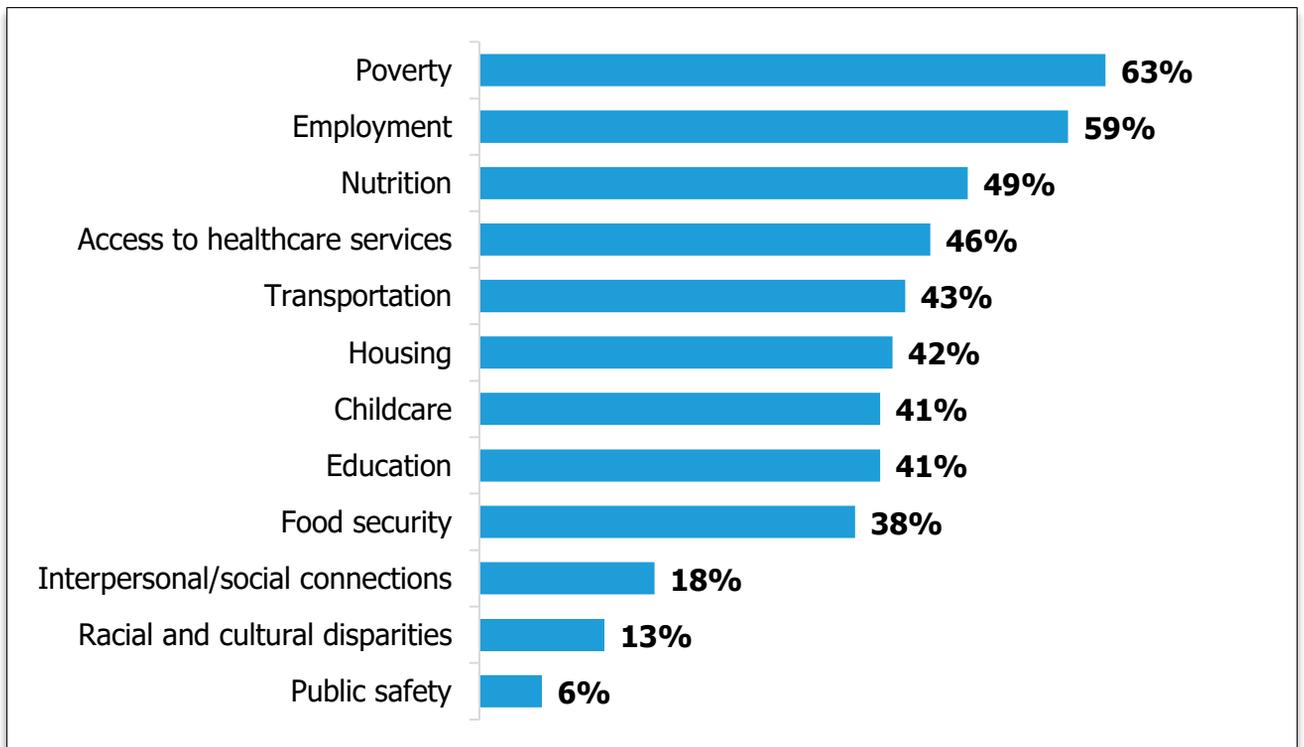
Source: Centers for Medicare & Medicaid Services: Mapping Medicare Disparities by Population

Social Determinants of Health

Social determinants of health, such as economic stability, education, and access to healthcare, significantly influence health outcomes by shaping individuals' living conditions, behaviors, and access to resources necessary for maintaining good health. These factors can lead to health disparities, with marginalized groups often experiencing worse health outcomes due to these determinants.

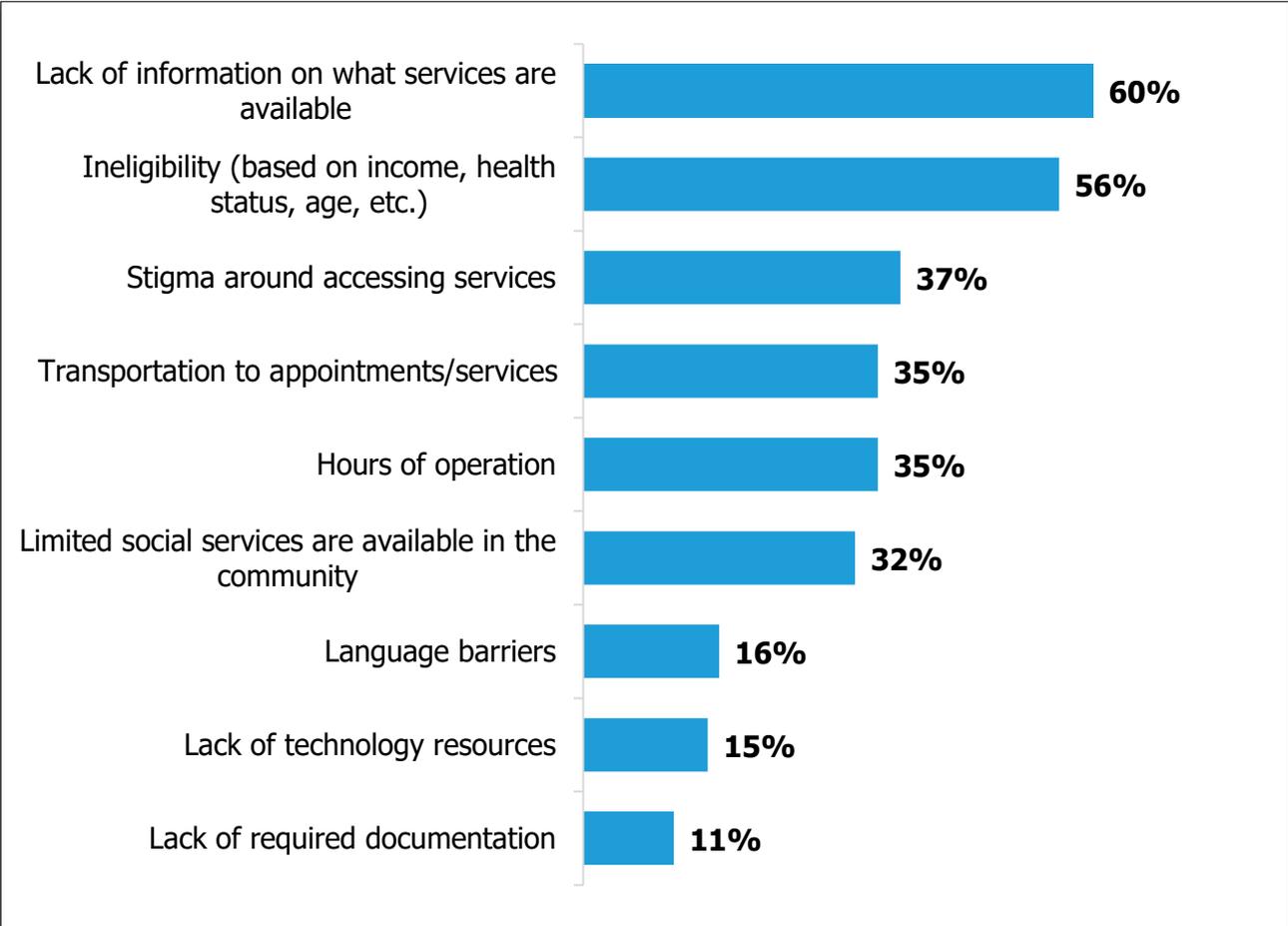
Survey respondents were asked to identify the key social determinants of health (SDoH) that negatively impact the health of people in Macon County. The top SDoH identified was poverty with 63% of survey respondents identifying it as negatively impacting the health of the community followed by employment, nutrition, access to healthcare services, and transportation.

Survey Question: Social drivers of health (SDoH) are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes. Please select the key social drivers that negatively impact the health of you or your community (please select all that apply):



Community members were also asked to provide feedback on the availability of social services to address SDoH in Macon County. Twenty percent of respondents said that it is extremely difficult to access social services in Macon County with lack of information and ineligibility being the greatest barriers to access.

Survey Question: What makes it difficult for you or members of your community to access social services?



Housing

Access to affordable and safe housing influences a wide range of factors that contribute to physical and mental well-being. There is evidence that a lack of access to affordable and stable housing can lead to negative health outcomes such as mental illnesses and stress, exposure to environmental hazards, and financial instability ([Center for Housing Policy](#)). More Macon County residents experience severe housing problems (overcrowding, high housing costs, lack of plumbing) than the state average. Additionally, 12% of Macon County residents spend 50% or more of their household income on housing.

	Macon County	Tennessee
Severe Housing Problems (2016-2020)	15%	13%
Severe Housing Cost Burden (2018-2022)	12%	12%
Broadband Access (2018-2022)	82%	86%

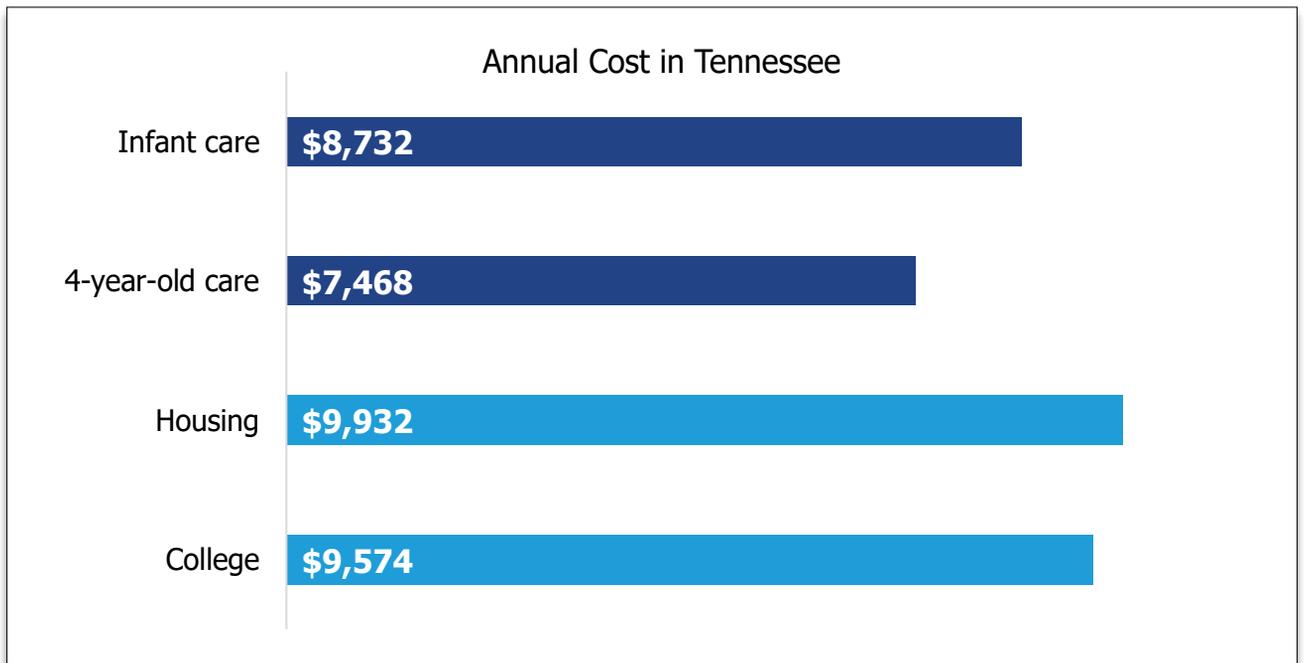
Source: County Health Rankings 2024 Report

Access to Childcare

The average yearly cost of infant care in Tennessee is \$8,732. The U.S. Department of Health and Human Services defines affordable childcare as being no more than 7% of a family’s income ([Economic Policy Institute](#)). In Macon County, 24% of household income is required for childcare expenses and there are only 5 childcare centers for every 1,000 children under age 5 in the county compared to 9 in the state.

	Macon County	Tennessee
Children in Single-Parent Households (2018-2022)	26%	28%
Child Care Cost Burden - % of HHI used for childcare (2023)	24%	26%
Child Care Centers per 1,000 Under Age 5 (2010-2022)	5	9

Source: County Health Rankings 2024 Report



Source: Economic Policy Institute (2020)

Income, Employment, and Education

Income, employment, and education play a role in the community’s ability to afford healthcare and impact health outcomes through health literacy and access to health insurance. Educational attainment and employment impact mental health through poverty and unstable work environments, health behaviors like smoking, diet, and exercise, and access to health insurance (HealthAffairs). Additionally, these factors impact people’s ability to afford services to live healthy and happy lives like safe housing, transportation, childcare, and healthy food.

	Macon County	Tennessee
High School Completion (2018-2022)	78%	89%
Some College – includes those who had and had not attained degrees (2023)	35%	63%
Unemployment (2023)	3%	3%
Children in Poverty (2022)	20%	18%

Source: County Health Rankings 2024 Report, U.S. Bureau of Labor Statistics

Evaluation & Selection Process

Worse than Benchmark Measure	Identified by the Community	Feasibility of Being Addressed	Impact on Health Equity
			
Health needs were deemed “worse than the benchmark” if the supported county data was worse than the state and/or U.S. averages	Health needs expressed in the online survey and/or mentioned frequently by community members	Growing health needs where interventions are feasible, and the Hospital could make an impact	Health needs that disproportionately affect vulnerable populations and can impact health equity if addressed

Health Need Evaluation	Worse than Benchmark	Identified by the Community	Feasibility	Impact on Health Equity
Mental Health	✓	✓	✓	✓
Cancer	✓	✓	✓	✓
Drug/Substance Abuse		✓	✓	✓
Healthcare: Affordability	✓	✓	✓	✓
Employment and Income	✓	✓		✓
Education System	✓	✓		✓
Access to Healthy Food		✓		✓
Healthcare: Prevention Services	✓	✓	✓	✓
Healthcare: Types of Services Provided	✓	✓	✓	✓
Smoking/Vaping/Tobacco Use	✓	✓	✓	✓

Implementation Plan

Implementation Plan Framework

The Hospital determined that the action plan to address the identified significant health needs will be organized into key groups to adequately address the health needs with available time and resources. Note that though employment and income, education system, and access to healthy foods were identified as significant issues impacting health in the community, the Hospital has not outlined a plan to address these needs as there are other community organizations with expertise to affectively address them.

Access to Behavioral Health Services

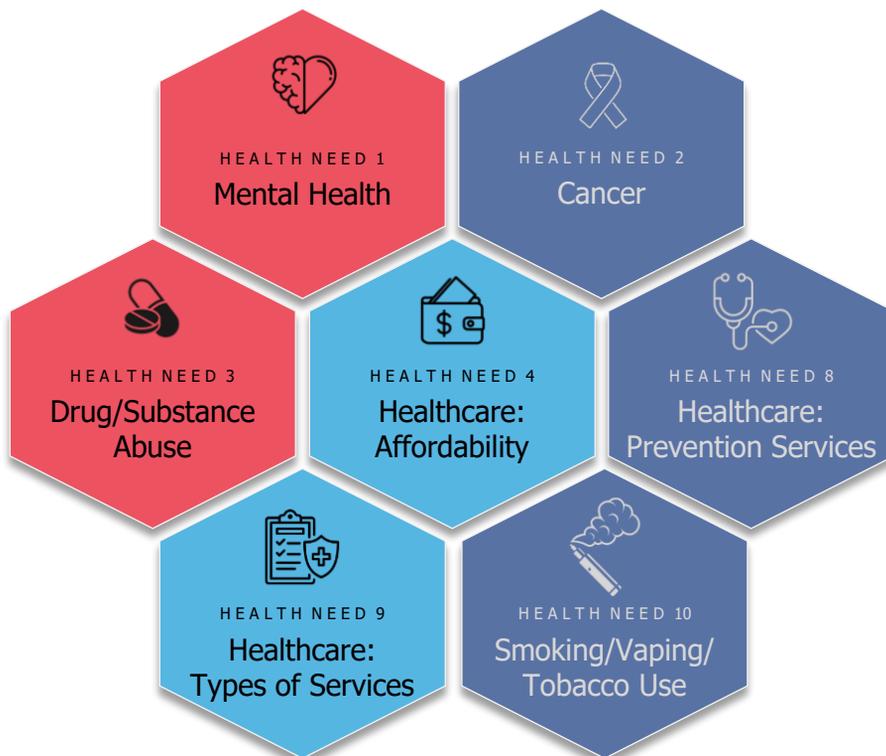
Goal: Increase community access and coordination of mental health and substance abuse services in the county.

Health Prevention, Education, and Screening

Goal: Reduce the onset of illness and chronic diseases through meaningful and impactful prevention, education, and screening services.

Access to Healthcare Services

Goal: Enhance community health by reducing barriers to care and increasing the availability of quality and affordable services locally.



Access to Behavioral Health Services

Mental Health, Drug/Substance Abuse

MCH Services and Programs Committed to Respond to This Need

- Outpatient behavioral health clinic provides therapy, medication management, and case management services
- Emergency department (ED) is equipped with crisis intervention services and a safe holding space for patients in mental health crisis
- Patients in the behavioral health clinic are screened for social determinants of health (SDoH) and connected to community resources
- First aid training includes training on the use of Narcan
- Participant in the Drug Free Coalition through the Macon County Health Council providing free Narcan kits to the community
- Educational programs and resources available on suicide intervention, drug use prevention, and stigma reduction
- MCH employees are screened for depression and anxiety and referred to resources upon a positive screen
- Mental health education provided in chronic disease support groups

Goals and Future Actions to Address this Significant Health Need

Goal: Increase community access and coordination of mental health and substance abuse services in the county.

- Evaluate expanding behavioral health services to include peer support groups
- Increase efforts on youth programming to target early behavioral health needs
- Work with local employers to screen and identify employees with behavioral health needs and connect them with hospital and community resources
- Expand outreach to the agricultural population to address mental health disparities

Impact of Actions and Access to Resources

- Increase access to behavioral health resources and services locally
- Improve behavioral health outcomes including reduced suicides and drug overdose deaths
- Address health disparities through care coordination and outreach to medically underserved populations

Other Local Organizations Available to Respond to This Need

- Hope Family Health Behavioral Health Program (<https://www.hopefamilyhealth.org/bh>)
- Macon County Coordinated School Health (<https://www.maconcountyschools.com/page/coordinated-school-health>)
- Macon County Health Council
- Macon County Prevention Coalition
- Volunteer Behavioral Health Care System (<http://www.vbhcs.org/locations/lafayette/>)

Health Prevention, Education, and Screening

Cancer, Prevention Services, Smoking/Vaping/Tobacco Use

MCH Services and Programs Committed to Respond to This Need

- Imaging services including mammography, ultrasound, bone density, CT scan, nuclear medicine, and MRI
- Multiple health fairs are hosted each year to provide education and low-cost screening services for chronic diseases
- Outreach is provided to local employers on breast cancer screening services
- Monthly education classes provided including CPR, Stop the Bleed, and smoking cessation
- Accredited diabetes education classes with a registered dietician
- Free chronic disease support groups including diabetes and dementia/Alzheimer's
- SilverSneakers program provides fitness and healthy living resources to seniors
- Workplace Wellness Program offered for employees to support healthy lifestyles and health education
- Free education resources and programs are offered to the community and local schools
- Monthly free and low-cost screening services are provided to increase access to affordable prevention services:
 - Jan: free TSH screening
 - Feb: free lipid panel, reduced rate cardiac scoring test
 - Mar: reduced rate colonoscopies
 - May: free vitamin D screening, mental health awareness
 - Jun/Jul: reduced rate vascular screening services
 - Aug: reduced rate low-dose lung scan
 - Sep: Free prostate cancer screening
 - Oct: reduced rate mammography, partnership with local employers to schedule employee mammograms
 - Nov: free A1C tests

Goals and Future Actions to Address this Significant Health Need

Goal: Reduce the onset of illness and chronic diseases through meaningful and impactful prevention, education, and screening services.

- Identify outreach strategies to engage medically underserved communities in hospital-provided education and screening services
- Increase participation and awareness of chronic disease support groups
- Evaluate the expansion of current education programming including diabetes education and smoking cessation

Impact of Actions and Access to Resources

- Improve health behaviors including healthy eating, exercise, yearly screening, and smoking cessation
- Decrease onset and prevalence of chronic diseases
- Address disparities in health status among medically underserved populations

Other Local Organizations Available to Respond to This Need

- Macon County Health Department
(https://maconcountyttn.gov/visitors/departments/health_department.php)
- Macon County Health Council
- Macon County Parks and Recreation
- Macon County Prevention Coalition

Access to Healthcare Services

Affordability, Types of Services

MCH Services and Programs Committed to Respond to This Need

- A range of specialty care services, lab, and imaging available locally to limit patients' need to travel far for care
 - Cardiac rehab
 - Cardiology
 - Dermatology
 - Infusion therapy
 - Neurology
 - Oncology
 - Pulmonary rehab
 - Respiratory therapy services
 - Sleep lab
 - Surgical services
 - Women's health
 - And more
- Financial Assistance Program provides discounted pricing to low-income patients
- Financial Counselors are available to assist patients in applying for insurance and identifying additional resources
- New pediatric wing provides occupational, physical, and speech therapies locally
- Social workers provide socioeconomic referrals for all inpatients including housing, financial assistance, and transportation
- Free transportation is available for patients at the behavioral health clinic
- Tennessee Early Intervention System provides coverage of copay and deductible costs for those with insurance and covers the cost for those without insurance for families of children with developmental delays or disabilities
- Language line provides translation services to non-English speaking patients

Goals and Future Actions to Address this Significant Health Need

Goal: Enhance community health by reducing barriers to care and increasing the availability of quality and affordable services locally.

- Continue to recruit primary care providers to the area to increase appointment availability and access to care
- Increase awareness of the range of services provided at MCH specifically working with local employers to ensure employees can access care locally
- Continuously evaluate and grow service offerings to meet the needs of the community and provide care close to home

Impact of Actions and Access to Resources

- Increase the utilization of low-cost primary care services through the availability of local providers
- Reduce barriers to care by providing financial assistance, connection to resources, and access to specialty services locally

Other Local Organizations Available to Respond to This Need

- Hope Family Health Behavioral Health Program (<https://www.hopefamilyhealth.org/bh>)
- Knollwood Manor (<https://knollwoodtn.com/>)
- Macon County Health Department (https://maconcountyttn.gov/visitors/departments/health_department.php)
- Macon County Health Council
- Macon Helps
- The Palace (<https://palacehrc.com/>)
- Upper Cumberland Human Resource Agency (<https://uchra.org/>)
- Westmoreland Care and Rehabilitation (<https://www.westmorelandcare.com/>)

Appendix

Community Data Tables

Leading Cause of Death

The Leading Causes of Death are determined by the official Centers for Disease Control and Prevention (CDC) final death total. Tennessee's Top 15 Leading Causes of Death are listed in the tables below in rank order. Macon County's mortality rates are compared to the Tennessee state average, and whether the death rate was higher (red), lower (green), or as expected (black) compared to the U.S. average.

Cause of Death	Mortality Rate <i>per 100,000 age adjusted</i>		
	Macon	TN	US
Heart Disease	259.2	223.8	173.8
Cancer	220.9	166.3	146.6
Accidents	79.6	100.5	64.7
Stroke	53.1	46.2	41.1
Lung	75.2	51.3	34.7
Alzheimer's	27.0	37.7	31.0
Diabetes	25.9	31.4	25.4
Liver	11.4	17.2	14.5
Suicide	20.3	17.0	14.1
Kidney	21.7	14.9	13.6
Hypertension	6.5	13.1	10.7
Flu - Pneumonia	33.1	14.9	10.5
Blood Poisoning	16.7	12.5	10.2
Parkinson's	7.6	10.8	9.8
Homicide	6.0	12.2	8.2

Source: worldlifeexpectancy.com, CDC (2021)

County Health Rankings

Source: www.countyhealthrankings.org

	Macon	Tennessee	Top US Performers	US Overall
Length of Life				
Premature Death*	11,015	11,043	6,000	8,000
Life Expectancy*	73	74	81	79
Quality of Life				
Poor or Fair Health	23%	18%	13%	14%
Poor Physical Health Days	5.0	4.1	3.1	3.3
Poor Mental Health Days	6.6	5.8	4.4	4.8
Low Birthweight*	9%	9%	6%	8%
Health Behaviors				
Adult Smoking	27%	20%	14%	15%
Adult Obesity	37%	36%	32%	34%
Limited Access to Healthy Foods	7%	9%	17%	12%
Physical Inactivity	33%	27%	20%	23%
Access to Exercise Opportunities	49%	67%	90%	84%
Excessive Drinking	15%	17%	13%	18%
Alcohol-Impaired Driving Deaths	10%	24%	10%	26%
Drug Overdose Deaths*	30.6	43.2	42	23
Sexually Transmitted Infections*	300	562.4	152	496
Teen Births (<i>per 1,000 females ages 15-19</i>)	39	24	9	17
Clinical Care				
Uninsured	13%	12%	6%	10%
Primary Care Physicians	5140:1	1437:1	1,030:1	1,330:1
Dentists	6557:1	1779:1	1,180:1	1,360:1
Mental Health Providers	13115:1	532:1	230:1	320:1
Preventable Hospital Stays*	6,254	2,896	1,558	2,681
Mammography Screening	32%	42%	52%	43%
Flu Vaccinations	44%	47%	53%	46%
Social & Economic Factors				
High School Completion	78%	89%	94%	89%
Some College	35%	63%	74%	68%
Unemployment	3%	3%	2%	4%
Children in Poverty	20%	18%	10%	16%
Children in Single-Parent Households	26%	28%	13%	25%
Injury Deaths*	126.3	108.1	64	80
Child Care Cost Burden (<i>% of HHI used for childcare</i>)	24%	26%	36%	27%
Child Care Centers (<i>per 1,000 under age 5</i>)	5	9	13	7
Physical Environment				
Severe Housing Problems	15%	13%	8%	17%
Long Commute - Driving Alone (<i>> 30 min. commute</i>)	50%	36%	17%	36%
Severe Housing Cost Burden (<i>50% or more of HHI</i>)	12%	12%	15%	14%
Broadband Access	82%	86%	90%	87%

*Per 100,000 Population

Key (Legend)

- Better than TN
- Same as TN
- Worse than TN

Source: County Health Rankings 2024 Report

Data and Inputs

Data Limitations

Rural communities and those with low population sizes face several data limitations including but not limited to:

- Small sample sizes: small populations reduce the statistical power and do not capture the full diversity of the community
- Data privacy: to ensure the confidentiality of individuals in small communities, data may be aggregated or withheld
- Data gaps: some events may happen less frequently in small populations leading to limited data and gaps in time
- Resource constraints: rural areas often have less funding for data collection and access to data collection technologies
- Underrepresentation in national surveys: many national level data sources focus on urban areas due to the higher population making access to data in small communities more limited

This assessment is meant to capture the health status of the service area at a specific point in time, combining both qualitative data from the local community through survey collection and quantitative data from multiple sources where the county is available as the smallest unit of analysis.

Local Expert Groups

Survey Respondents self-identify themselves into any of the following representative classifications:

- 1) **Public Health Official** – Persons with special knowledge of or expertise in public health
- 2) **Government Employee or Representative** – Federal, tribal, regional, State, or local health or other departments or agencies, with current data or other information relevant to the health needs of the community served by the organizations
- 3) **Chronic Disease Groups** – Representative of or member of Chronic Disease Group or Organization, including mental and oral health
- 4) **Community Resident** – Individuals, volunteers, civic leaders, medical personnel, and others to fulfill the spirit of broad input required by the federal regulations
- 5) **Priority Population** – Persons who identify as medically underserved, low-income, racial and ethnic minority, rural resident, or LGBTQ+
- 6) **Healthcare Professional** – Individuals who provide healthcare services or work in the healthcare field with an understanding / education on health services and needs.
- 7) **Other** (please specify)

Data Sources

Website or Data Source	Data Element	Date Accessed	Data Date
Syntellis, ESRI	Assess characteristics of the primary service area, at a ZIP code level; and, to access population size, trends and socio-economic characteristics	May 2024	2023
www.countyhealthrankings.org	Assessment of health needs of the county compared to all counties in the state	May 2024	2013-2022
CDC Final Deaths	15 top causes of death	May 2024	2021
Bureau of Labor Statistics	Unemployment rates	May 2024	2022
Tennessee Department of Health	State and local-level health data	May 2024	2019-2023
National Alliance on Mental Illness – NAMI	Statistics on mental health rates and services	May 2024	2021
Centers for Medicare & Medicaid Services: Mapping Medicare Disparities by Population	Health outcome measures and disparities in chronic diseases	May 2024	2022
American Diabetes Association	Type 2 diabetes risk factors	May 2024	2005
Centers for Disease Control and Prevention – CDC	Racial and ethnic disparities in heart disease	May 2024	2019
Human Resources & Services Administration – data.hrsa.gov	HPSA designated areas	May 2024	2023
Center for Housing Policy	Impacts of affordable housing on health	May 2024	2015
Economic Policy Institute	Childcare costs	May 2024	2020
Health Affairs: Leigh, Du	Effects of low wages on health	May 2024	2022

Survey Results

Based on 108 survey responses gathered between March and April 2024.

Due to a high volume of survey responses, not all comments are provided in this report. All included comments are unedited and are contained in this report in the format they were received.

Q1: Your role in the community (select all that apply)

Answer Choices	Responses	
Community Resident	67.9%	72
Healthcare Professional	31.1%	33
Government Employee or Representative	7.6%	8
Priority Population	5.7%	6
Public Health Official	2.8%	3
Representative of Chronic Disease Group or Advocacy Organization	2.8%	3
	Answered	106
	Skipped	2

Q2: Race/Ethnicity (select all that apply)

Answer Choices	Responses	
White or Caucasian	95.3%	102
Hispanic or Latino	2.8%	3
Black or African American	0.9%	1
American Indian or Alaska Native	0.9%	1
Asian or Asian American	0.0%	0
Native Hawaiian or other Pacific Islander	0.0%	0
Other (please specify)	0.0%	0
	Answered	107
	Skipped	1

Q3: Age group

Answer Choices	Responses	
18-24	1.9%	2
25-34	10.3%	11
35-44	27.1%	29
45-54	22.4%	24
55-64	17.8%	19
65+	20.6%	22
	Answered	107
	Skipped	1

Q4: What is your household income?

Answer Choices	Responses	
Under \$15,000	1.0%	1
Between \$15,000 and \$29,999	10.9%	11
Between \$30,000 and \$49,999	11.9%	12
Between \$50,000 and \$74,999	14.9%	15
Between \$75,000 and \$99,999	17.8%	18
Between \$100,000 and \$150,000	30.7%	31
Over \$150,000	12.9%	13
	Answered	101
	Skipped	7

Q5: What ZIP code do you primarily live in?

Answer Choices	Responses	
37083	73.1%	79
37150	13.9%	15
37186	7.4%	8
37074	2.8%	3
42164	0.9%	1
37090	0.9%	1
37057	0.9%	1
	Answered	108
	Skipped	0

Q7: Which groups would you consider to have the greatest health needs (rates of illness, trouble accessing healthcare, etc.) in your community? (please select your top 3 responses if possible)

Answer Choices	Responses	
Uninsured and underinsured individuals	61.0%	64
Older adults	57.1%	60
Low-income groups	53.3%	56
Residents of rural areas	38.1%	40
Individuals requiring additional healthcare support	33.3%	35
Children	16.2%	17
Racial and ethnic minority groups	8.6%	9
Women	8.6%	9
LGBTQ+	1.0%	1
	Answered	105
	Skipped	3

What do you believe to be some of the needs of the groups selected above?

- Food insecurities, and transportation
- No Transportation, High cost of specialty care, fear of unknown
- Adequate mental health services
- Insurance and low income healthcare costs
- They need health insurance and or that is affordable that not health market. It's too high deductible or really not good. Some low income is in a spot where they can't get enough income to pay for medicine.
- Basic healthcare, checkups, blood pressure health, gynecology
- Affording healthcare
- increased healthcare/nutrition information - more outreach for healthcare knowledge
- We see these groups in our workplace and so many are losing TN Care.
- Universal healthcare so people wouldn't be concerned with the expense associated with healthcare. Expense keeps a lot of folks away from the doctor.
- Mental health care, at-home care, and transportation to and from appointments
- lower cost of medicines, trust in the system to not be reported as illegal for them and their families, better communication, more education for healthcare for these groups
- Support in getting the services that they need including physical health and mental health.
- Updated technology for mammograms. I have to travel out of town to get the 3D mammogram.

- I believe affordable insurance is one of the biggest challenges. I know that a challenge for our household is that all of the specialists for children are in Nashville. It would be wonderful to have some closer.
- More information and help involving mental illnesses including patient care in hospital and after they are released
- Access to specialized health care locally.
- Appropriate home care, dialysis, wound care services and most of all TRANSPORTATION to and from services and appointments/ER return home.
- Racial and ethnic minority groups - lack of resources due to lack of citizenship and lack of knowledge due to language barrier and Macon County being predominantly white and English speaking. Low-income - there is normally a correlation between low-income and health because people don't have the money to pay for services and therefore do not seek certain medical services which in turn, they avoid preventative care and only seek medical care when absolutely necessary. Women - specifically prenatal due to lack of obgyn services in Macon County and a hospital specializes in obgyn care. Residents of rural areas - for citizens living in rural areas, there is a lack of resources because of the time it would take to receive that care. Many people also do not drive so that is a major barrier if they do not drive and it takes 20+ minutes to get to the closest medical facility. They would have to ask for a ride from someone or try and schedule transportation service (that is, even if the transportation service would go to their location). Individuals requiring additional healthcare support - lack of in-home resources to be able to see these individuals, insurance doesn't cover it, lack of wifi in rural areas to be able to receive telehealth.
- Language barrier, age barrier to understand, no insurance
- Access to affordable healthcare (including the out of pocket) and transportation
- UNDERinsured poses a problem related to people in the community not taking preventative measures or seeking preventative appointments if there is cost involved, leading to untreated or undiagnosed issues which create increased, more acute needs.
- Access to specialist. Care support.
- Can't get to healthcare facilities, lack of transportation to rural areas.
- Language barriers for Hispanics to prevent them from seeking routine care . Mental healthcare for the middle class and foster children
- Medication assistance , nutrition /healthy food and beverage availability, health knowledge deficit
- No really focused pediatric care in this area.
- Wellness care, specialized care
- More specialized drs coming to rural areas.
- Mental health
- Better insurance needs to be more affordable
- Lack of transportation or assistance. No insurance and can't afford care or meds.

- Lower monthly premiums and larger networks of providers. Education on the healthcare system.
- I do not know specifically but I would think older individuals may have transportation barriers to getting to dr. appts and those individuals who require additional support such as chemotherapy, dialysis etc.
- Cancer, there's no place in town for treatment
- Not being able to afford prescriptions
- Transportation for the elderly is a barrier. Underinsured or no insurance people tend to skip regular doctors visits and tend to go the ER when an office visit would suffice.
- Free or low cost local clinics for those with no health insurance.

Q7: Please rate the importance of addressing each health factor on a scale of 1 (Not at all) to 5 (Extremely).

	1	2	3	4	5	Total	Weighted Average
Mental Health	0	2	2	20	63	87	4.66
Cancer	0	2	5	14	68	89	4.66
Drug/Substance Abuse	1	1	8	13	65	88	4.59
Heart Disease	0	0	12	32	45	89	4.37
Obesity	2	2	9	23	51	87	4.37
Alzheimer's and Dementia	0	5	10	24	50	89	4.34
Diabetes	0	1	11	33	42	87	4.33
Women's Health	0	1	14	33	39	87	4.26
Lung Disease	0	5	10	41	32	88	4.14
Stroke	0	3	20	27	38	88	4.14
Kidney Disease	0	3	21	35	30	89	4.03
Dental	0	9	20	28	30	87	3.91
Liver Disease	1	6	22	33	26	88	3.88
Other (please specify)						5	
						Answered	89
						Skipped	19

Comments:

- General Wellness Information--Full scale effort across the county, Health Fairs, year round community programming--bring it to them, do not require that they come to you.
- Labor and delivery
- Eye care

Q8: Please rate the importance of addressing each community factor on a scale of 1 (Not at all) to 5 (Extremely).

	1	2	3	4	5	Total	Weighted Average
Healthcare: Affordability	0	2	8	17	61	88	4.56
Employment and Income	1	0	10	17	60	88	4.53
Education System	1	1	5	25	56	88	4.52
Access to Healthy Food	0	0	11	24	53	88	4.48
Healthcare: Prevention Services	1	0	10	25	51	87	4.44
Healthcare: Types of Services Provided	0	3	8	27	51	89	4.42
Healthcare: Location of Services	0	3	14	22	49	88	4.33
Affordable Housing	2	1	14	19	51	87	4.33
Access to Senior Services	0	1	17	26	45	89	4.29
Access to Exercise/Recreation	0	1	18	31	39	89	4.21
Access to Childcare	2	1	17	23	43	86	4.21
Transportation	3	3	16	19	45	86	4.16
Community Safety	2	2	23	16	45	88	4.14
Social Connections	2	5	29	30	22	88	3.74
Other (please specify)						5	
						Answered	89
						Skipped	19

Comments:

- More support for individuals with disabilities
- Offering a true place of wellness, where citizens can come together and practice healthy socializing
- Anything to help bring mental illness awareness
- Technology understanding for seniors

Q9: Please rate the importance of addressing each behavioral factor in your community on a scale of 1 (Not at all) to 5 (Extremely).

	1	2	3	4	5	Total	Weighted Average
Smoking/Vaping/Tobacco Use	2	2	10	19	54	87	4.39
Diet	0	0	14	31	43	88	4.33
Physical Inactivity	1	0	12	34	41	88	4.30
Excess Drinking	1	3	18	30	36	88	4.10
Risky Sexual Behavior	3	4	21	25	34	87	3.95
Other (please specify)	2						
						Answered	89
						Skipped	19

Comments:

- Preventative Maintenance, Safe sex practices
- Stress management

Q10: Please provide feedback on any actions you've seen taken by MCH to address the 2021 significant health needs in your community and what additional actions you would like to see.

- They have tried very hard (and been successful) to bring in specialists to our community hospital on a weekly basis so that we can receive treatment without having to go out of town. They have hired someone to assist mental health patients with getting into mental health facilities and getting their medications/prescriptions. Their prices are much more affordable than surrounding hospitals and we are very thankful for that!!!
- They are always active in the community and promoting the low cost or free services they have going on at the time. They are very part of the driving force of the Macon County Health Council and have done more than many of the other Health Councils I have seen.
- I am aware of the mental health grant secured by MCH. I am appreciative of this work; however, there is still a significant need for more services.
- MCH ensures information is made available via print, radio and social media
- Great new er. Meetings for Alzheimer's and diabetes health. More behavioral health services.
- Free health screenings, behavior health offered, educational classes

- Participation in various health fairs, providing reduced pricing for healthcare testing for the community monthly, and striving to provide various medical services to our community for citizens to not have to go out of town.
- Wellness program sponsors/booths for community health programs across the county. For example, #The37150GrowOn or #Let'sGrow37150 in RBS. And another event in Westside. Most efforts are centralized in Lafayette, but it is important to get the information to the folks that won't come there as well.
- I believe they have been more active in the community with offering greater services through the hospital, such as more local specialist being accessible. I also believe they have done a better job communicating what they offer. The problem especially with behavioral health whether it's mental health or dementia there are not a lot of options for long term care.
- I like that the hospital features specific months that focus on pervasive health needs with free screenings. I like that there is a behavioral health professional in the ER to assist with people getting set up with appropriate out-patient mental health/addiction services.
- Although treated very good at MCGH I feel they need more awareness and support on mental illness including a safe locked room and staff that can contain and tend to the patient.
- New behavioral health grant program in conjunction with Hope Family Health. Financial assistance program. Monthly lab and imaging specials. Community outreach programs/speakers etc. Television and radio adds about services available to address chronic diseases.
- Behavioral Health - expanding health council efforts and seeing a focus more towards behavioral health (mental health) in the upcoming year. I have also been involved in teaching lessons at the justice center and alternative school that target risky-behaviors in youth and mental health. Affordability - the Macon County Health Department sees individuals of all income status. Depending on their household income, we use a sliding slide to determine payment that is appropriate for that individual. Accessibility - the Macon County Health Department started providing more Telehealth services and encourages patients to use these services, especially if they want to cancel their appointments. We will also be putting up signage in the health departments to promote Telehealth. Chronic Disease Management - in the past, the Macon County Health Department has offered Chronic Disease self-management classes to help target this health need. Due to low attendance numbers across the region, these classes are not currently being taught and being reevaluated to look at other options.

- Under the topic of Behavioral Health it would be nice to see the time a patient spends in the ER waiting for crisis/psychiatric care to lessen. Also under Behavioral Health it would benefit the region if the hospital offered intensive outpatient care for individuals who need help overcoming their addiction. Our community is not doing enough. There are not enough providers in the region offering this type of care.
- Health fairs and other community actions.
- The free or reduced cost of regular testing that MCH offers encourages more people to get screenings they might otherwise not receive through normal drs appointments or due to out of pocket expense. The education they provide for diseases such as diabetes and their support of events such as Makin Macon Fit encourages a more healthy lifestyle.
- New contract with Hope Behavioral to address Behavioral Health needs
- MCH has increased the accessibility to testing and has strived to get the information out to the public through radio, tv, print and social media. Offering low cost to free testing for important health. MCH has taken measures to help with the affordability of testing and maintains a financial department who works with individuals.
- I would like to see more additional care given to the elderly such as more support when they are not able to take care of themselves when they live alone at home. Also, better care given to people dealing with mental health issues.
- Macon Community Hospital now has a Behavioral Health Clinic established to help with the needs of the community. They continue to open Specialty Clinics for other disease management.
- Excited to see the collaboration with Hope mental health in our community.
- They have added a behavioral health case worker at the hospital for mental health and addiction.
- Monthly lab / screening offerings, Supporting school athletic programs with athletic trainers. Support of the Hope clinic. More robust engagement of school system of benefits of diet exercise and avoidance. Healthcare training offered to and through the high school level. Community centered wellness center like a "civic" center. Program to improve the availability of higher quality produce and ways to implement them and other healthier options into diet.
- Often offered free clinics and testing
- Price transparency. Cash pay pricing based on income. Community events. Monthly free labs for public.
- Accessibility is being addressed. Mental Health is still a need.

- They offer free or reduced priced tests that are valuable to evaluate people’s health. They keep updating equipment to state of the art and keep prices lower than other hospitals in Middle TN.
- Their staff has actively sought to find help for those with substance use and mental health disorders quite a bit. They have also tried to help secure transportation with other local agencies when possible for patients that don’t have any transportation.
- The hospital projects a positive image in the community of being a critical, life-saving point for our rural area. I would like to see them add more specialized services through their clinics.
- I have seen Macon Community Hospital provide more specialized care so -Accessibility. I am also aware that the hospital offers monthly tests etc. either free or at an affordable rate so – Affordability. I am also aware that the hospital has addressed Mental Health specifically with days and events set aside for it. I am also aware of Chronic disease management as my husband has gone to the diabetic meetings that are provided through the hospital with Michaela Pedigo.
- The Macon community hospital has greatly improved in the past few years with services and test that prevent having to travel miles to have done. I would like to see affordable functional medicine doctors in the area. The nearest I've been able to find is Hendersonville and too expensive.
- They have started a mental health clinic.
- They have brought in some good doctors like the doc they got to do colonoscopies and a new heart doc. Those are needed services. Not everyone in our community can drive out of town for a doctor
- I think dental health should be a priority in overall healthcare. Poor dental health and the outrageous cost of dental care is a very big problem in our community. Even with dental insurance most lower income people in our community can’t afford major dental work that can severely impact their overall health and mental health.

Q11: Social determinants of health are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes. Please select the key social determinants that negatively impact the health of you or your community (please select all that apply):

Answer Choices	Responses	
Poverty	63.3%	50
Employment	59.5%	47
Nutrition	49.4%	39
Access to healthcare services	45.6%	36
Transportation	43.0%	34
Housing	41.8%	33
Education	40.5%	32
Childcare	40.5%	32
Food security	38.0%	30
Interpersonal/social connections	17.7%	14
Racial and cultural disparities	12.7%	10
Public safety	6.3%	5
Other (please specify)	6.3%	5
	Answered	79
	Skipped	29

Comments:

- Walkable areas within the city
- Too many drugs
- Drugs
- Poverty of mind--this is all they know
- Drugs

Q12: On a scale of 1 to 5, how difficult is it to access social services (affordable healthcare, food assistance, housing support, unemployment compensation) in your community when you need them?

1 (not at all available)	2	3	4	5 (abundantly available)	Total	Weighted Average
8.9%	7.6%	44.3%	19.0%	20.3%	79	3.42
					Answered	79
					Skipped	29

Q13: What makes it difficult for you or members of your community to access social services?

Answer Choices	Responses		
Lack of information on what services are available	60.0%	45	
Ineligibility (based on income, health status, age, etc.)	56.0%	42	
Stigma around accessing services	37.3%	28	
Hours of operation	34.7%	26	
Transportation to appointments/services	34.7%	26	
Limited social services are available in the community	32.0%	24	
Language barriers	16.0%	12	
Lack of technology resources	14.7%	11	
Lack of required documentation	10.7%	8	
Other (please specify)	4.0%	3	
		Answered	75
		Skipped	33

Comments:

- Lack of support from family members
- In network insurance availability
- Too many that shouldn't be there

Q14: What barriers keep you or anyone in your household from receiving routine healthcare? (Please select all that apply)

Answer Choices	Responses	
I have no barriers to receiving routine healthcare	52.5%	42
No insurance/high deductible	31.3%	25
Cost of healthcare	30.0%	24
Cannot take off work	21.3%	17
Healthcare hours of operation are inconvenient	20.0%	16
Healthcare locations are inconvenient	10.0%	8
Lack of childcare	7.5%	6
Lack of transportation	6.3%	5
I do not understand how to find healthcare resources	1.3%	1
Other (please specify)	2.5%	2
	Answered	80
	Skipped	28

Comments

- Not taking insurance card or my deductible is to high
- In network insurance availability

Q15: What additional services / offerings would you like to see available in Macon County? (select all that apply)

Answer Choices	Responses	
Cancer Care	48.8%	41
Mental Health / Substance Abuse Treatment	44.1%	37
Additional Primary Care Availability	36.9%	31
Dermatology	36.9%	31
Women's Health	31.0%	26
Bariatric (Weight Loss)	27.4%	23
Rheumatology	27.4%	23
Endocrinology	22.6%	19
Urgent Care / Walk-In / Extended Hours	22.6%	19
Gastroenterology	19.1%	16
Health Prevention / Education Programs	19.1%	16
Neurology	14.3%	12
Pediatrics	14.3%	12
Urology	14.3%	12
Cardiology	11.9%	10
General Surgery	9.5%	8
Nephrology	8.3%	7
Orthopedics	8.3%	7
Reproductive Health	8.3%	7
Telehealth / Virtual Care	8.3%	7
Audiology	7.1%	6
Pulmonology	7.1%	6
Plastic Surgery	2.4%	2
Ophthalmology	1.2%	1
Other (please specify)	8.3%	7
	Answered	84
	Skipped	24

Comments

- Mental/Dementia dr services
- Wellness Center
- Labor and delivery
- Urgent care
- Burn Injury Care

Comments (cont.)

- Affordable dental care
- Functional medicine doctors

Q16: Where do you get most of your health information? (Check all that apply)

Answer Choices	Responses	
Doctor/Health Care Provider	73.5%	61
Website/Internet	45.8%	38
Word of Mouth	27.7%	23
Family or Friends	26.5%	22
Hospital	24.1%	20
Workplace	22.9%	19
Facebook or Twitter	19.3%	16
Other Social Media	14.5%	12
Television	7.2%	6
Newspaper/Magazine	6.0%	5
School/College	4.8%	4
Church Group	2.4%	2
Radio	1.2%	1
Other (please specify)	3.6%	3
	Answered	83
	Skipped	25