



Delta Region Community Health Systems Development (DRCHSD) Program

2021 Community Health Status Report Henry County Medical Center, Paris, TN

The below tables and graphs provide information from a variety of secondary data sources about demographics, social and economic factors, quality indicators, and identification of other HRSA grants in the region. Please note, the data collected for this report is the most current information as of February 2021. Where available, comparative data is provided for the average of the state and US. Please refer to [Appendix A](#) for a description of the secondary data indicators and sources. Refer to [Appendix B](#) to learn how to look up the secondary data for yourself.

Hospital Overview (AHA)

Hospital Name	Henry County Medical Center
Address	301 Tyson Ave Paris, TN 38242
Overall County Health Ranking	55 out of 95
CEO	Lisa Casteel

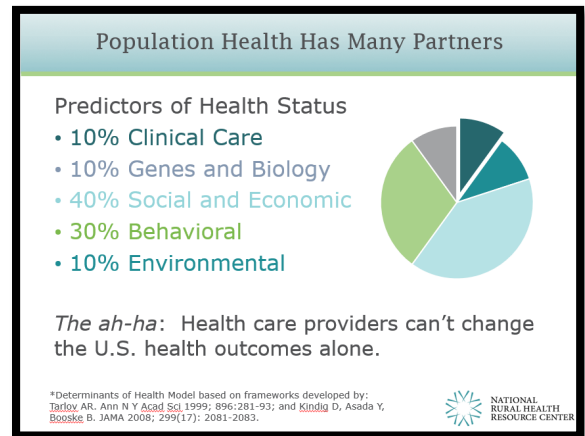


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WHY POPULATION HEALTH?

The US health care industry is undergoing changes in financing and service delivery from one that rewards "volume" to one that is based on "value". The new health industry goals are articulated in the Institute for Healthcare Improvement's (IHI) Triple Aim¹:

- *Improve health of population*
- *Improve patient care (quality and satisfaction)*
- *Lower health costs per person*



The Triple Aim acknowledges that clinical care alone cannot improve community health outcomes. Social and economic conditions in the environment where people are born, live, work, play and age affect health. ² These determine a community's ability to embrace healthy behaviors. ³



¹ The IHI Triple Aim. (n.d.) [Institute for Healthcare Improvement](#)

² Social Determinants of Health. (n.d.) [Healthy People 2020](#)

³ Community Commons. (n.d.) [Community Health Needs Assessment \(CHNA\) Health Indicators Report](#).

Hospitals and clinics who use population health strategies can more effectively use community resources to address identified concerns. It also provides a common framework from which local health care systems, government/ non-government agencies, and organizations can work together to improve the health of their community.⁴

⁴Milken Institute School of Public Health. George Washington University (2015, April 27). [What is Population Health?](#)

HOW TO GET STARTED

This document compiles secondary data (obtained from state and federal sources) about your local county and state. This is not all the data available for your location, but merely a snapshot. We hope that you will find this document understandable to such an extent that you will confidently share this material with anyone you meet.

In the future, we will use this information, along with input from your hospital/clinic leadership and community joint partners, to agree on some specific community health needs. We call these priority areas. Next, you, your hospital/clinic leadership, and community partners will determine some action steps that can be taken to address those needs. Sometimes that looks like an education program, opening a new clinic, addressing transportation needs, helping patients with mental health needs get appropriate care, and much more. You play a BIG role in changing the health of your community!

In the future, you can track specific measures by referring to the websites cited for more current information. A "How to" is included in [Appendix B](#), Secondary Data Search Steps to do Yourself.





Background

HCMC is a progressive, integrated health care organization committed to serving the health care needs of Henry County and the adjoining region. Comprised of a 142-bed hospital, the 136-bed Henry County Healthcare Center (providing residential care and the Plumley Rehabilitation Unit), an Emergency Medical Service, an off-site Center for Wellness & Rehabilitation and a Home Health and Hospice service, the medical center provides a variety of outpatient services as well as inpatient care and serves Henry and the surrounding counties.

Located in Paris, Tenn., the medical center provides affordable, high-quality, patient-centered care that respects the privacy, needs and dignity of each individual, regardless of their ability to pay.

HCMC is a county-owned and operated, nonprofit institution affiliated with the Tennessee Hospital Association.



Mission and Vision⁵

The mission of Henry County Medical Center is to provide the highest quality, affordable healthcare services and education to the citizens of Henry County and the adjoining counties, helping to improve the quality of health in the region.

Vision: Transforming our community's health through nationally recognized, accessible, and sustainable healthcare.

Organizational Goals⁶

Henry County Medical Center will provide affordable, high-quality, patient-centered care that respects the privacy, needs and dignity of each individual, regardless of their ability to pay. As an organization, it will continue to be a county-owned and operated, not-for-profit institution, which will treat all who come to it equitably, regardless of race, gender, religion, age, national origin or handicap. All of this will be done in a cooperative environment, which fosters the wellbeing and excellence of its employees, volunteers, board of trustees and medical staff. The Medical Center will continuously strive to improve the value of its services to the region.

⁵ <https://www.hcmc-tn.org/about-hcmc/mission-vision/>

⁶ <https://www.hcmc-tn.org/about-hcmc/mission-vision/>

Demographics

The population in Henry County has remained stable from 2010 to 2019 compared to Tennessee and the Nation. This county has a higher percentage of disabled population compared to the state and national averages (17.1% compared to 11.0% and 8.6%). A high percentage of the population of this county lives in an area designated as 'rural', 66.8% compared to state, 33.6% and national averages, 19.3%. Additionally, it has a higher percentage of people 65+, 23.8% compared to the state of Tennessee, 16.7% and the Nation, 16.5%. It is common to see a higher proportion of seniors in rural areas compared to state and national averages. Henry County has an average high school graduation rate (85.9% vs. 87.5% and 88%) and lower than average percentage of the population with a Bachelor's degree or higher, 16.5% compared to the state, 27.3% and the Nation, 16.5%.

	County	State	Nation
Population ⁷	32,345	6,829,174	328,239,523
% Rural Population 2010 ⁸	66.8%	33.6%	19.3%
Population Age 65+ ⁷	23.8%	16.7%	16.5%
Population Below 18 ⁷	20.4%	22.1%	22.3%
Population Change 2010-2019 ⁷	0.0%	7.6%	6.3%
Veteran Population ⁷	2,817	431,274	18,230,322
With a disability, under age 65 years, percent, 2015-2019 ⁷	17.1%	11.0%	8.6%
High School Graduate or Higher, percent of persons age 25 years+, 2015-2019 ⁷	85.9%	87.5%	88%
Bachelor's degree or higher, percent of persons age 25+, 2015-2019 ⁷	16.5%	27.3%	32.1%

⁷ U.S. Census Bureau QuickFacts: United States. (2021). Retrieved 20 January 2021, from <https://www.census.gov/quickfacts/fact/table/US/PST120219#PST120219>

⁸ County Demographics data from [County Health Rankings & Roadmaps](#).

Social & Economic Factors

Henry County's per capita income is lower than the state and Top U.S. Performers (\$40,502 vs \$53,320 and \$62,843). Consequently, Henry County has a higher percentage of children in single-parent households (31%), and higher unemployment rates (4.1%) than the state and national averages. The uninsured population for Henry County is the same as that of the state of Tennessee (12%). The 150% Federal Poverty Level measures annual cash income for an individual or family. These numbers show the people eligible for programs, subsidies, and benefits like SNAP, Head Start, Children's Health Insurance Program, and the National School Lunch Program. Adults at or below Level 1 Literacy Level refers to the percentage of the population in a given area that may only be able to understand very basic vocabulary or struggle with being illiterate. Adults at or below Level 1 Numeracy may only be able to count, sort, and do basic arithmetic operations with whole number and be functionally innumerate. These levels are important to consider when sharing health information with the general population.

	County	State	Top U.S. Performers
Median Household Income, 2015-2019 ¹⁰	\$40,502	\$53,320	\$62,843
Per Capita income in last 12 months, (in 2019 dollars) ¹⁰	\$24,124	\$29,859	\$34,103
Unemployment Rates 2019 ⁹	4.1%	3.4%	2.6%
Uninsured Population ⁹	12%	12%	6%
Children in single-parent households ⁹	31%	29%	20%
Children eligible for free or reduced lunch ¹²	50.2%	46.7%	32%
2019 Persons Below 150% Federal Poverty Level ¹⁰	10,550	1,641,903	65,139,120
Adults at or below Level 1 Literacy Level ¹¹	24%	22%	22%
Adults at or below Level 1 Numeracy Level ¹¹	38%	34%	32%

⁹ County, State, and Top U.S. Performers Social & Economic Factors data from [County Health Rankings & Roadmaps](#).

¹⁰ County, State and National Data from [US Census Bureau](#). 2019

¹¹ National Center for Education Statistics. (2021). U.S. Skills Map: State and County Indicators of Adult Literacy and Numeracy. Retrieved 11 February 2021, from <https://nces.ed.gov/surveys/piaac/skillsmap/>

¹² Free and Reduced Lunch Participation, from [Kids Count Data Center](#)

Health Behavior and Outcomes

Henry County ranked 73 out of 95 counties in Tennessee for health behaviors. Health behaviors, such as physical activity and eating healthy foods, can lead to positive health outcomes such as longer life, mobility, mental wellness, healthy pregnancies and births, prevention of chronic and acute disease, and management of chronic disease. Socially isolated individuals have an increased risk for poor health outcomes, including chronic disease, unhealthy behaviors, and obesity. Henry County has a higher percentage of people citing adult smoking (27%), physical inactivity (34%), alcohol impaired driving deaths (38%), and poor mental health days (5.7) than Top U.S. Performers. The use of cigarettes, lack of physical activity, dietary choices and other elements can lead to numerous chronic diseases and comorbidities including cardiovascular disease, diabetes, and cancer. Alcohol impaired driving results in more unintentional injuries and higher mortality rates. Additionally, the rates of people who regard themselves as having poor or fair health is 24% County, 21% State, and 12% Top U.S. Performers. This measure relates to quality of life and describes how healthy people are while alive. People who rate themselves as “poor or fair health” have a twofold higher mortality risk than persons with “excellent” health.¹² Teen birth rates are also higher in Henry County, 39/1,000 compared to State, 29/1,000 and Top U.S. Performers, 13/1,000.

	County	State	Top U.S. Performers
Adult Smoking ¹²	27%	21%	14%
Physical Inactivity ¹²	34%	27%	20%
Drug Overdose Deaths per 100,000 ¹²	27	28	10
Excessive Drinking ¹²	16%	17%	13%
Poor or Fair Health ¹²	24%	21%	12%
Teen Births per 1,000 females aged 15-19 ¹²	39	29	13
Obese Adults >age 20 BMI >30 ¹²	34%	33%	26%
Alcohol Impaired Driving Deaths ¹²	38%	25%	11%
Poor Mental Health Days reported in the last 30 days ¹²	5.7	5.2	3.4

¹² County, State, and Top U.S. Performers Health Behaviors data from [County Health Rankings & Roadmaps](#).

Physical Environment

Henry County ranked 7 out of 95 counties on Physical Environment. Henry County has a Food Environment Index slightly higher than the state of Tennessee (7.1 vs 6.2). This measure rates proximity to healthy foods and cost on a 0 (worst) to 10 (best) scale. Lower scores correlate with higher prevalence of overweight, obesity, and premature death. Severe housing problems are also seen in Henry County, 11%, compared to 9% in the top U.S. performers. However, this is slightly lower than the state of Tennessee at 14%. This relates to high housing costs, overcrowding, and lack of plumbing facilities. Lastly, 20% of people in Henry County report a long commute, which is less than the state of Tennessee at 35%, but still higher than the Top U.S. Performers at 16%. This implies good jobs are not located close to home. Long commuters typically have higher blood pressure and body mass index contributing to obesity than those who work close to home.

	County	State	Top U.S. Performers
Food Environment Index ¹³	7.1	6.2	8.6
Severe Housing Problems ¹³	11%	14%	9%
Air pollution-particulate matter (av daily density of particulate matter in $\mu\text{g}/\text{m}^3$) ¹³	8.4	8.8	6.1
Long Commute (>30min) ¹³	20%	35%	16%



¹³ County, State, and Top U.S. Performers Physical Environment data from [County Health Rankings & Roadmaps](#).

Clinical Care

Henry County ranked 14 out of 95 counties for Clinical Care. Residents have a fewer number of mental health providers, primary care physicians, and dentists compared to the state of Tennessee and Top U.S. Performers. They also have a higher rate of preventable hospital stays per 100,000 Medicare enrollees related to ambulatory care, 5,099 compared to Top U.S. Performers, 2,761. The preventable hospital stays measure, rates the hospital stays pertaining to ambulatory-care sensitive (relating to the ability to walk) conditions. These patients are suggested to have received less than ideal outpatient care that resulted in a hospital stay. This measure is classified as a quality and access measure. Lastly, Henry County has a higher percentage of residents receiving flu vaccinations, 53% compared to Tennessee, 50%, and Top U.S. Performers, 53%. Unfortunately, this measure only takes into account Medicare fee-for-service enrollees and may miss trends pertaining to young and people not enrolled in Medicare.

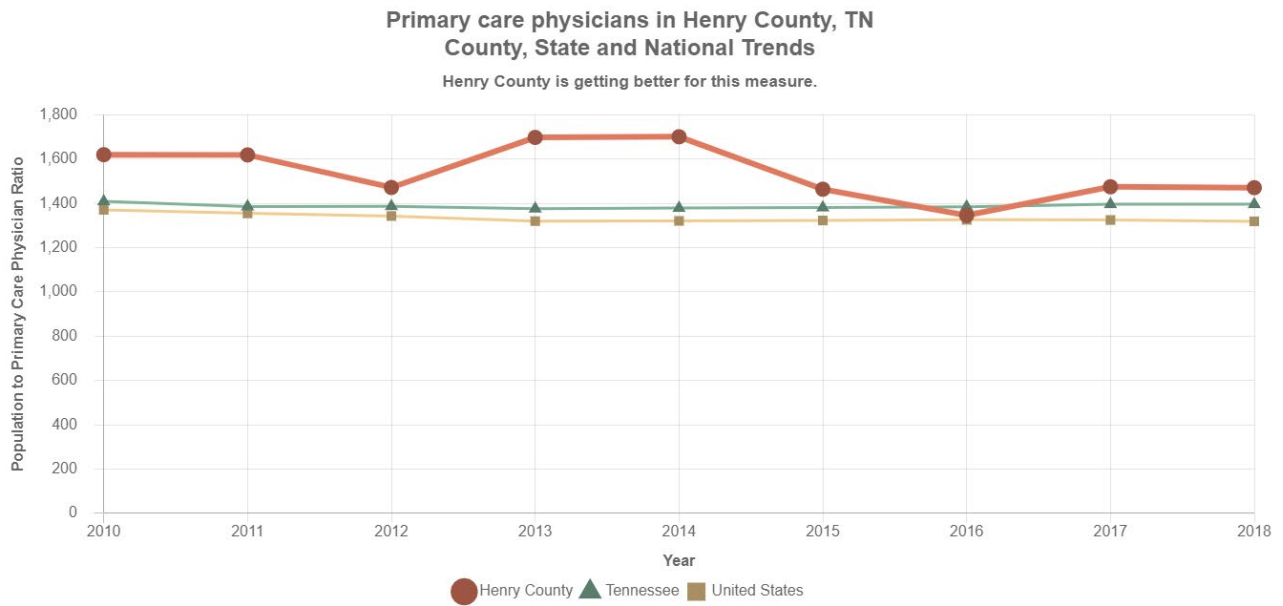
	County	State	Top U.S. Performers
Primary Care Physicians ¹⁴	1,470:1	1,400:1	1,030:1
Mental Health Providers ¹⁴	530:1	630:1	290:1
Preventable Hospital Stays Related to Ambulatory-Care per 100,000 Medicare Enrollees ¹⁴	5,099	4,915	2,761
Flu Vaccinations ¹⁴	53%	50%	53%
Access to Dentists per 100,000 ¹⁴	1,900:1	1,800:1	1,240:1
Mammography screening: Medicare Enrollees ages 65-74 that received annual screening ¹⁴	42%	41%	50%

¹⁴ County, State, and Top U.S. Performers Clinical Care data from [County Health Rankings & Roadmaps](#).

The graph below shows in another way, that Henry County has had a shortage of primary care physicians compared to the state of Tennessee going back to at least 2010. Availability of primary care physicians and dentists is essential for individuals to receive preventative care and referrals to appropriate specialty care.



Figure 1.



Notes:
The data in this table reflect the average population served by a single primary care physician.

Fig. 1. Primary care physicians in Henry County, TN County, State, and National Trends, 2010-2018. Graph from County Health Rankings, *Henry County, TN*. Retrieved from <https://www.countyhealthrankings.org/app/tennessee/2021/rankings/henry/county/outcomes/overall/snapshot>

Health Outcomes

Life expectancy in Henry County is 74.3 years, which is below 76.0 years for Tennessee and Top U.S. Performers, 81 years. This measure is easier to understand than years of potential life lost and is an important population health outcome measure. Injury deaths are an important measure because injuries are one of the leading causes of death of those under 45 years old. Poisoning, motor vehicle deaths, and falls are included under unintentional injuries and suicides and homicides fall under intentional injuries. Injuries are also a significant portion of emergency department visits. The injury death rate in Henry County, 119/100,000 is higher than the state of Tennessee, 92/100,000 and Top U.S. Performers, 58/100,000.

	County	State	Top U.S. Performers
Life Expectancy ¹⁵	74.3	76.0	81.1
Premature Age-Adjusted Mortality (YPLL) ¹⁵	530	450	270
Infant Mortality per 1,000 in one year ¹⁵	-*	7	4
Diabetes Prevalence ¹⁵	18%	13%	7%
Injury Deaths per 100,000 ⁹	119	92	58



¹⁵ County, State, and Top U.S. Performers Health Outcomes data from County Health Rankings & Roadmaps <https://www.countyhealthrankings.org/explore-health-rankings>

*No county-level data is available for this measure.

Patient Survey Rating ¹⁶

Survey of patients' experiences: HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) is a national survey that asks patients about their experiences during a recent hospital stay. These scores are important because they provide comparable data from a patient's perspective between hospitals. They take into account patient satisfaction and perception of care and not just the outcome of the patient. Reimbursements are also linked to HCAHPS scores and organizations need to take the results seriously to maximize reimbursements. Use the below scores with caution, as the number of surveys may be too low to reliably assess hospital performance in rural areas. *Source: [Medicare.gov](https://www.medicare.gov)*

Patients who reported:

	Organization	State	Nation
Nurses "always" communicated well	78%	81%	81%
Doctors "always" communicated well	82%	82%	82%
"Always" received help as soon as they wanted	64%	70%	70%
Staff "always" explained about medicines before giving it to them	64%	66%	66%
Their room and bathroom was "always" clean	78%	74%	76%
Area around their room was "always" quiet at night	72%	65%	62%
YES, they were given information about what to do during their recovery time	87%	86%	87%
"Strongly Agree" they understood their care when they left the hospital	54%	52%	54%
Gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	72%	72%	73%
YES, they would definitely recommend the hospital	70%	70%	72%

¹⁶ Medicare.gov. [Patient Survey Rating](https://www.medicare.gov)

Web Presence

<https://www.hcmc-tn.org/e>

APPENDIX A

DESCRIPTION OF SECONDARY DATA INDICATORS

Data Areas	Description	Source and Dates
Population	Total population count.	<i>US Census Bureau, Quick Facts: County, State, and United States. 2019</i>
% Population Living in Rural	Percentage of population living in rural areas. Rural areas are identified using population density, count, and size thresholds.	<i>US Census Bureau (2019). <i>2010 Census Urban and Rural Classification and Urban Area Criteria</i>.</i>
Population Age 65+	Estimated percentage of the population in the report area age 65 or older.	<i>US Census Bureau, Quick Facts: County, State, and United States. 2019</i>
Population Below 18	Estimated percentage of the population in the report area under 18 years of age.	<i>US Census Bureau, Quick Facts: County, State, and United States. 2019</i>
Population Change 2010 - 2018	Total change in total population between the years April 1, 2010- July 1, 2018.	<i>US Census Bureau, Quick Facts: County, State, and United States. 2010-2018</i>
Veteran Population	Percentage of the population age 18 and older that served (even for a short time), but is not currently serving, on active duty in the U.S. Army, Navy, Air Force, Marine Corps, or the Coast Guard, or that served in the U.S. Merchant Marine during World War II.	<i>US Census Bureau, Quick Facts: County, State, and United States. 2013-2017.</i>
With a disability, under and 65 years, percent, 2015-2019	Percentage of the total civilian non-institutionalized population with a disability.	<i>US Census Bureau, Quick Facts: County, State, and United States. 2015-2019</i>

High School Graduate or Higher, percent of persons age 25 years+, 2015-2019	Percentage of persons ages 25 of older with a high school degree or higher	<i>US Census Bureau, Quick Facts: County, State, and United States. 2015-2019</i>
Bachelor's degree or higher, percent of persons age 25+, 2015-2019	Percentage of persons ages 25 of older with Bachelor's degree or higher	<i>US Census Bureau, Quick Facts: County, State, and United States. 2015-2019</i>
Median Household Income, 2015 - 2019	Income where half of households in a county earn more and half of households earn less.	<i>US Census Bureau, Quick Facts: County, State, and United States. 2019</i>
Per Capita income in last 12 months, 2019	Mean income computed for every man, woman, and child in a particular group. Dividing the aggregate income of a particular group by the total population of the group.	<i>US Census Bureau, Quick Facts: County, State, and United States. 2019</i>
Unemployment Rates, 2018	Total unemployment of the civilian non-institutionalized population age 16 and older (non-seasonally adjusted).	<i>County Health Rankings data from the Bureau of Labor Statistics. 2018</i>
Uninsured Population	Percentage of population under age 65 without health insurance	<i>County Health Rankings data from US Census Bureau, Small Area Health Insurance Estimates. 2017.</i>
Children in Single Parent Households	Percentage of children that live in a household headed by a single parent. 5 year estimates	<i>County Health Rankings data from the American Community Survey. 2014-2018</i>
Children Eligible for Free/Reduced Price Lunch	Public school students eligible for Free/Reduced Price lunch.	<i>County Health Rankings data from National Center for Education Statistics, NCES - Common Core of Data. 2016-2017.</i>
2019 Persons Below 150% Federal Poverty Level	An income measure used by the federal government to determine who is eligible for subsidies, programs, and benefits. Ex: four person federal poverty level household income=\$25,100	<i>US Census Bureau, 2019</i>

	(\$25,100)x1.5=\$37,650 or less	
Adults at or below Level 1 Literacy Level	Adults at this level can be considered at risk for difficulties using or comprehending print materials. Adults at the upper end of this level can read short texts in print or online and understand the meaning well enough to perform simple tasks, such as filling out a short form, but drawing inferences or combining multiple sources of texts may be difficult. Adults who are below level 1 may only be able to understand very basic vocabulary or find very specific information on a familiar topic. Some adults below level 1 may struggle even to do this and may be functionally illiterate.	<i>National Center for Education Statistics. (2021). U.S. Skills Map: State and County Indicators of Adult Literacy and Numeracy. Retrieved 11 February 2021, from https://nces.ed.gov/surveys/piaac/skillsmap/</i>
Adults at or below Level 1 Numeracy Level	Adults at this level can be considered at risk for difficulties with numeracy. Adults at the upper end of this level can understand how to add, subtract, multiply, and divide and can perform one-step mathematical operations with given values or common spatial representations. Adults who are below level 1 may only be able to count, sort, and do basic arithmetic operations with simple whole numbers and may be functionally innumerate.	<i>National Center for Education Statistics. (2021). U.S. Skills Map: State and County Indicators of Adult Literacy and Numeracy. Retrieved 11 February 2021, from https://nces.ed.gov/surveys/piaac/skillsmap/</i>
Adult Smoking	Percentage of adults who are current smokers.	<i>County Health Rankings data from the Behavioral Risk Factor Surveillance System. 2017</i>

Physical Inactivity	Adults aged 20 and older self-report no leisure time for activity, based on the question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?".	County Health Rankings data from Centers for Disease Control and Prevention, National Diabetes Surveillance System and the Behavioral Risk Factor Surveillance System. 2016.
Drug Overdose Deaths for 100,000	Number of drug poisoning deaths per 100,000 population	County Health Rankings data from the Compressed Mortality File. 2016-2018
Excessive Drinking	Percentage of adults reporting binge or heavy drinking.	County Health Rankings data from the Behavioral Risk Factor Surveillance System. 2017
Poor or Fair Health	Percentage of adults reporting fair or poor health on the BRFSS.	County Health Rankings from Behavioral Risk Factor Surveillance System, 2017.
Teen Births	Number of births to women ages 15 - 19 per 1,000 female population	County Health Rankings data from National Center for Health Statistics from the Centers for Disease Control and Prevention, National Vital Statistics System . 2012-2018.
Obese Adults	Adults aged 20 and older self-report that they have a Body Mass Index (BMI) greater than 30.0 (obese).	County Health Rankings data from Centers for Disease Control and Prevention, National Diabetes Surveillance System. 2016.
Alcohol Impaired Driving deaths	Percentage of driving deaths with alcohol impairment	County Health Rankings data from the Fatality Analysis Reporting System. 2014-2018
Poor Mental Health Days	Average number of mentally unhealthy days reported in the last 30 days (age adjusted).	County Health Rankings data from Behavioral Risk Factor Surveillance System, 2017.
Food Environment Index	Index of factors that contribute to a healthy food environment (0-worst and 10-best). This index considers income, recreation opportunities, food expenditure(s), and the distance of stores and restaurants.	County Health Rankings data from the U.S. Department of Agriculture Food Environment Atlas and Map the Meal Gap from Feeding America. 2015-2017

Severe Housing Problems	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities.	County Health Rankings data from the U.S. Department of Housing and Urban Development (HUD)'s Comprehensive Housing Affordability Strategy. 2012-2016.
Air Pollution-Particulate Matter	Average daily density of fine particulate matter in micrograms per cubic meter.	County Health Rankings data from the Center for Disease Control and Prevention's National Environmental Public Health Tracking Program. 2014
Long Commute	Among workers who commute in their car alone more than 30 minutes. 5 year estimates.	County Health Rankings data from the American Community Survey. 2014-2018
Access to Primary Care Physicians per 100,000	Number of primary care physicians per 100,000 population. Doctors classified as "primary care physicians" by the AMA include: General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs, and General Pediatrics MDs. Physicians age 75 and over and physicians practicing sub-specialties within the listed specialties are excluded	County Health Rankings data from the Area Health Resource File compiled by the American Medical Association, American Hospital Association, US Census Bureau, Centers for Medicare & Medicaid Services, and National Center for Health Statistics. 2017
Access to Mental Health Providers per 100,000	Ratio of the county population to the number of mental health providers including psychiatrists, psychologists, clinical social workers, and counsellors that specialize in mental health care.	County Health Rankings data from the National Provider Identification Registry and the National Plan and Provider Enumeration System. 2019
Preventable Hospital Stays	Rate of hospital stays for conditions that are ambulatory care sensitive (ACS) per 1,000 Medicare enrollees. ACS conditions include pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available	County Health Rankings data from the Centers for Medicare and Medicaid Services Office of Minority Health's Mapping Medicare Disparities Tool. 2017

	and accessed by those patients.	
Flu Vaccinations	Percentage of fee for service Medicare enrollees that had an annual flu vaccination.	County Health Rankings data from the Centers for Medicare and Medicaid Services Office of Minority Health's Mapping Medicare Disparities Tool. 2017
Access to Dentists per 100,000	Number of dentists per 100,000 population. This indicator includes all dentists - qualified as having a doctorate in dental surgery (D.D.S.) or dental medicine (D.M.D.), who are licensed by the state to practice dentistry and who are practicing within the scope of that license.	County Health Rankings data from the Area Health Resource File/National Provider Identification file maintained by the Centers for Medicare and Medicaid Services. 2018
Cancer Screening – Medicare Mammograms	Percentage of female Medicare enrollees, age 65-74, who have received an annual mammogram	County Health Rankings data from the Center for Medicare and Medicaid Services Office of Minority Health's Mapping Medicare Disparities Tool. 2017
Life Expectancy	Average number of years a person can expect to live.	County Health Rankings data from the National Center for Health Statistics and the National Vital Statistics System. 2016-2018
Premature Death Mortality	Years of Potential Life Lost (YPLL) before age 75 per 100,000 population for all causes of death, age-adjusted to the 2000 standard. YPLL measures premature death and is calculated by subtracting the age of death from the 75 year benchmark.	County Health Rankings data from the National Center for Health Statistics-Mortality Files from National Vital Statistics System.2016-2018
Infant Mortality	Rate of deaths to infants less than one year of age per 1,000 births.	County Health Rankings data from the Compressed Mortality File from CDC WONDER mortality data. 2012-2018
Diabetes Prevalence	Percentage of adults aged 20 and older who have ever been told by a doctor that they have diabetes.	County Health Rankings data from the National Diabetes Surveillance System using the Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. 2016

Unintentional Injury Deaths	Number of deaths due to injury per 100,000 population.	County Health Rankings data from CDC WONDER: Compressed Mortality File. 2014-2018
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Appendix B

SECONDARY DATA SEARCH STEPS TO DO YOURSELF

County Health Rankings

1. Go to <https://www.countyhealthrankings.org>
2. Click on "Explore Health Rankings"
3. Scroll down to "Find County Rankings" and type in your county. Your state should come up with it.
4. Scroll through measures
5. You can click on any blue measures, such as a "Premature Death", to compare to all other counties in your state on a specific measure.
6. While you have a measure selected, notice "Map, Data, Description, and Data Source" highlighted in blue. Each of these can also be clicked on to provide a better understanding of the data. Data shows you the actual numbers/data the graphs and rankings are based off. Description describes what was measured in greater detail. Data source tells you where the data originally came from (CDC, Census Data, etc).

United States Census Bureau (census data moving forward)

1. Go to <https://data.census.gov/cedsci>
2. Type in your county, state in the search box.
3. You can click "Explore the Data" box or scroll down to look at the data tables, maps, and pages related to that location.

OR

1. Got to <https://www.census.gov/>
2. Scroll down until you see a section titled "Access Local Data/QuickFacts" and click it.
3. Enter your state and hit enter. Enter your county and hit enter.
4. You can now see a table with a lot of census data.

Data USA

1. Go to <https://datausa.io/>

2. Search for your respective county and state in the search bar (i.e. Chicot County, Arkansas); Of note: Data USA does not accept search for "counties" and will not produce any search results.
3. Scroll down to the "About" section to see results appear for your county (i.e. population, poverty rates, etc.), scroll down to the "About" section. This information can be copied and pasted into the "Background Information" of your community health status report.
4. Other data measures can also be found on Data USA including COVID, civics, diversity, economy, housing & living, and health. For purposes of the CHSR, the only information that will be needed is in the "About" section as previously noted.

US Skills Map

1. Follow the link to <https://nces.ed.gov/surveys/piaac/skillsmap/> to locate your counties literacy and numeracy rates.
2. You will notice there is an area to search for both literacy and numeracy beneath the search bar. You can also switch between the county and state tabs above the search bar.
3. Search for your county and state literacy and numeracy rates for "At or Below Level 1". This selection should be defaulted upon opening the website.
4. "At or Below Level 1" literacy is defined as, "adults at risk for difficulties using of comprehending print material. Adults at the upper end of this level can read short texts, in print or online, and understand the meaning well enough to perform simple tasks, such as filling out a short form, but drawing inferences or combining multiple sources of text may be too difficult. Adults who are below Level 1 may only be able to understand very basic vocabulary or find very specific information on a familiar topic. Some adults below Level 1 struggle even to do this and may be functionally illiterate."
5. "At or Below Level 1" numeracy is defined as, "adults at risk for difficulties with numeracy. Adults at the upper end of this level can understand how to add, subtract, multiply, and divide and can perform basic one-step mathematical operations with given values or common spatial representations (e.g., calculate how many bottles of soda are in a full box with two levels when only the top level can be seen). Adults who are below Level 1 may only be able to count, sort, and do basic arithmetic operations with simple whole numbers and may be functionally innumerate."

Medicare.gov

1. Please reference "Hospital Compare" of the CHSR Template and follow the Patient Survey Rating link (<https://www.medicare.gov/care-compare/>)
2. Enter the fields of your location/city, provider type – "HOSPITALS" and name of your facility in the search field (For example: Chicot, Arkansas – Drew Memorial Hospital) and select "Search"
3. Hospital options will appear on the left side of your screen, click on the name of your hospital (when cursor hovers the facility name will become underlined). The hospital overall ratings and patient survey ratings will appear in addition to the facility location and contact information.
4. To find patient ratings for your hospital or clinic, scroll down to "Patient survey rating" and select "View Survey Details". This is where you will pull information into your CHSR Template to enter facility, state and nation averages.