





2023

Loudon County

COMMUNITY HEALTH NEEDS ASSESSMENT



Special Thanks

The 2023 Loudon County Community Health Needs Assessment is the culmination of five months of work involving dozens of local community health agencies, community leaders and nearly 400 residents who participated in surveys, focus groups and meetings. The significant findings of this assessment are rooted in complex interrelationships of economics, education, behaviors, access, environment and social circumstances. The solutions are just as complex; no institution or organization by itself can measurably change the trajectory of progress. These significant health challenges facing Loudon County will require a collaborative community approach by all public health partners. Fort Loudoun Medical Center wishes to thank all involved in the 2023 Loudon County Community Health Assessment, particularly our co-partners, Loudon County Health Department and the Loudon County Health Improvement Council. We hope this information can be a catalyst for change as we seek to improve the health circumstances of all who live in and call Loudon County home.

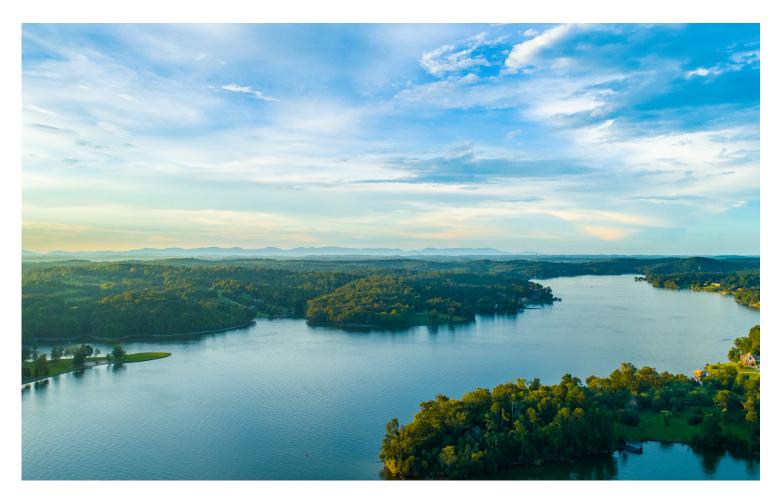
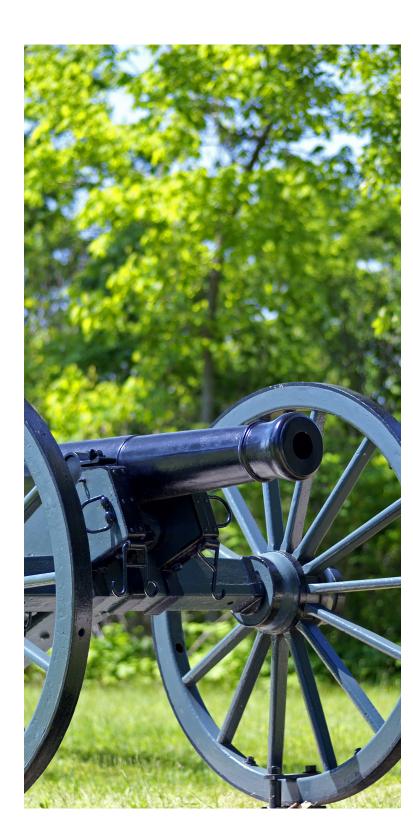




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About Loudon County

Loudon County is in the eastern region of Tennessee and comprises 247 square miles. The county includes the cities of Greenback, Lenoir City, Loudon and Philadelphia. Loudon is a rural community within close proximity to the metropolitan Knoxville area. The 2022 population of Loudon County was 58,181. Persons over the age of 65 account for 27.4% of the population. The racial and ethnic makeup of the population is 86.5% white persons, non-Hispanic; 9.8% Hispanic, and <3% other. Loudon is one of several counties in East Tennessee that is experiencing a significant increase in its Hispanic population.

In 2022, 16% of adults were uninsured, as were 7% of children. The median income of Loudon County is \$70,300 per household. Unemployment is at 6.4%, and the manufacturing sector accounts for 22.7% of the labor market.

Loudon County is the primary market for Fort Loudoun Medical Center, the only hospital in the county. According to internal hospital data for 2022, over 73% of inpatient and 69% of outpatient encounters were Loudon County residents.

According to the 2023 County Health Rankings Report, Loudon County is ranked among the healthiest counties in Tennessee when considering factors related to length and quality of life. Loudon County is currently ranked 7th healthiest out of 95 ranked counties in Tennessee.





Assessment Perspective

Every three years, not-for-profit hospitals across the country are required to conduct a Community Health Needs Assessment for their respective communities. In 2023, Covenant Health facilitated this process in three of its member hospitals' home counties.

The Community Health Needs Assessment process is more than an academic exercise in data collection. It is an opportunity for the hospital to work with members of the larger public health system to identify the challenges and opportunities facing local residents, inventory community resources and explore collaborative solutions.

The 2023 assessment cycle is the fourth such undertaking since the first assessment in 2013. This particular assessment period is notable because it occurred in the midst of the COVID-19 pandemic. As the research will demonstrate, COVID-19 left few aspects of life untouched. It impacted community health improvement efforts and access to services, affected school attendance, isolated residents, challenged the work environment and was a leading cause of death, both locally and nationally.

TOP 5 LEADING CAUSES OF DEATH IN LOUDON COUNTY IN 2020

Diseases of the Heart Cancers COVID-19 Accidents and Adverse Effects Cerebrovascular Diseases Did You Know



Assessment Partners

The role of Fort Loudoun Medical Center in the assessment process was one of facilitation. Members of public health agencies, together with Fort Loudoun Medical Center, convened over a period of five months to complete the Community Health Needs Assessment. The target population of the 2023 assessment was Loudon County residents, with special emphasis on those who are most vulnerable, including senior adults, those who are chronically ill, those who are uninsured and those with low incomes. Partnership selection was especially sensitive to organizations that serve the most at-risk populations.

STEERING COMMITTEE PARTICIPANTS

The Steering Committee's purpose was to determine the scope of the assessment; research methods; assist in the design, distribution and collection of the community survey, select focus group participants; gather primary and secondary health data, produce data notebooks and recruit Data Team members. The members of the Steering Committee consisted of one to two members of the following organizations:

- Fort Loudoun Medical Center (2)
- Loudon County Health Department (2)
- Loudon County Schools (2)
- City of Greenback Representative
- City of Loudon Representative
- Greenback Alderman

- Primary Care Associates
- Tellico Village Representative
- The Prevention Alliance

Did You

Know

In 2021, 17% of Tennessee's population was 65 years or older. In Loudon County 27.4% of the population was 65 years or older.



DATA TEAM PARTICIPANTS

The Data Team was convened during the final steps of the assessment process. The purpose of the Data Team was to take all the data compiled by the Steering Committee and identify the most significant health challenges facing the communities.

- Fort Loudoun Medical Center CAO
- Fort Loudoun Medical Center CNO
- Fort Loudoun Medical Center **Emergency Department manager**
- Fort Loudoun Primary Care physician
- Director of Loudon County Health Council
- Loudon County Health Department director

RESEARCH PARTNERS

• Loudon County Health Department health educator

- ALIGN-9 director
- Coordinator of School Health
- Pastor representing faith community
- Prevention Alliance director

The research partners' role was to provide expertise on survey design, focus group facilitation, community survey data collection and data analysis.

- University of Tennessee Social Work Office of
 Tennessee Department of Public Health, Research and Public Service (UT-SWORPS)
 - Nashville
- Loudon County Health Department

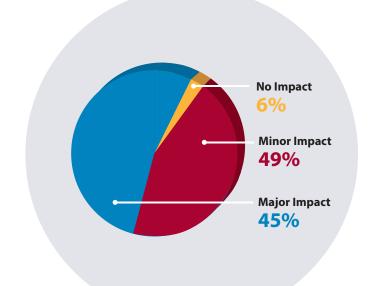


Chart shows respondents' answers to question about the impact of COVID-19 on their community.



Our Process

When it was time for hospitals to conduct their second CHNA, the Internal Revenue Service gave hospitals the option of replicating the first assessment process or allowing hospitals to build upon their previous assessment. The second option resonated with Covenant Health hospitals because of the health priorities that were determined to be the most significant. The top health priorities were generational issues, including mental health access, substance abuse, transportation and tobacco use, to name a few. Improvements in these areas would be complicated and slow to change.

Covenant Health has adopted this format for its tri-annual assessment schedule. Every other assessment cycle "builds upon" the previous assessment findings. This approach allows the priorities to be revalidated after three years and changed if necessary, while staying true to issues that continue to have a significant impact on the health and quality of life of our communities. The 2023 CHNA builds upon the 2020 CHNA findings.

The 2023 CHNA process began in February with the formation of the Steering Committee. The Steering Committee was the decision-making body for the assessment and was instrumental in building a diverse team of partners to ensure input from residents and community leaders was heard.

The primary research for the assessment centered on a household survey and several focus groups. In 2023, Loudon County was emerging from three intense years of COVID-19. The Steering Committee wanted to use the community survey to gauge the impact of COVID-19 since the 2020 assessment. The survey questions used in 2020 would remain the same for 2023, but the respondents' answers to each question were filtered through a "COVID-19 lens." For statistical significance, nearly 336 surveys were collected through an online link and paper surveys. Once the survey data were analyzed by UT-SWORPS, a report was provided to the Steering Committee. (See Appendix C)



COMMUNITY SURVEY



The Steering Committee was very intentional about making sure the most vulnerable groups in Loudon County – the chronically ill, those who are uninsured and minority populations – had a voice in the assessment process. The focus groups were designed to recruit community leaders who directly serve these populations and who are most familiar with the daily challenges these at-risk individuals face. Focus group participants were long-term residents of the county and represented various cities in the county. Four focus groups of six to eight participants each were facilitated by UT-SWORPS. The most significant health priorities of 2020 were the focus of discussion, and determining whether the priorities should be continued or replaced by another issue that may have emerged with more importance. UT-SWORPS provided a written report once the responses were analyzed. (See Appendix D)

ORGANIZATIONS PARTICIPATING IN FOCUS GROUPS

- Fort Loudoun Medical Center
- Loudon County Health Department
- Coordinated School Health
- Emergency Medical Service of Loudon County
- Lenoir City Parks and Recreation
- Loudon City Government
- Loudon County Mayor
- Loudon County Road Superintendent

- Loudon County Schools
- Loudon Senior Center
- Office on Aging
- Priority Ambulance
- Tellico Village
- The Prevention Alliance of Loudon County
- United Way of Loudon County
- 911

For 2023, the Steering Committee elected to use the same secondary health indicators that were used in the 2020 assessment. The indicators were updated to include the most current data points available. Additionally, COVID-19 statistics were included that did not exist in 2020. (Appendix E) Data notebooks were compiled with updated demographics, leading causes of death, community survey results, focus group analysis and secondary data for dozens of health indicators. These were used by the Data Team members to determine the most significant health priorities for the 2023 assessment cycle.



Determining the Priorities

Once members of the Data Team received their data notebooks, they reviewed the data and discussed the most significant issues. The primary focus was to determine whether the 2020 CHNA significant issues should be continued, modified or replaced. The methodology used to assist in the prioritization process was adapted from the Hanlon Method. Each health priority under consideration was filtered by using four questions, and each question's response was rated on a scale of zero to five.

QUESTION 1 - HOW SIGNIFICANT IS THIS ISSUE?

Guiding considerations:

- What percentage of the population has this problem?
- What populations, if any, are disproportionately affected (race, age, ethnicity, gender)?

QUESTION 2 - HOW SERIOUS IS THIS ISSUE?

Guiding considerations:

- What is the economic impact?
- What is the impact on quality of life for those affected?
- What is the medical cost of this health issue?

QUESTION 3 - HOW FEASIBLE ARE THE INTERVENTIONS?

Guiding considerations:

- How aware of this issue is the community as a whole?
- What local resources are already designated or potentially available to address the issue?
- What work is already underway?

QUESTION 4 - HOW EFFECTIVE ARE THE INTERVENTIONS?

Guiding considerations:

- Is the impact limited to a few or a larger portion of those affected?
- Does the intervention address the root cause of the health issue?
- Are interventions broadly available to those affected?



The answers for these four questions were weighted by the research partner with questions 1 and 2 having 37.5% weight each, and questions 3 and 4 weighted at 12.5% each. The composite weighted score from the Data Team members' input became the starting point for discussion. New issues that may have emerged since the 2020 CHNA also were discussed for potential inclusion.

IN RANK ORDER, THE TOP 11 MOST SEVERE PROBLEMS FACING LOUDON COUNTY BASED ON RESPONSES TO THE 2023 COMMUNITY HEALTH SURVEY:

- 1. Lack of affordable housing, homelessness
- 2. Substance abuse and addiction
- 3. Mental illness
- 4. Access to mental health care
- 5. Lack of jobs paying a living wage
- 6. Child abuse and neglect
- 7. Youth tobacco use, including vaping
- 8. Domestic violence
- 9. Access to affordable healthy food
- 10. Access to affordable child care





Most Significant Health Priorities and Related Resources

Largely due to COVID-19, the Data Team consensus was to continue the four health priorities of the 2020 CHNA and add a fifth health priority: improving access to healthcare. Data Team members felt each priority area of the 2020 assessment has worsened. Communities were faced with increased uncertainty and stress, many community resources were paused, and healthcare organizations were pushed to a breaking point. Overall, the demand for health and human resources far outweighed the supply. The 2023 most significant health priorities for Loudon County and their respective local resources are as follows:

1. SUBSTANCE ABUSE DISORDERS

Community Resources:

- Align-9
- Aligning Strides
- American Addiction Center
- Beauty for Ashes Freedom House
- Celebrate Recovery
- Cornerstone of Recovery
- Law enforcement

2. MENTAL HEALTH ACCESS

Community Resources:

- Cherokee Health System
- Coordinated School Health
- East Tennessee Behavioral Health
- Local churches
- Loudon senior centers
- McNabb Center
- Mobile Crisis Unit
- Peninsula Behavioral Health

- Loudon County Health Department
- Loudon County Health Improvement Council
- McNabb Center
- Mental Health Association of East Tennessee
- Prevention Alliance of Loudon County
- School Systems
- Shangri-La Therapeutic Academy of Riding
- Southeast Tennessee Behavioral Health
- Tellico Village and STAYinTV (support services for aging-in-place)
- Village Behavioral Health (residential treatment for adolescents)



3. CHRONIC DISEASE MANAGEMENT

Community Resources:

- Coordinated School Health, Loudon County
- Family Resource Center
- Fort Loudoun Medical Center
- Loudon County Health Department

4. SMOKING AND VAPING

Community Resources:

- Loudon County Health Department
- Loudon County Schools

- Loudon County Senior Center
- Telemedicine
- Tennessee Commission on Aging and Disability
- UT Extension Service

• Loudon County Senior Center

5. IMPROVING ACCESS TO HEALTHCARE

Community Resources:

Fort Loudoun Medical Center physician recruitment

• Telemedicine for mental health, primary care and urgent care





Loudon County

COMMUNITY HEALTH ASSESSMENT DATA

APPENDICES A-E



APPENDIX A- Loudon County Demographics

Loudon County Demographics

Population Comparison Estimates July 2019 & July 2022

Population	July 2019	July 2022
Populations estimates	54,068	58,181
Population, percent change	11.3%	6.0%
Population, Census 2010 / 2020	48,556	54,886
Age and Sex		
Persons under 5 years, percent	5.2%	4.6%
Persons under 18 years, percent	19.4%	19.1
Persons 65 years and over, percent	26.4%	27.4%
Female persons	50.8%	50.6%
Race and Hispanic Origin		
White alone, percent	95.5%	95.1%
Black or African American, percent	1.5%	1.6%
American Indian, and Alaska native	0.6%	0.6%
Asian, percent	0.9%	0.9%
Two or more races, percent	1.3%	1.5%
Hispanic or Latino percent	9.0%	9.8%
White alone, not Hispanic or Latino	87.4%	86.5%

Source: www.census.gov/quickfacts/fact/table/loudoncountytennessee

APPENDIX B – 2020 Loudon County Mortality Data

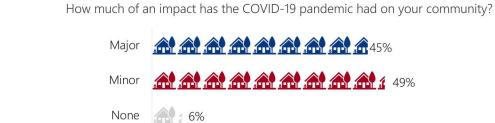
2020 Top 10 Leading Causes of Death in Loudon County

Cause of death	Number of deaths	Rate of death (per 100,000)
1. Diseases of the Heart	162	295.1
2. Malignant Cancers	123	224.0
3. COVID-19	47	85.6
4. Accidents and Adverse Effects	45	82.0
5. Cerebrovascular Disease	37	67.4
6. Chronic Lower Respiratory Diseases	33	60.1
7. Alzheimer's Disease	27	49.2
8. Pneumonia and Influenza	21	38.3
9. Diabetes	15	27.3
10. Parkinson's Disease	15	27.3

SOURCE: TENNESSEE DEATH STATISTICAL FILE, 2020, TENNESSEE DEPARTMENT OF HEALTH, DIVISION OF VITAL RECORDS AND STATISTICS. RATES CALCULATED BASED ON TOTAL POPULATION COUNTS FROM THE TENNESSEE POPULATION ESTIMATES PROGRAM, 2020, TENNESSEE DEPARTMENT OF HEALTH, DIVISION OF POPULATION HEALTH ASSESSMENT.

Appendix C Loudon County Community Health Assessment **2023**

Community survey responses



Issues ranked by major problem

336

Total responses

Most Severe Problem		Identified as major problem	Identified as top 3 problems	Problem made worse by COVID-19 (1-5 scale)
	Lack of affordable housing and homelessness	52.2%	18.8%	3.3
	Substance abuse and addiction	51.1%	16.4%	3.3
	Mental Illness	45.1%	10.7%	3.2
	Access to mental health care	44.5%	18.5%	3.3
	Lack of jobs paying a living wage	40.4%	11.0%	3.0
	Child abuse and neglect	38.1%	2.7%	3.1
	Youth tobacco use including vaping and smokeless tobacco	37.8%	6.5%	2.8
	Domestic violence including sexual assault	35.8%	2.1%	3.0
	Access to affordable healthy food	35.5%	11.6%	3.1
	Access to affordable childcare	34.2%	9.2%	3.0
	Suicide	33.8%	2.4%	3.1
	Access to resources for veterans	33.1%	4.8%	2.8
	Adult tobacco use including vaping and smokeless tobacco	32.7%	0.6%	2.9
	Lack of physical activity	32.5%	5.1%	2.9
	Diabetes, youth and adult	32.2%	1.8%	2.8
	Access to reliable and affordable transportation	31.9%	5.1%	2.9
	Alcohol abuse	31.2%	2.4%	3.1
	Access to affordable health care	29.7%	9.2%	2.9
	Access to affordable dental care	29.2%	6.5%	2.6
	Dementia or Alzheimer's disease	28.7%	3.6%	2.8
	Heart disease	27.7%	3.3%	2.6
	Asthma and other respiratory diseases	27.4%	2.7%	2.9
	Lack of basic reading and writing skills	27.3%	4.8%	2.7
	Elder abuse and neglect	27.1%	3.0%	2.8
	Cancer	25.7%	1.2%	2.6
	Strokes	23.5%	1.8%	2.5
	Teen pregnancy	23.4%	1.2%	2.5
	Access to resources for non-English speaking residents	20.6%	3.6%	2.4
	Access to resources for people with criminal records	19.0%	1.2%	2.3
	Access to prenatal and postnatal care	16.7%	0.3%	2.5
Least Severe				

Problem

Issues ranked by COVID-19 influence

Top 10 issues identified as a major problem are highlighted.

Most Severe Problem		Identified as major problem	Identified as top 3 problems	Problem made worse by COVID-19 (1-5 scale)
	Substance abuse and addiction	51.1%	16.4%	3.3
	Lack of affordable housing and homelessness	52.2%	18.8%	3.3
	Access to mental health care	44.5%	18.5%	3.3
	Mental Illness	45.1%	10.7%	3.2
	Access to affordable healthy food	35.5%	11.6%	3.1
	Suicide	33.8%	2.4%	3.1
	Child abuse and neglect	38.1%	2.7%	3.1
	Alcohol abuse	31.2%	2.4%	3.1
	Access to affordable childcare	34.2%	9.2%	3.0
	Lack of jobs paying a living wage	40.4%	11.0%	3.0
	Domestic violence including sexual assault	35.8%	2.1%	3.0
	Asthma and other respiratory diseases	27.4%	2.7%	2.9
	Lack of physical activity	32.5%	5.1%	2.9
	Access to affordable health care	29.7%	9.2%	2.9
	Access to reliable and affordable transportation	31.9%	5.1%	2.9
	Adult tobacco use including vaping and smokeless tobacco	32.7%	0.6%	2.9
	Elder abuse and neglect	27.1%	3.0%	2.8
	Access to resources for veterans	33.1%	4.8%	2.8
	Dementia or Alzheimer's disease	28.7%	3.6%	2.8
	Youth tobacco use including vaping and smokeless tobacco	37.8%	6.5%	2.8
	Diabetes, youth and adult	32.2%	1.8%	2.8
	Lack of basic reading and writing skills	27.3%	4.8%	2.7
	Heart disease	27.7%	3.3%	2.6
	Cancer	25.7%	1.2%	2.6
	Access to affordable dental care	29.2%	6.5%	2.6
	Teen pregnancy	23.4%	1.2%	2.5
	Strokes	23.5%	1.8%	2.5
	Access to prenatal and postnatal care	16.7%	0.3%	2.5
	Access to resources for non-English speaking residents	20.6%	3.6%	2.4
	Access to resources for people with criminal records	19.0%	1.2%	2.3
Least Severe				

Least Severe Problem

Loudon County Community Health Assessment 2023

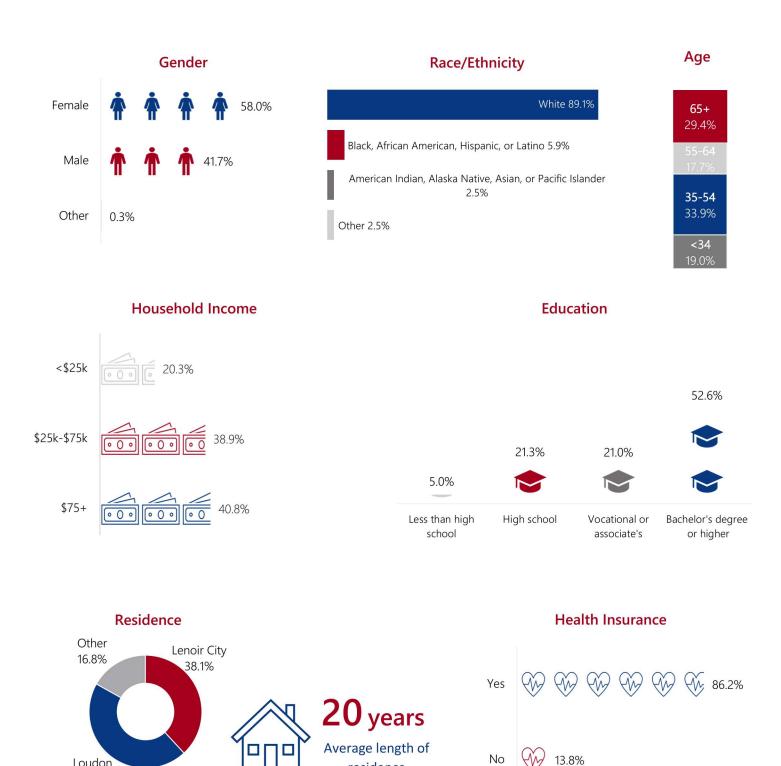
Satisfaction with current efforts to address problem

Less Satisfie	d	1	2	3	4	5
	Access to prenatal and postnatal care	1.0				
	Access to resources for people with criminal records	1.3				
	Access to resources for non-English speaking residents	1.5				
	Access to affordable health care	1.6				
	Diabetes, youth and adult	1.6				
	Elder abuse and neglect	1.7				
	Access to affordable childcare	1.9	Ð			
	Access to affordable dental care	1.9	Э			
	Access to reliable and affordable transportation	1.9	€			
	Dementia or Alzheimer's disease	1.9	Э			
	Lack of jobs paying a living wage	1.9	Э			
	Access to affordable healthy food		2.0			
	Access to mental health care		2.0			
	Access to resources for veterans		2.0			
	Adult tobacco use including vaping and smokeless tobacco		2.0			
	Child abuse and neglect		2.0			
	Asthma and other respiratory diseases		2.2			
	Suicide		2.2			
	Lack of physical activity		2.4			
	Mental Illness		2.4			
	Substance abuse and addiction		2.4			
	Youth tobacco use including vaping and smokeless tobacco		2.4			
	Domestic violence including sexual assault		2.5			
	Heart disease		2.5			
	Lack of affordable housing and homelessness		2.5			
	Cancer		2	.6		
	Alcohol abuse			2.7		
	Teen pregnancy			2.7		
	Lack of basic reading and writing skills			2.8		
	Strokes			3.3		

More Satisfied

Loudon County Community Health Assessment 2023

Who responded to our community survey?



residence

UT SWORPS' Center for Applied Research and Evaluation

Loudon

45.1%

Appendix D

2023 Loudon County Focus Group Results

Four focus groups were completed with Loudon County community leaders for the Loudon County Community Needs Assessment. The purpose of the focus groups was to reassess the health issues identified in 2020 facing residents of Loudon County, especially residents from vulnerable populations; to identify how the COVID-19 pandemic has impacted the identified health issues; to identify what resources are currently available and what additional resources may be needed to address these health issues; and to identify additional community health needs. A total of 23 people participated in these focus group discussions, and approximately two-thirds did not participate in the 2020 focus groups. This report summarizes and synthesizes the content of these discussions; findings are presented using the moderator guide questions as headings.

Mental Health

How would you grade efforts to address mental health in your county since 2020 and why did you choose that grade?

Focus groups gave grades ranging from C to F for mental health and efforts to address the issue. The primary sentiment is that Loudon County has more mental health resources than it did in 2020, but there is still room for improvement. Some said that despite the improvement of mental health efforts, including efforts for those involved in the criminal justice system, it is difficult to connect people with assessments and resources because the needs are greater than the county's current capacity to address mental health. Efforts improved with the addition of behavioral health facilities to the county, but those facilities are not running at full capacity due to understaffing. Schools have received Adverse Childhood Experiences training, and some emergency medical service and law enforcement have received mental health assessment training. Mental health efforts in schools have also improved with the addition of school social workers. However, those social workers have large caseloads, and are working with the county's limited mental health resources, so their capacity to manage rising mental health needs is stifled. Some also note that since 2020, there has been a rise in social issues and concerns that impact mental health. The core response to mental health efforts in the county can be summed up as, *"We could still stand to see a whole lot more, but definitely an improvement since 2020."*

How has the COVID-19 pandemic affected mental health and efforts to address it in your county?

Focus group participants said the COVID-19 pandemic reduced staffing levels, which has impacted the amount of mental health care available in the county. Additionally, the number of people seeking mental health treatment has increased significantly among all age groups since 2020, which has put a greater strain on mental health resources. COVID-19 decreased socialization which increased mental health issues and related health concerns like substance abuse. Participants also said COVID-19 exacerbated existing mental health issues and highlighted problems that may have been previously overlooked. The pandemic caused many to put off seeking treatment for their mental health. Despite these issues causing worsening mental health, there were some positive aspects that came out of the

COVID-19 pandemic. For example, the pandemic made telehealth more accessible, and increased remote assessments in emergency departments and doctors' offices, which helped patients access services quicker. Some concern was shared over the level of connection patients receive with practitioners through telehealth compared to in-person interaction. Participants also shared that because of the pandemic, stigma around mental health has decreased. Specifically, parents were more likely to seek mental health support and therapy for their children.

What organizations and community resources are specifically available to address mental health in your county?

Cherokee Health Systems	Helen Ross McNabb	 East Tennessee Behavioral Health
Churches	Loudon Senior Centers	 Coordinated School Health
Mobile crisis unit	 Tellico Village & Stay in Tellico program 	 Acadia Healthcare
Southeast Tennessee Behavioral Health	 Peninsula 	

How would you rate the effectiveness of these efforts and what is lacking currently that would help?

Focus groups said that the effectiveness of some efforts is on the rise. Beyond the effectiveness of efforts previously mentioned, groups shared that some churches are offering mental health resources that are not strictly faith-based, and partnerships between mental health resources and churches could be helpful for promoting mental health information in the county. Schools are now offering educational sessions for parents and tools for teachers to help students address their mental health. Additionally, the mental health needs of older adults are a rising concern, particularly the mental toll of not knowing who to reach out to for help with daily tasks, and that programs that help older adults stay in their homes by assisting them with household tasks can be beneficial. The lack of mental health facilities, as well as counselors and psychiatrists in the area mean that people experiencing mental health crises are often ending up in places that are not appropriate for their situation, such as jail or an emergency department. Due to the county's limited mental health resources, individuals may need to be transported to services outside the county, taking away emergency medical services or law enforcement officers' time spent doing their job within the county. Moreover, some lines of work that encounter people experiencing mental health crises may not be adequately trained on how to handle those issues, such as law enforcement, emergency medical services, and primary care physicians. This puts additional strain on these professionals. The county needs more services that are available 24/7, particularly incounty, as many do not have the means to travel to another county for services. Participants again highlighted that the lack of staffing is impeding access to assessments and services, especially in-person

services, and causing long wait times to access mental health care. Issues with insurance can complicate mental health access and many people do not have insurance. This makes mental health treatment particularly difficult when in crisis, as barriers are harder to overcome when experiencing issues with mental health. Finally, participants shared that there seems to be a lack of awareness among mental health organizations and the public about what resources and services are available.

Chronic Disease Management

How would you grade efforts to address chronic disease management in your county since 2020 and why did you choose that grade?

Focus groups gave a grade of C for chronic disease management and efforts to address it. Participants said that there has been more progress made with chronic disease management than with mental health care. There are more telehealth options available now than in 2020 and health care providers seem to be doing more outreach, education, prevention, and follow-up. There has been an increase in providers setting up offices in the more populated areas of the county; however, there are typically long wait times to see doctors and some types of specialist care are only available in other counties. Participants emphasized their concerns associated with transportation to medical appointments but noted that senior centers typically offer transportation and on-site wellness programs. Local parks offer physical activity opportunities, and resources for food security have improved. The general outlook of the focus groups related to chronic disease management can be summed up as, *"I think we're striving and headed in the right direction."*

How has the COVID-19 pandemic affected chronic disease management and efforts to address it in your county?

Focus groups said that COVID-19 caused people to put off medical care which caused worsening health. They said the impact will likely be seen for years, but people are slowly returning to accessing care. Medical professionals are now frequently short-staffed and overbooked, and many physicians retired during the pandemic which may have impacted the amount of care available. COVID-19 increased telehealth, which made medical care more accessible, cut down on wait times, and promoted creative ways of connecting with patients. Additionally, some medical professionals conducted home and school visits to increase access to care during the pandemic. Despite the lack of health care access at the height of COVID-19, there now seems to be an increase in the number of people attending regular primary care visits and reaching out for education on managing their health and chronic conditions.

What organizations and community resources are specifically available to address chronic disease management in your county?

Telemedicine	Coordinated School Health	Loudon County Senior Center
Family Resource Center	 Loudon County Health Department 	UT Extension
Tennessee Commission on Aging and Disability		

How would you rate the effectiveness of these efforts and what is lacking currently that would help?

Focus groups noted that schools and senior centers offer quite a bit of health promotion. Schools have a coordinated health educator and conduct health campaigns and classes that are tailored to needs at each school, while senior centers may partner with organizations like the health department to offer education. Participants said that it may be beneficial to have more health education available at community gathering spots like churches and community centers and that health education should be simplified so patients can better understand their health and medical conditions. Local new outlets could partner with medical professionals and health educators to cover health topics and help explain chronic disease prevention and health management in simple terms, and case workers could help provide follow-up information to patients. Participants again identified the need for more staff so additional health education and services can be offered and said the county could benefit from more fitness classes and walking clubs, and that there needs to be greater awareness of health education opportunities in the county.

Substance Abuse

How would you grade efforts to address substance abuse in your county since 2020 and why did you choose that grade?

Focus groups gave a grade of C to substance abuse and efforts to address the issue, saying that local organizations and schools are improving efforts, but substance abuse hasn't changed. Substance abuse is a cycle, and available drugs are becoming more deadly. There has been a significant increase in substance abuse, overdoses, and fatal overdoses since 2020, and participants suggested that the county needs to be proactive and offer more preventative measures and education. The county has offered drug takeback days, and the health department has Narcan and fentanyl testing strips, but there aren't enough resources for people seeking to address addiction. Schools are also seeing more substance abuse now than they had previously, including vaping and THC. Students caught with substances are required to take a class, but participants said that both parents and students need to be educated and underlying mental health concerns should be addressed. Focus groups' outlook on substance abuse in the county can be summed up as, *"The needle doesn't move, but not due to lack of effort."*

How has the COVID-19 pandemic affected substance abuse and efforts to address it in your county?

Focus groups acknowledged the connection between mental health and substance abuse, saying that COVID-19 caused an increase in mental health issues which led to an increase in substance abuse and overdoses. Addiction and recovery programs couldn't meet during the height of the pandemic, which increased isolation, and providers who could help people deal with substance abuse were typically full and not accepting patients. COVID-19 also impacted the level of funding for some organizations. Those who saw an increase in funding to address issues related to substance abuse are concerned those funds could be removed when they feel it should be expanded to meet the rising need for substance abuse treatment.

What organizations and community resources are specifically available to address substance abuse in your county?

• Align9	Prevention Alliance of Loudon County	 Schools
Celebrate Recovery	Helen Ross McNabb	American Addiction Center
Loudon County Health Improvement Council	Beauty for Ashes Freedom House	 Loudon County Health Department
Mental Health Association of East Tennessee	AligningSTRIDES	 Shangri-La Therapeutic Academy of Riding (STAR)
Cornerstone of Recovery	Law enforcement	

How would you rate the effectiveness of these efforts and what is lacking currently that would help?

Focus groups said that effective efforts from local organizations working to address substance abuse have increased, and law enforcement has been cracking down on substance abuse related activities. Efforts have included increases in connecting people with services, offering educational activities and classes, and the development of a county-specific resource guide. Despite these efforts, focus groups said they would like to see more prevention education and that there are not enough facilities and resources to access the amount of substance abuse treatment that is needed in the county. Inpatient facilities in the county seem to be lacking, but there is at least one group recovery home. There was a lack of awareness whether the county has a drug court and participants said it would be beneficial to have a drug court in the county. Although a resource guide is now available, participants said that awareness of services and resources to address substance abuse could be improved, including among law enforcement and courts.

Tobacco Use

How would you grade efforts to address tobacco use in your county since 2020 and why did you choose that grade?

Focus groups gave a range of grades from C- to F for tobacco use and efforts to address the issue, saying that local organizations are trying to address the problem, but it is growing too rapidly to successfully manage. Vaping is on the rise among youth and has essentially replaced tobacco use. Schools have seen a rise in vaping and require students to take a class on the subject if they are caught vaping. Vaping has also grown due to the prevalence of vape shops and participants emphasized concerns that vaping is not well regulated, too accessible for youth, and stores that sell supplies are not being appropriately penalized for selling to underage people. The general sentiment of the focus groups can be summed up as, "You can replace tobacco with vaping...It's all about vaping."

How has the COVID-19 pandemic affected tobacco use and efforts to address it in your county?

Focus groups said that the number of people vaping and smoking seemed to increase since the pandemic started. Smoking can be associated with mental health, and the stress of COVID-19 increased the use of coping mechanisms like smoking. While youth were at home during the pandemic, they may have had access or experimented with vaping, especially if family members smoke or vape. Efforts to address the issue stagnated during the pandemic and particularly impacted health education for youth. Smoking and vaping were seen less in public during the pandemic, but it seems to have come back stronger than before as COVID-19 restrictions have subsided.

What organizations and community resources are specifically available to address tobacco use in your county?

Loudon County Health	Loudon County Senior	Schools
Department	Center	

How would you rate the effectiveness of these efforts and what is lacking currently that would help?

Focus groups said that the current efforts can be effective, but understaffing has made it difficult to provide the appropriate amount of education and resources. Vaping is more accessible than the quality care needed to address underlying issues like mental health, and preventative education for youth could be increased. The health department teaches a program about vaping in the schools, but the classes take place after students are in trouble, so proactive education that is taught in a way that relates to youth may be a helpful addition to educational efforts. Furthermore, participants said that parents need education on this issue, but it can be difficult to relay messages if the parents smoke or vape or are already providing their children with vaping supplies. Educational efforts may need to look beyond simply sharing information and help people understand why they are being given certain guidance.

Are there other significant issues that have arisen since 2020 that need to be considered as priorities for action over the next three years?

Focus group participants were asked to share additional issues they felt may need to be prioritized. Participants noted that lack of affordable housing and food insecurity are issues that need to be addressed because housing and food impact many aspects of health. Several other concerns stemmed from the health issues discussed above, including increasing recovery support services and substance abuse replacement therapy options; increasing health care access and addressing the rise in sexually transmitted infections among older adults; increasing access to crisis mental health care for youth experiencing suicidal thoughts; and addressing staffing shortages across all health care and education settings.

APPENDIX E - Select Secondary He	alth Statistics	;				
2023 Loudon County Comr			sment			
2023 Loudon County Conn	Loudon		United States		Veer	Data Source
Community Drivers of Health	Loudon	Tennessee	United States		Year	Data Source
Community Drivers of Health Unemployment rate	3.4%	4.3%	3.5%	% of population aged 16 and older unemployed but seeking work	2022	US Department of Labor
Graduated high school	87%	4.3%	89%	Percent of adults age 25 and older with high school diploma or equivalent		County Health Rankings
Some College	51.0%	63%	67%	% of adults ages 25-44 with some post-secondary education	2017-21	
Bachelor degree or higher	28.2%	31%	54%	% of persons 25 age years+ with Bachelor degree or higher	2017-21	U.S. Census Bureau
Poverty rate (all residents)	9.6%	15%	11.6%	% of residents living in households who's income does not cover basic needs	2022	United States Census
Children in poverty	16%	21%	17.0%	% of children under 18 in poverty	2021	American Community Survey
Children in single-parent homes	16%	28%	25%	% of children that live in a household headed by single parent	2021	American Community Survey
Hispanic and latino population	9.8%	6.1%	19.0%	% of the population identifying as hispanic or latino	2022	U.S. Census Bureau
Severe housing cost burden	9%	11%	14%	% of households that spend 50% or more of their income on housing	2021	American Community Survey
Median household income	\$66,151	\$59,700	\$69,700	Median household income	2021	U.S. Census Bureau
Access to Healthcare						
Adults without health insurance	15.0%	15%	12%	% of population under age 65 without health insurance	2020	U.S. Census Bureau
Children without health insurance	8%	6%	5%	% of children under age 19 without health insurance	2020	County Health Rankings 2022
Persons with a disability	070	29.0%	26.0%	% of population disabled	2020	Center for Disease Control and Prevention
Mental health providers	1,830:1	560:1	340:1	ratio of population to mental health providers	2021	CMS, National Provider Identification file
Primary care physicians	2,030:1	1,400:1	1,310:1	ratio of population to primary care physicians	2022	Area Health Resource File/American Medical Association
Other primary care providers	1,180:1	600:1	810:1	ratio of population to other non physician primary care providers	2022	County Health Rankings 2022
Dental providers	2,020:1	1,790:1	1,380:1	ratio of population to dentist	2022	County Health Rankings 2022
Immunizations		,	,			
Flu vaccine rate elderly	60.0%	52%	51%	% of Medicare enrollees that had an annual flu vaccination	2020	Mapping Medicare Disparities Tool
Flu vaccine rate 24 month old	36.6%	51.3%	NA	Vaccine rates: 24 months	2020	Immunization Status Survey of 24 month children
Households with Broadband Internet	84%	84.0%	87.00%	% of households with broadband internet subscription	2021	U.S. Census Bureau
Active and Healthy Living						
Life expectancy	77.5	75.3	78.5	Average number of years a person can expect to live	2020	www.cdc.gov/nchs/fastats/life-expectancy.htm
Physical inactivity	23%	24%	22%	% of adults age 20 and over reporting no leisure time physical activity	2020	CDC Diabetes Interactive Atlas
Access to exercise opportunities	57%	68%	84%	% of population with adequate access for physical activity	2022	2022 County Health Rankings
Food Insecurity	11%	13%	12%	% of population who lack adequate access to food	2020	2022 County Health Rankings
Limited access to healthy food	5%	9%	6%	% of population that are low-come and who do not live close to grocery store	2019	USDA Food Environment Atlas
Adult obesity	36%	36%	32%	% of adults that report a BMI> 30	2020	CDC Diabetes Interactive Atlas
Overweight/Obese youth	43.7%	39.7%	NA	Overweight or obesity prevalence among TN public school students	2021	Coordinated School Health
Behavioral Health						
Suicide rates	14	17	14	Number of deaths due to suicide per 100,000 population (age-adjusted).	2020	Death Statistics: VRS
Frequent mental distress	17%	17%	14%	% of adults reporting 14 or more days of poor mental health per month.	2020	Behavioral Risk Factor Surveillance System
Poor mental health days	4.9	5.0	4%	Average number of mentally unhealthy days reported in past 30	2020	County Health Rankings
Chronic Disease					1	
Cancer death rate	224.0	164.4	144	Number of deaths from malignant neoplasms per 100,000 population	2020	Death Statistics: VRS
Diabetes	10%	13%	9%	% of adults age 20 and over with diagnosed diabetes	2020	CDC Diabetes Interactive Atlas
Heart disease death rate	195.10	212	209.6	Number of deaths from diseases of the heart per 100,000 population	2020	2022 County Health Rankings and Kaiser Family oundation
Injum and Violance						
Injury and Violence	110	100	70	tt of dooths due to inium per 100 000 per ulation	2020	CDC WONDER Mortality data
Injury deaths Homicides	110	100 8	76 6	# of deaths due to injury per 100,000 population # of deaths due to homicide per 100,000 population	2020	CDC WONDER Mortality data
Firearm fatalities	13	8 19	12	# of deaths due to firearms per 100,000 population # of deaths due to firearms per 100,000 population	2020	FBI-gov/crime-in-the-usa. FBI-gov/crime-in-the-usa.
	13	13	12		2020	n br 5047611161161161161
Maternal and Child Health			-			
Neonatal Abstinence Syndrome	15 / 19.5	539 / 6.6	NA	Number of NAS cases / Rate of NAS cases per 1,000 live births	2021	https://datacenter.kidscount.org/data/tables/8288-
Low birth weight	8%	9%	8%	% of live births with low birthweight (<2500 grams)	2020	National Center for Health Statistics - Natality files
Reproductive and Sexual Health						
Sexually transmitted Infections	272	555.1	481.3	# of newly diagnosed chlamydia cases per 100,000 population	2020	National Center for HIV/AIDS, Viral Hepatitis/STD
Teen births	29	27	19	# of births per 1,000 female population ages 15-19	2020	National Center for health statistics-Natality files

2023 Loudon County Commu	inity Hea	alth Asses	sment			
	Loudon	Tennessee	United States		Year	Data Source
HIV prevalence	78	314	380	# of persons living with a diagnosis of HIV per 100,000	2020	Kaiser Family Foundation
Substance Use and Abuse						
Alcohol impaired driving deaths	21%	23%	27%	# of driving deaths with alcohol involvement	2019	Fatality Analysis Reporting System
Excessive drinking	16%	17%	19%	% of adults reporting binge or heavy drinking	2020	Behavioral Risk Factor Surveillance system
Adult smoking	20%	20%	16%	% of adults who are current smokers	2020	Behavioral Risk Factor Surveillance system
Number of patients receiving opioids for pain	10,639	1,154,475	NA	Number of patients receiving opioids for pain	2022	Tennessee Drug Overdose Dashboard
Opioid prescriptions	610	620	NA	Number of Opioid prescriptions per 1000 population	2022	CDC.gov/drugoverdose/maps
All drug overdose deaths	34	3,814	NA	Total number of reported deaths from overdoses, *includes alcohol	2021	Tennessee Drug Overdose Dashboard
Opioid drug overdose deaths	29	3,043	NA	Total number of reported deaths from opioid drug overdoses	2021	Tennessee Drug Overdose Dashboard
Non fatal drug overdoses outpatient visits	150	20,485	NA	Non fatal drug overdoses outpatient visits	2021	Tennessee Drug Overdose Dashboard
Non fatal drug overdose inpatient stays	56	7,008	NA	Non fatal drug overdose inpatient stays	2021	Tennessee Drug Overdose Dashboard
COVID-19						
Leading cause of death	3rd	3rd	4th	Leading causes of death	2022-April	CDC.org
Deaths from COVID-19	227	29,522	1,124,063	Total COVID-19 cases from inception through April 2023	2023-April	tn.gov/health
Number of Cases	18,991	2,539,120	103,266,404	Total COVID-19 cases from inception through April 2023	2023-April	tn.gov/health
Number of Hospitalizations	227	53,991	NA	Total COVID-19 hospitalizations from inception through April 2023	2023-April	tn.gov/health & gis.cdc.gov/grasp/COVIDNet/COVID19
Vaccinated						
% of residents with at least one dose	NA	57.8%	NA	COVID-19 vaccinations through April 2023	2023-April	https://covid19.tn.gov
% of residents who are fully vaccinated	51.0%	45.9%	NA	COVID-19 vaccinations through April 2023	2023-April	https://covid19.tn.gov
% of residents who received a booster	7.0%	6.2%	NA	COVID-19 vaccinations through April 2023	2023-April	https://covid19.tn.gov
Comparable data not found						