

# Highpoint Health - Sumner with Ascension Saint Thomas

## 2024 Community Health Needs Assessment Sumner County, Tennessee

Conducted July 2024 to December 2024

**Highpoint Health - Sumner with Ascension Saint  
Thomas**

The goal of this report is to offer a meaningful understanding of the most significant health needs across Sumner County, with emphasis on identifying the barriers to health equity for all people, as well as to inform planning efforts to respond to those needs. Special attention has been given to the needs of individuals and communities who are at increased risk for poor health outcomes or experiencing social factors that place them at risk. Findings from this report can be used to identify, develop, and focus hospital, health system, and community initiatives and programming to better serve the health and wellness needs of the community.

Hospital legal name: Highpoint Health - Sumner with Ascension Saint Thomas Hospital

Hospital Address: 555 Hartsville Pike, Gallatin, TN 37066

Hospital website: <https://www.highpointhealthsystem.com/sumner>

Hospital phone: 615-328-8888

Hospital EIN/Tax ID: 27-2618766

The 2024 Community Health Needs Assessment report was adopted by Highpoint Health Governing Board on March 4, 2025, and applies to the following three-year cycle: July 1, 2025 to June 30, 2028  
This report can be found on Highpoint Health's public website.

**We value the community's voice and welcome feedback on this report. Please visit our public website (<https://highpointhealthsystem.com/chna>) to submit your comments.**

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## **Acknowledgements**

The 2024 Community Health Needs Assessment (CHNA) represents a true collaborative effort to gain a meaningful understanding of the most pressing health needs across Sumner County. Highpoint Health - Sumner with Ascension Saint Thomas is exceedingly thankful to the many community organizations and individuals who shared their views, knowledge, expertise, and skills with us. A complete description of community partner contributions is included in this report. We look forward to our continued collaborative work to promote a healthier, more equitable place to live, work and play.

We would also like to thank you for reading this report, and your interest and commitment to improving the health and well-being of Sumner County.

## Executive Summary

The goal of the 2024 Community Health Needs Assessment report is to offer a meaningful understanding of the most significant health needs across Sumner County. Findings from this report can be used to identify, develop, and focus hospital, health system, and community initiatives and programming to better serve the health and wellness needs of the community.

### Purpose of the CHNA

As part of the Patient Protection and Affordable Care Act of 2010, all not-for-profit hospitals are required to conduct a community health needs assessment (CHNA) and adopt an implementation strategy (IS) every three years. The purpose of the CHNA is to understand the health needs and priorities, with emphasis on identifying the barriers to health equity, for all people who live and/or work in the communities served by the hospital, with the goal of responding to those needs through the development of an implementation strategy plan.

### Community Served

Although Highpoint Health - Sumner with Ascension Saint Thomas serves Sumner County and surrounding areas, Highpoint Health - Sumner with Ascension Saint Thomas has defined its community served as Sumner County for the 2024 CHNA. Sumner County was selected as Highpoint Health - Sumner with Ascension Saint Thomas's community served because it is our primary service area as well as our partners' primary service area. Additionally, community health data is readily available at the county level.

### Data Analysis Methodology

The 2024 CHNA was conducted from August 2024 to December 2024 and utilized a derivation of the Mobilizing for Action through Planning and Partnership (MAPP) process, which incorporated data from both primary and secondary sources. Community input sources included information provided by groups/individuals, e.g., community members, health care consumers, health care professionals, community stakeholders, and multi-sector representatives. Special attention was given to the needs of individuals and populations who are more marginalized and to unmet health needs or gaps in services. On October 30, 2024, twenty-one stakeholders were interviewed for their input into quality of life in the community, assets, barriers, and most significant health needs in the county. Secondary data was compiled and reviewed to understand the health status of the community. Measures reviewed included chronic disease, social and economic factors, and healthcare access and utilization trends in the community and were gathered from reputable and reliable sources.

### Community Needs

Highpoint Health - Sumner with Ascension Saint Thomas, with contracted assistance from

StrategyHealth, analyzed secondary data of over 95 indicators and gathered community input through interviews and community meetings to identify the needs of Sumner County. In collaboration with community partners, Highpoint Health - Sumner with Ascension Saint Thomas used a phased prioritization approach to determine the most crucial needs for community stakeholders to address. The significant needs are as follows:

- Mental Health
- Substance Misuse
- Access to Care
- Obesity and Resulting Chronic Conditions

## **Next Steps and Conclusion**

The 2024 CHNA was presented to the Lifepoint Health Governing Board for approval and adoption on March 4, 2025. Prior to approval of the CHNA, Highpoint Health - Sumner with Ascension Saint Thomas, in collaboration with the Sumner County Health Department, Health Council, and other community stakeholders selected the prioritized needs outlined below for its 2024 CHNA implementation strategy. The implementation strategy describes how the hospital intends to respond to these prioritized needs throughout the same three-year CHNA cycle: July 2025 to June 2028.

1. Mental Health
2. Access to Care
3. Obesity and Resulting Chronic Conditions
4. Substance Misuse

Highpoint Health - Sumner with Ascension Saint Thomas hopes this report offers a meaningful and comprehensive understanding of the most significant needs of Sumner County. The hospital values the community's voice and welcomes feedback on this report; comments or questions can be submitted via Highpoint Health's public website (<https://highpointhealthsystem.com/chna>).

## About Ascension, Lifepoint, and Highpoint Health - Sumner

Highpoint Health System with Ascension Saint Thomas is a regional health system majority-owned by Lifepoint Health that includes Highpoint Health – Sumner and Highpoint Health – Sumner Station in Gallatin, Highpoint Health – Trousdale in Hartsville, Highpoint Health – Riverview in Carthage and more than 15 affiliated clinics and sites of care. The healthcare system's partnership with Ascension Saint Thomas brings together the organizations' clinical excellence, best practices and talented caregivers to collaborate in new ways that improve access to clinical programs and specialty care for patients and communities while expanding access to high quality care and services in Northern Middle Tennessee.

Highpoint Health serves the healthcare needs of the communities of northern Middle Tennessee through three hospitals, including:

- Highpoint Health – Sumner, the 155-bed flagship hospital located in Gallatin
- Highpoint Health – Riverview, a 25-bed critical access hospital in Carthage
- Highpoint Health – Trousdale, a 25-bed critical access hospital in Hartsville

As one of the leading non-profit and Catholic health systems in the United States, Ascension is committed to delivering compassionate, personalized care to all, with special attention to persons living in poverty and those most vulnerable.

### About Ascension

Ascension is a faith-based healthcare organization dedicated to transformation through innovation across the continuum of care. As of July 2024, the national health system operates more than 2,600 sites of care – including 145 hospitals and more than 40 senior living facilities – in 19 states and the District of Columbia, while providing a variety of services including clinical and network services, venture capital investing, investment management, biomedical engineering, facilities management, risk management, and contracting through Ascension's own group purchasing organization.

Ascension's Mission provides a strong framework and guidance for the work done to meet the needs of communities across the U.S. It is foundational to transform health care and express priorities when providing care and services, particularly to those most in need.

**Mission:** Rooted in the loving ministry of Jesus as healer, we commit ourselves to serving all persons with special attention to those who are poor and vulnerable. Our Catholic health ministry is dedicated to spiritually-centered, holistic care which sustains and improves the health of individuals and communities. We are advocates for a compassionate and just society through our actions and our words.

For more information about Ascension, visit <https://www.ascension.org>.

## **About [Ascension Saint Thomas](#)**

Ascension Saint Thomas is a leading health care system with a 125-year history of providing care to the community, and is the only faith-based, non profit health system in Middle Tennessee. Today, the health system offers a highly comprehensive system of care, with more than 250 sites of care that cover a 45-county area in Tennessee consisting of 13 hospitals and a network of affiliated joint ventures, medical practices, clinics and specialty facilities. Across the state, Ascension Saint Thomas and its partner organizations employ more than 10,700 dedicated associates who care for millions of patients each year. Ascension Saint Thomas is part of Ascension, one of the nation's largest faith-based healthcare organizations committed to delivering compassionate, personalized care to all, with special attention to persons living in poverty and those most vulnerable.

## **About [Lifepoint Health](#)®**

Lifepoint Health is a leading healthcare provider that serves patients, clinicians, communities, and partner organizations across the healthcare continuum. Driven by a mission of making communities healthier®, the company has a growing diversified healthcare delivery network comprised of more than 50,000 dedicated employees, 60 community hospital campuses, more than 60 rehabilitation and behavioral health hospitals and 250 additional sites of care, including managed acute rehabilitation units, outpatient centers and post-acute care facilities. Through its innovation strategy, Lifepoint Forward, the company is developing meaningful solutions to enhance quality, increase access to care, and improve value across the Lifepoint footprint and communities across the country. For more information about the company, visit [www.LifepointHealth.net](http://www.LifepointHealth.net).

## **About Highpoint Health - Sumner with Ascension Saint Thomas**

Highpoint Health – Sumner with Ascension Saint Thomas, formerly Sumner Regional Medical Center, has been providing quality health care to Gallatin, Hendersonville and the surrounding areas for 60 years. Since opening in 1959 as Sumner County Memorial Hospital, Highpoint Health – Sumner has grown from a facility with just 50 employees and seven physicians to a comprehensive health care leader in the community with more than 1,000 employees and 300 physicians.

Highpoint Health – Sumner is fully accredited by The Joint Commission and is governed by a local board of trustees. The hospital is also one of the largest non-government employers in Sumner County.

Today, Highpoint Health – Sumner operates as a 155-bed healthcare facility and provides quality care in numerous areas, including cancer treatment, cardiac care, same-day surgery, orthopedics, diagnostics, women's health and rehabilitation services. In 2019, Highpoint Health – Sumner received Level III Trauma Center status from the Tennessee Department of Health. As the community grows, Highpoint Health – Sumner strives to continually improve its services and programs to meet the changing needs of Gallatin, Hendersonville and the surrounding areas.

## Highpoint Health - Sumner with Ascension Saint Thomas

Highpoint Health - Sumner with Ascension Saint Thomas operates a hospital campus, related healthcare facilities, and employs more than 300 primary and specialty care clinicians.

Serving Tennessee since 1959, Highpoint Health - Sumner with Ascension Saint Thomas is continuing the long and valued tradition of responding to the health needs of the people in our community.

For more information about Highpoint Health - Sumner with Ascension Saint Thomas, visit <https://www.highpointhealthsystem.com/sumner>



## About the Community Health Needs Assessment

A community health needs assessment is essential for community building, health improvement efforts, and directing resources where they are most needed. CHNAs can be powerful tools with the potential to be catalysts for immense community change.

### Purpose of the CHNA

A CHNA is defined as “a systematic process involving the community that identifies and analyzes community health needs and assets to plan and act upon priority community health needs.”<sup>1</sup> The process serves as a foundation for promoting the health and well-being of the community by identifying the most pressing needs, leveraging existing assets and resources, developing strategic plans, and mobilizing hospital programs and community partners to work together. This community-driven approach aligns with Highpoint Health - Sumner with Ascension Saint Thomas’s commitment to offer programs designed to respond to the health needs of a community, with special attention to persons who are medically underserved and at risk for poorer health outcomes because of social factors that put them at increased risk.

### Advancing Health Equity

Health equity is the state in which everyone has a fair and just opportunity to attain their highest level of health.<sup>2</sup> Progress toward achieving health equity can be measured by reducing health disparities. Health disparities are particular health differences closely linked with economic, social, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced such obstacles to health based on their race or ethnicity; religion; socioeconomic status; gender identity; sexual orientation; age; cognitive, sensory, or physical disability; geographic location; or other characteristics historically linked to discrimination or exclusion.<sup>3</sup>

Focusing on the root causes that have perpetuated these differences contributes to the advancement of health equity. By identifying the conditions, practices, and policies that perpetuate differences in health outcomes, we can better respond to root causes when pursuing health equity.

Ascension acknowledges that health disparities in our communities go beyond individual health behaviors. Ascension’s Mission calls us to be “advocates for a compassionate and just society through our actions and words”; therefore, health equity is a matter of great importance to Ascension.

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<sup>1</sup> Catholic Health Association of the United States. (2022). *A guide for planning and reporting community benefit, 2022* (p.146).

<sup>2</sup> National Center for Chronic Disease Prevention and Health Promotion. (2023, January 4). *Advancing health equity in chronic disease prevention and management*. Center for Disease Control and Prevention (CDC). Retrieved October 11, 2023, from <https://www.cdc.gov/chronicdisease/healthequity/index.htm>

<sup>3</sup> Braveman, P. (2014). What are health disparities and health equity? We need to be clear. *Public Health Reports*, 129(Suppl 2), 5-8. <https://doi.org/10.1177/00333549141291S203>

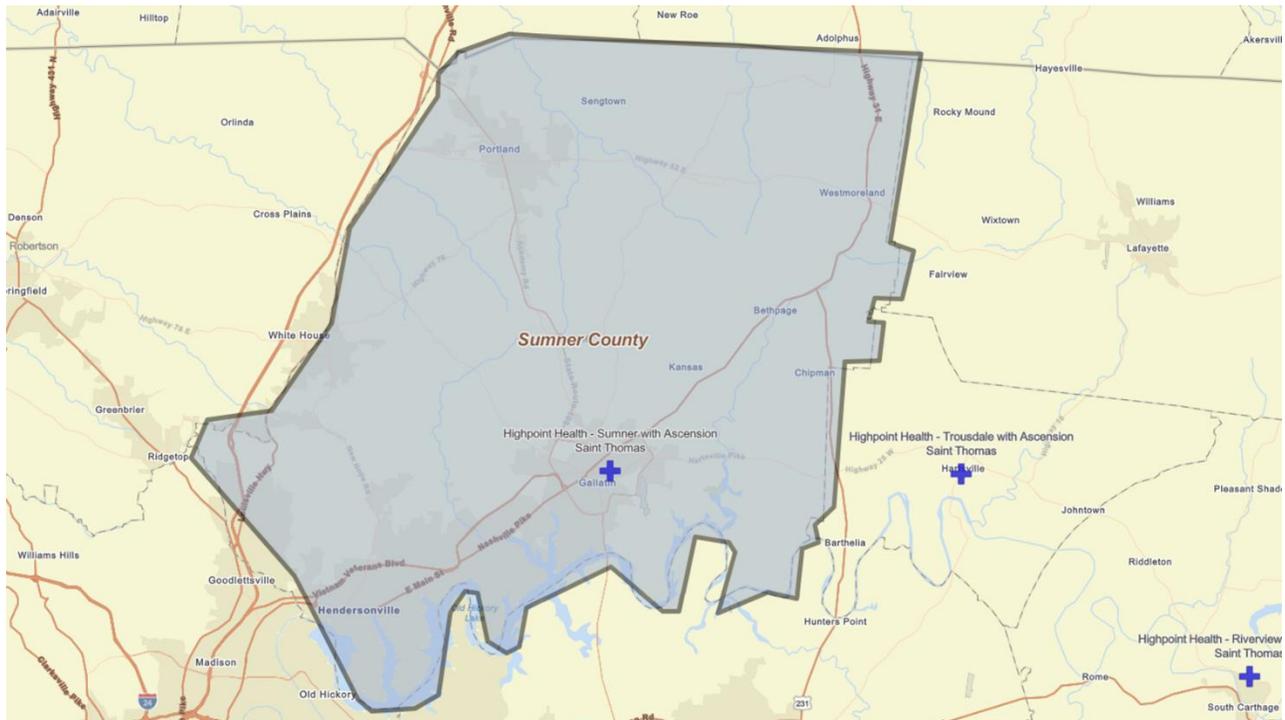
## IRS 501(r)(3) and Form 990 Schedule H Compliance

The CHNA also serves to satisfy certain requirements of tax reporting, pursuant to provisions of the Patient Protection and Affordable Care Act of 2010, more commonly known as the Affordable Care Act (ACA). As part of the ACA, all not-for-profit hospitals are required to conduct a CHNA and adopt an implementation strategy every three years. Requirements for 501(c)(3) hospitals under the ACA are described in Code Section 501(r)(3) and include making both current and previous CHNA and implementation strategy reports widely available to the public. In accordance with this requirement, electronic versions of these reports can be accessed at <https://highpointhealthsystem.com/chna>, and paper versions can be requested at Highpoint Health - Sumner with Ascension Saint Thomas 555 Hartsville Pike, Gallatin, TN 37066 or via phone 615-328-8888.

## Community Served and Demographics

### Community Served

For the purpose of the 2024 CHNA, Highpoint Health - Sumner with Ascension Saint Thomas has defined its community served as Sumner County. Although Highpoint Health - Sumner with Ascension Saint Thomas serves Sumner County and surrounding areas, the “community served” was defined as such because (a) most of our service area is in each county; (b) most of our assessment partners define their service area at the county level; and (c) most community health data is available at the county level.



Source: StrategyHealth

Sumner County is 25.3% rural with 361.3 population per square mile in 2020.

74% of employees are employed in the top six industries:

- Educational services, and health care and social assistance – 24.3%
- Retail trade – 13.2%
- Professional, scientific, management, administrative & waste management services – 10.5%
- Arts, entertainment, recreation, accommodation, & food services – 9.3%
- Construction – 8.3%
- Manufacturing – 8.3%

[2022 American Community Survey 5-Year Estimates](#)

## Demographic Data

Located in Middle Tennessee on the state’s northern border with Kentucky, Sumner County has a population of 208,821 and is 25.3% rural with 543.2 square miles and 361.3 population per square mile. Below are demographic data highlights for Sumner County:

- 17.1 percent of the community members of Sumner County are 65 or older, compared to 17.3 percent in Tennessee
- 93.8 percent of community members are non-Hispanic; 6.2 percent are Hispanic or Latino (any race)
- 81.5 percent of community members are non-Hispanic white; 1.8 percent are Asian; .4 percent are American Indian or Alaska Native, and 8.3 percent are non-Hispanic Black or African American
- The total population increase from 2020 to 2023 was 6.4 percent
- The median household income is above the state median income (\$81,883 for Sumner County; \$64,035 for Tennessee)
- The percentage of all ages of people in poverty was lower than the state (7.5 percent for Sumner County; 13.3 percent for Tennessee)
- The uninsured rate for Sumner County is lower than the state (10.6 percent for Sumner County; 11.9 percent for Tennessee)

Demographic Highlights			
Population			
Indicator	Sumner	Tennessee	Description
Percentage living in rural communities	25.3%	33.8%	2020 Census percent rural population within the state
Percentage below 18 years of age	22.8%	21.8%	N/A

**Highpoint Health - Sumner with Ascension Saint Thomas**

Percentage 65 years of age and over	17.1%	17.3%	N/A
Percentage Asian	1.7%	2.1%	N/A
Percentage American Indian or Alaska Native	.4%	.5%	N/A
Percentage Hispanic	6.2%	6.4%	N/A
Percentage non-Hispanic Black	8.3%	16.4%	N/A
Percentage non-Hispanic White	81.5%	72.9%	N/A
<b>Social and Community Context</b>			
English proficiency	1.5%	3.1%	Proportion of community members who speak English "less than well"
Median household income	\$81,883	\$64,035	Income level at which half of households in a county earn more and half of households earn less
Percentage of children in poverty	8.9%	17.8%	Percentage of people under age 18 in poverty
Percentage of uninsured	10.6%	11.9%	Percentage of population under age 65 without health insurance
Percentage of educational attainment	91%	89%	Percentage of adults ages 25 and over with a high school diploma or equivalent
Percentage of unemployment	2.5%	3.2%	Percentage of population ages 16 and older unemployed but seeking work

Source: [StrategyHealth, 2024](#); [CHR; US Census 2020, 2022, 2023](#); [American Community Survey 2018-2022, US Bureau of Labor Statistics](#)

To view community demographic data in their entirety, see Appendix B (Page 30).

## Process and Methods Used

### Collaborators and/or Consultants

With the contracted assistance of StrategyHealth, LLC, Highpoint Health - Sumner with Ascension Saint Thomas completed its 2024 CHNA in collaboration with the following organizations and individuals:

- Sumner County Department of Health
- Tennessee Department of Health
- Sumner County Health Committee

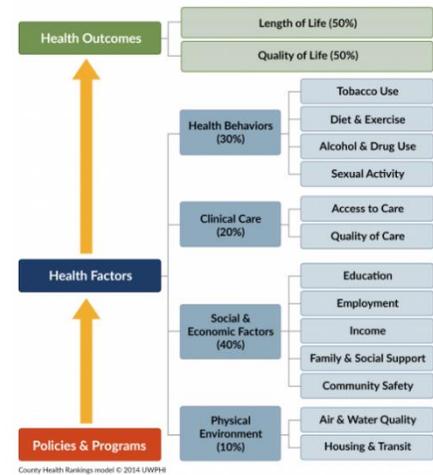
Highpoint Health as the sponsors of the assessment, engaged national leaders in community health needs assessments to assist in the project. StrategyHealth, LLC, a healthcare consultancy based in Nashville, Tennessee, provided the analysis of secondary community health data, conducted and analyzed the interviews, and facilitated the community meeting. The Tennessee Department of Health provided support to both the County Health Department as well as Ascension Saint Thomas during the CHNA process. The Sumner County Department of Health served as a partner in the process, participating in the focus groups and the health summit.

### Data Collection Methodology

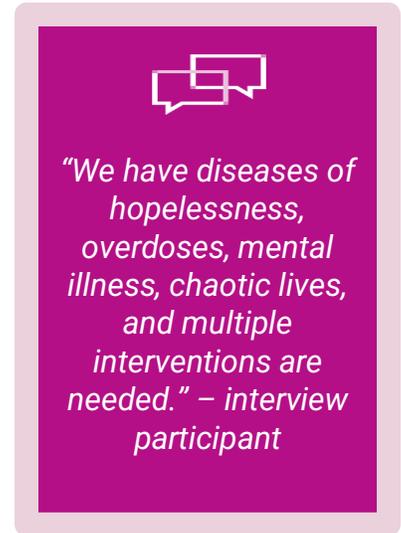
Highpoint Health - Sumner with Ascension Saint Thomas is committed to using national best practices in conducting the CHNA. In collaboration with various community partners, Highpoint Health - Sumner with Ascension Saint Thomas’s approach relies on the County Health Rankings and Roadmaps developed by the Robert Wood Johnson Foundation and the University of Wisconsin. Although not all data came from County Health Rankings, the data used its organizing methodology of health outcomes and health factors including social drivers of health.

### Summary of Community Input

Community input, also referred to as “primary data,” is an integral part of a community health needs assessment (CHNA) and is meant to reflect the voice of the community. This input is invaluable for efforts to accurately assess a community's health needs. A concerted effort was made to ensure that the individuals and organizations represented the needs and perspectives of 1) public health practice and research; 2) individuals who are medically underserved, low-income, or considered among the minority populations served by the hospital; and 3) the broader community at large and those who represent the broad interests and needs of the community served.



Multiple methods were used to gather community input, including key stakeholder focus groups/interviews and community health council meetings. These methods provided additional perspectives on selecting and responding to top health issues facing Sumner County. A summary of the process and results is outlined below.



### Key Stakeholder Focus Groups and Interviews

A series of 5 small focus groups and one-on-one interviews were conducted by StrategyHealth to gather feedback from key stakeholders on the health needs and assets of Sumner County. Twenty-one representatives from over fifteen different organizations and agencies participated in the interviews, held October 30, 2024. Sectors represented by participants included Sumner County government, Chamber of Commerce, Volunteer State Community College, law enforcement, U.T. Extension, Sumner County Health Department, Economic Development, Gallatin Shalom Zone, Hope Family Health, Congressman John Rose’s Office, and Highpoint Health - Sumner with Ascension Saint Thomas Medical Center.

Key Stakeholder Focus Groups/Interviews	
<b>Key Summary Points</b> <ul style="list-style-type: none"> <li>• The top things that would improve quality of life in Sumner County are: increase access to healthcare, physicians, and insurance, increase mental health resources, decrease drug use, and improve infrastructure such as childcare, housing, reduce traffic and provide transportation.</li> <li>• The community’s strongest assets are schools and education, healthcare available, faith community, not-for-profit organizations, courts and law enforcement, collaborative culture, the outdoors and natural landscape.</li> <li>• The obstacles or challenges in the community are access to healthcare, lack of health insurance, wait times for appointments, lack of access to mental health resources, substance misuse, socioeconomic, affordable housing and unhoused population.</li> <li>• The top three health issues of concern are: access to insurance, physicians and affordability, access to mental health resources, substance misuse, healthy eating/active living, transportation and housing.</li> <li>• The top initiatives the interviewees would implement are improve access to care, build affordable housing, more transportation, increase cooperation, communication, and alignment of resources.</li> </ul>	
Sectors Represented	Common Themes
<ul style="list-style-type: none"> <li>• Government</li> <li>• Education - schools</li> <li>• Medical Center</li> <li>• Health Dept. &amp; Council</li> <li>• Chamber of Commerce</li> <li>• Hope Family Health</li> <li>• Law enforcement</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of mental health services and resources</li> <li>• Alcohol and drugs are big issues sometimes overlooked</li> <li>• Lack of access to insurance, pediatricians, OB, physicians in general, long waiting times, expensive</li> <li>• There needs to be more coordination of efforts and less duplication of services</li> </ul>
<b>Meaningful Quotes</b> <ul style="list-style-type: none"> <li>• “Drug addicted citizens create issues that affect the entire family.”</li> <li>• “Finding meaning in life through relationships, connections we have with each other is key.”</li> </ul>	

- "Lack of insurance and long waits for doctors' appointments impact access to care."

### Health Council/Community Meeting

Each county in Tennessee has a health council sponsored by the local health department. The health council is composed of community organizations and stakeholders. On November 13, 2024, Highpoint Health-Sumner presented the CHNA secondary data and results of the stakeholder focus groups and interviews to the health council and other stakeholders to receive their input on the most significant health needs.

After hearing a presentation of the results of the primary and secondary data, the attendees voted via Mentimeter to prioritize the most significant health needs in the community. After the priorities were identified, they met in three groups to discuss goals and actions that could be used to impact health needs.

To view community input data in its entirety, see Appendix C (Page 33).

### Summary of Secondary Data

Secondary data is data that has already been collected and published by another party. Both governmental and non-governmental agencies routinely collect secondary data reflective of the population's health status at the state and county levels through surveys and surveillance systems. Secondary data for this report was compiled from various reputable and reliable sources.

Health indicators in the following categories were reviewed:

- Health outcomes
- Physical environment
- Clinical care
- Social determinants that impact health
- Disparities

A summary of the secondary data collected and analyzed through this assessment is outlined below. [County Health Rankings](#) indicates the following as areas to explore for improvement in Sumner County:

- Higher adult smoking at 18%
- Higher adult obesity at 35%

To view the secondary data and sources in their entirety, see Appendix D (Page 39).

### Written Comments on Previous CHNA and Implementation Strategy

Highpoint Health - Sumner with Ascension Saint Thomas did not prepare a CHNA previously as Sumner Regional Medical Center, they were for-profit, investor owned and did not meet the requirement to perform a CHNA.

### **Data Limitations and Information Gaps**

Although it is quite comprehensive, this assessment cannot measure all possible aspects of health and cannot represent every possible population within Sumner County. This constraint limits the ability to assess all the community's needs fully.

For this assessment, two types of limitations were identified:

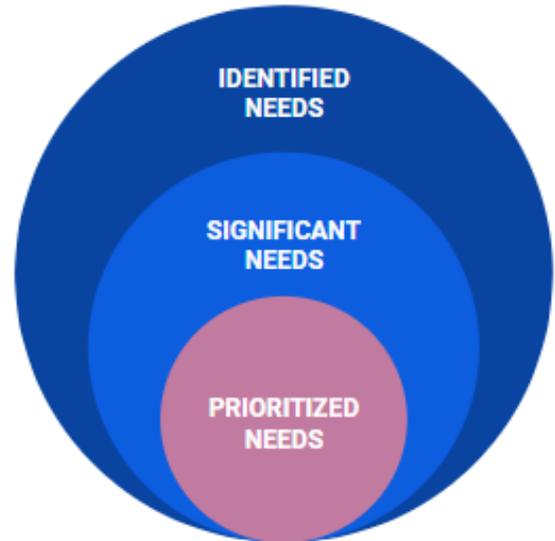
- Some groups of individuals may not have been adequately represented through the community input process. For example, those groups may include individuals who are transient, who speak a language other than English, or who are members of the lesbian/gay/bisexual/transgender+ community.
- Secondary data is limited in a number of ways, including timeliness, reach, and ability to fully reflect the health conditions of all populations within the community.

Despite the data limitations, Highpoint Health - Sumner with Ascension Saint Thomas is confident of the overarching themes and health needs represented through the assessment data. This is based on the fact that the data collection included multiple qualitative and quantitative methods and engaged the hospital and participants from the community.

## Community Needs

Highpoint Health - Sumner with Ascension Saint Thomas, with contracted assistance from StrategyHealth, analyzed secondary data of 95 indicators and gathered community input through community interviews and a community meeting to identify the needs in Sumner County. In collaboration with community partners, Highpoint Health - Sumner with Ascension Saint Thomas used a phased prioritization approach to identify the needs.

- First phase: Determine the broader set of **identified needs**.
- Second phase: Narrow identified needs to a set of **significant needs**.
- Third phase: Narrow the significant needs to a set of **prioritized needs** to be addressed in the implementation strategy plan.



Following the completion of the CHNA assessment, Highpoint Health - Sumner with Ascension Saint Thomas will select all, or a subset, of the significant needs as the hospital's **prioritized needs** to develop a three-year implementation strategy. Although the hospital may respond to many needs, the prioritized needs will be at the center of a formal CHNA implementation strategy and corresponding tracking and reporting. The image above portrays the relationship between the needs categories.

### Identified Needs

The first phase was to determine the broader set of **identified needs**. Ascension has defined “identified needs” as the health outcomes or related conditions (e.g., social determinants of health) impacting the health status of Sumner County. The identified needs were categorized into health behaviors, social determinants of health, length of life, quality of life, clinical care, and systemic issues to develop better measures and evidence-based interventions that respond to the determined condition.

### Significant Needs

In the second phase, identified needs were then narrowed to a set of “significant needs” determined most crucial for community stakeholders to address. In collaboration with various community partners, Highpoint Health - Sumner with Ascension Saint Thomas synthesized and analyzed the data to determine which of the identified needs were most significant. Ascension has defined **significant needs** as the identified needs deemed most significant to respond to based on established criteria and/or prioritization methods. Highpoint Health - Sumner with Ascension Saint Thomas used the

following criteria to identify the most significant health needs and asked the community to prioritize them during the community meeting.

- Magnitude - how many individuals does the problem affect?
- Seriousness of consequences - What would happen if the issue were not made a priority? What level of burden on the community (economic, social or other)?
- Equity – Does the issue impact one segment of the population more than another?
- Feasibility - Is the problem preventable, what is the community's capacity to address?

Based on the synthesis and analysis of the data, the significant needs for the 2024 CHNA are as follows:

1. Mental Health
2. Access to Care
3. Obesity and Resulting Chronic Conditions
4. Substance Misuse

To view healthcare facilities and community resources available to respond to the significant needs, please see Appendix E (Page 45).

The following pages contain a description (including data highlights, community challenges and perceptions, and local assets and resources) of each significant need.

Mental Health																																														
Significance	Populations Most Impacted																																													
<p>Mental and physical health are equally important components of overall health. For example, depression increases the risk for many types of physical health problems, particularly long-lasting conditions like diabetes, heart disease, and stroke.</p> <p>Source: <i>Chronic Illness &amp; Mental Health</i>. Bethesda, MD: National Institutes of Health, National Institute of Mental Health. 2015.  <a href="https://www.cdc.gov/mentalhealth/learn/index.htm#:~:text=Why%20is%20mental%20health%20important,%2C%20heart%20disease%2C%20and%20stroke.">https://www.cdc.gov/mentalhealth/learn/index.htm#:~:text=Why%20is%20mental%20health%20important,%2C%20heart%20disease%2C%20and%20stroke.</a></p>	<ul style="list-style-type: none"> <li>According to the National Institute of Mental Health (NIMH), <b>young adults</b> aged 18–25 have the highest prevalence of mental illness, at 33.7%, compared to adults aged 26–49 (28.1%) and those aged 50 and older (15.0%).</li> <li>People who identify as being <b>two or more races</b> (24.9%) are most likely to report any mental illness within the past year than any other race/ethnic group, followed by American Indian/Alaska Natives (22.7%), white (19%), and black (16.8%).</li> <li><b>Women</b> are three times more likely than men to experience common mental health problems.</li> <li>Suicide is one of the leading causes of death in adolescents and adults ages <b>15 to 24</b>.</li> </ul> <p>Source: National Institute of Mental Health, <a href="https://www.nimh.nih.gov/health/statistics/mental-illness#:~:text=Young%20adults%20aged%2018%2D25,AN)%20adults%20(26.6%25).">https://www.nimh.nih.gov/health/statistics/mental-illness#:~:text=Young%20adults%20aged%2018%2D25,AN)%20adults%20(26.6%25).</a></p>																																													
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<ul style="list-style-type: none"> <li>The community members interviewed noted the link between mental health and substance use.</li> <li>They stressed the importance of receiving therapy in the schools at a young age.</li> <li>They mentioned the lack of mental health resources in the community.</li> </ul>																																														
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<ul style="list-style-type: none"> <li>Sumner County had on average 5.7 poor mental health days out of 30 days, the same as Tennessee and higher than the U.S.</li> </ul> <p><b>Poor mental health days</b> (avg # of days in past 30 days)</p> <table border="1"> <caption>Poor mental health days (avg # of days in past 30 days)</caption> <thead> <tr> <th>Year</th> <th>Sumner</th> <th>Tennessee</th> <th>US Avg</th> <th>Top Performers</th> </tr> </thead> <tbody> <tr> <td>2021</td> <td>5.0</td> <td>5.0</td> <td>4.0</td> <td>3.8</td> </tr> <tr> <td>2022</td> <td>5.0</td> <td>5.0</td> <td>4.5</td> <td>4.0</td> </tr> <tr> <td>2023</td> <td>5.0</td> <td>5.0</td> <td>4.5</td> <td>4.0</td> </tr> <tr> <td>2024</td> <td>5.7</td> <td>5.7</td> <td>4.8</td> <td>4.2</td> </tr> </tbody> </table> <p>Source: <a href="#">County Health Rankings</a>, BRFSS, 2018-2021. Average number of mentally unhealthy days reported in the past 30 days (age-adjusted). The 2024 Annual Data Release used data from 2021 for this measure.</p>	Year	Sumner	Tennessee	US Avg	Top Performers	2021	5.0	5.0	4.0	3.8	2022	5.0	5.0	4.5	4.0	2023	5.0	5.0	4.5	4.0	2024	5.7	5.7	4.8	4.2	<ul style="list-style-type: none"> <li>18% of Sumner County adults reported 14 or more days of poor mental health days per month, lower than Tennessee but higher than the U.S.</li> </ul> <p><b>Frequent mental distress</b> (% of adults reporting 14 or more days of poor mental health per mo., age-adjusted)</p> <table border="1"> <caption>Frequent mental distress (% of adults reporting 14 or more days of poor mental health per mo., age-adjusted)</caption> <thead> <tr> <th>Year</th> <th>Sumner</th> <th>Tennessee</th> <th>US Avg</th> </tr> </thead> <tbody> <tr> <td>2021</td> <td>16%</td> <td>16%</td> <td>13%</td> </tr> <tr> <td>2022</td> <td>16%</td> <td>16%</td> <td>14%</td> </tr> <tr> <td>2023</td> <td>16%</td> <td>16%</td> <td>14%</td> </tr> <tr> <td>2024</td> <td>18%</td> <td>18%</td> <td>15%</td> </tr> </tbody> </table> <p>Source: <a href="#">County Health Rankings</a>, BRFSS, 2018-2021. Average number of mentally unhealthy days reported in the past 30 days (age-adjusted). The 2024 Annual Data Release used data from 2021 for this measure.</p>	Year	Sumner	Tennessee	US Avg	2021	16%	16%	13%	2022	16%	16%	14%	2023	16%	16%	14%	2024	18%	18%	15%
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<p>People with addiction often have one or more associated health issues, which could include lung or heart disease, stroke, cancer, or mental health conditions. Imaging scans, chest X-rays, and blood tests can show the damaging effects of long-term drug use throughout the body.</p> <p>Source: National Institute on Drug Abuse; <a href="https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/addiction-health#:~:text=People%20with%20addiction%20often%20have%20drug%20use%20throughout%20the%20body.">https://nida.nih.gov/publications/drugs-brains-behavior-science-addiction/addiction-health#:~:text=People%20with%20addiction%20often%20have%20drug%20use%20throughout%20the%20body.</a></p>	<ul style="list-style-type: none"> <li>Those reporting <b>two or more races</b> were highest for past year illicit drug use.</li> <li><b>American Indian/Alaska Native (AIAN)</b> had higher alcohol use disorder at 8.3% followed by <b>White</b> people (5.8%) then <b>Hispanic</b> population (5.2%), and <b>Black</b> population (4.8%).</li> <li>Substance use disorder was higher for <b>AIAN</b> (11.3%), White (7.8%), Black and Hispanic population at 7.1%</li> <li>Drug abuse and substance disorders are more likely to affect <b>young males</b>.</li> <li>Drug use is highest among persons between the ages of <b>18-25</b> at 39% compared to persons aged 26-29, at 34%.</li> <li>70% of users who try an illegal drug <b>before age 13</b> develop a substance abuse disorder within the next 7 years compared to 27% of those who try an illegal drug after age 17.</li> </ul> <p>Source: SAMHSA, <a href="https://www.samhsa.gov/data/sites/default/files/reports/rpt35326/2021NSDUHSUChartbook102221B.pdf">https://www.samhsa.gov/data/sites/default/files/reports/rpt35326/2021NSDUHSUChartbook102221B.pdf</a>; National Center for Drug Abuse Statistics, <a href="https://drugabusestatistics.org/">https://drugabusestatistics.org/</a></p>																																																		
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<ul style="list-style-type: none"> <li>Need quality addiction rehabilitation especially for repeat offenders.</li> <li>Substance use education in schools as part of the curriculum would be helpful to decrease addiction.</li> <li>Addiction affects many people throughout the community.</li> <li>Mental health and substance use are co occurring conditions.</li> </ul>																																																			
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<ul style="list-style-type: none"> <li>Drug overdose deaths are a leading contributor to premature death and are largely preventable.</li> </ul> <p><b>Drug overdose deaths*</b> (rate of adults that died from a drug overdose per 100,000) Lower is better</p> <table border="1"> <caption>Drug overdose deaths* (rate of adults that died from a drug overdose per 100,000)</caption> <thead> <tr> <th>Year</th> <th>Sumner</th> <th>Tennessee</th> <th>US Avg</th> <th>Top Performers</th> </tr> </thead> <tbody> <tr> <td>2021</td> <td>23.1</td> <td>~28</td> <td>~22</td> <td>~10</td> </tr> <tr> <td>2022</td> <td>~28</td> <td>~34</td> <td>~23</td> <td>~10</td> </tr> <tr> <td>2023</td> <td>~28</td> <td>~34</td> <td>~23</td> <td>~10</td> </tr> <tr> <td>2024</td> <td>35.4</td> <td>~43</td> <td>~27</td> <td>~10</td> </tr> </tbody> </table> <p>Source: <a href="#">County Health Rankings</a>, National Center for Health Statistics - Mortality Files; Census Population Estimates Program. The 2024 Annual Data Release used data from 2019-2021 for this measure.</p>	Year	Sumner	Tennessee	US Avg	Top Performers	2021	23.1	~28	~22	~10	2022	~28	~34	~23	~10	2023	~28	~34	~23	~10	2024	35.4	~43	~27	~10	<ul style="list-style-type: none"> <li>Each year, approximately 480,000 premature deaths can be attributed to smoking.</li> </ul> <p><b>Adult smoking</b> (% that report every day or "most days") Lower is better</p> <table border="1"> <caption>Adult smoking (% that report every day or "most days")</caption> <thead> <tr> <th>Year</th> <th>Sumner</th> <th>Tennessee</th> <th>US Avg</th> <th>Top Performers</th> </tr> </thead> <tbody> <tr> <td>2021</td> <td>21%</td> <td>~20%</td> <td>~16%</td> <td>~16%</td> </tr> <tr> <td>2022</td> <td>~19%</td> <td>~20%</td> <td>~15%</td> <td>~15%</td> </tr> <tr> <td>2023</td> <td>~20%</td> <td>~20%</td> <td>~15%</td> <td>~15%</td> </tr> <tr> <td>2024</td> <td>18%</td> <td>~20%</td> <td>~14%</td> <td>~14%</td> </tr> </tbody> </table> <p>Source: <a href="#">County Health Rankings</a>, BRFSS. The Annual Data Release used data from 2018- 2021 for this measure.</p>	Year	Sumner	Tennessee	US Avg	Top Performers	2021	21%	~20%	~16%	~16%	2022	~19%	~20%	~15%	~15%	2023	~20%	~20%	~15%	~15%	2024	18%	~20%	~14%	~14%
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<p>Many people face barriers that prevent or limit access to needed health care services, which may increase the risk of poor health outcomes and health disparities. Inadequate health insurance coverage is one of the largest barriers to health care access. Physician shortages may mean that patients experience longer wait times and delayed care.</p> <p>Source: <i>Healthy People 2030</i>, <a href="https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries/access-health-services">https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries/access-health-services</a></p>	<ul style="list-style-type: none"> <li>• Uninsured population</li> <li>• Low income population</li> <li>• Those with high deductibles</li> <li>• Those with chronic conditions</li> </ul>																																																		
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<ul style="list-style-type: none"> <li>• We lack insurance coverage and those who have insurance can't afford the copays.</li> <li>• There is a need for prenatal care, pediatrics, pulmonology, a diabetes coordinator, respiratory therapist, primary care, and mental health resources.</li> </ul>																																																			
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<ul style="list-style-type: none"> <li>• Access to health care requires not only financial coverage, but also access to providers.</li> </ul> <p style="text-align: center;"><b>Primary care physicians</b> (population per physician)</p> <table border="1"> <caption>Primary care physicians (population per physician)</caption> <thead> <tr> <th>Year</th> <th>Sumner</th> <th>Tennessee</th> <th>US Avg</th> <th>Top Performers</th> </tr> </thead> <tbody> <tr> <td>2021</td> <td>2,057</td> <td>~1,300</td> <td>~1,300</td> <td>~1,000</td> </tr> <tr> <td>2022</td> <td>~2,100</td> <td>~1,300</td> <td>~1,300</td> <td>~1,000</td> </tr> <tr> <td>2023</td> <td>~2,150</td> <td>~1,300</td> <td>~1,300</td> <td>~1,000</td> </tr> <tr> <td>2024</td> <td>2,134</td> <td>~1,300</td> <td>~1,300</td> <td>~1,000</td> </tr> </tbody> </table> <p>Source: <a href="#">County Health Rankings</a>, Area Health Resources Files (AHRF) 2022-2023. US Department of Health and Human Services, Health Resources and Services Administration, Bureau of Health Workforce, Rockville, MD. The 2024 Annual Data Release used data from 2021 for this measure.</p>	Year	Sumner	Tennessee	US Avg	Top Performers	2021	2,057	~1,300	~1,300	~1,000	2022	~2,100	~1,300	~1,300	~1,000	2023	~2,150	~1,300	~1,300	~1,000	2024	2,134	~1,300	~1,300	~1,000	<ul style="list-style-type: none"> <li>• Lack of health insurance coverage is a significant barrier to accessing needed health care and to maintaining financial security.</li> </ul> <p style="text-align: center;"><b>Uninsured</b> (% of the population under age 65 without health insurance) Lower is better</p> <table border="1"> <caption>Uninsured (% of the population under age 65 without health insurance)</caption> <thead> <tr> <th>Year</th> <th>Sumner</th> <th>Tennessee</th> <th>US Avg</th> <th>Top Performers</th> </tr> </thead> <tbody> <tr> <td>2021</td> <td>10%</td> <td>~12%</td> <td>~10%</td> <td>~6%</td> </tr> <tr> <td>2022</td> <td>~10.5%</td> <td>~12%</td> <td>~10%</td> <td>~6%</td> </tr> <tr> <td>2023</td> <td>~10%</td> <td>~12%</td> <td>~10%</td> <td>~6%</td> </tr> <tr> <td>2024</td> <td>10.6%</td> <td>~12%</td> <td>~10%</td> <td>~6%</td> </tr> </tbody> </table> <p>Source: <a href="#">County Health Rankings</a>, US Census Bureau's Small Area Health Insurance Estimates (SAHIE). The 2024 Annual Data Release used data from 2021 for this measure.</p>	Year	Sumner	Tennessee	US Avg	Top Performers	2021	10%	~12%	~10%	~6%	2022	~10.5%	~12%	~10%	~6%	2023	~10%	~12%	~10%	~6%	2024	10.6%	~12%	~10%	~6%
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<p>Carrying extra fat leads to serious health consequences such as cardiovascular disease (mainly heart disease and stroke), type 2 diabetes, musculoskeletal disorders like osteoarthritis, and some cancers (endometrial, breast and colon). These conditions cause premature death and substantial disability.            Source: WHO, 2024 <a href="https://www.who.int/news-room/questions-and-answers/item/obesity-health-consequences-of-being-overweight#:~:text=Carrying%20extra%20fat%20leads%20to,premature%20death%20and%20substantial%20disability">https://www.who.int/news-room/questions-and-answers/item/obesity-health-consequences-of-being-overweight#:~:text=Carrying%20extra%20fat%20leads%20to,premature%20death%20and%20substantial%20disability</a>.</p>	<ul style="list-style-type: none"> <li>• People ages 60 and older are more likely to be obese than younger adults, according to the most recent data from the National Health and Nutrition Examination Survey.</li> <li>• And the problem also affects children. Approximately 20% of U.S. children and adolescents ages 2 to 19 are obese.</li> <li>• How much money you make may affect whether you are obese. This is especially true for women. Women who are poor and of lower social status are more likely to be obese than women of higher socioeconomic status. This is especially true among minority groups.</li> </ul> <p>Source: Johns Hopkins Medicine, <a href="https://www.hopkinsmedicine.org/health/conditions-and-diseases/obesity/overview-of-obesity#:~:text=People%20ages%2060%20and%20older,2%20to%2019%20are%20obese">https://www.hopkinsmedicine.org/health/conditions-and-diseases/obesity/overview-of-obesity#:~:text=People%20ages%2060%20and%20older,2%20to%2019%20are%20obese</a>.</p>																																																		
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<ul style="list-style-type: none"> <li>• Obesity is a big issue due to poor nutrition and lack of income to eat healthy.</li> <li>• Lack of physical activity, particularly kids on social media</li> <li>• The lack of healthy diet and activity leads to obesity which increases Type 2 Diabetes and heart issues.</li> </ul>																																																			
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<ul style="list-style-type: none"> <li>• Adult obesity is a chronic condition that puts individuals at increased risk of hypertension, heart disease, type 2 diabetes, breathing problems, chronic inflammation, mental illness, and some cancers.</li> </ul> <p style="text-align: center;"><b>Adult obesity</b> (% of adults that report a BMI of 30 or more) Lower is better</p> <table border="1"> <caption>Adult Obesity Data (2021-2024)</caption> <thead> <tr> <th>Year</th> <th>Sumner</th> <th>Tennessee</th> <th>US Avg</th> <th>Top Performers</th> </tr> </thead> <tbody> <tr> <td>2021</td> <td>27%</td> <td>33%</td> <td>30%</td> <td>28%</td> </tr> <tr> <td>2022</td> <td>33%</td> <td>35%</td> <td>31%</td> <td>30%</td> </tr> <tr> <td>2023</td> <td>35%</td> <td>34%</td> <td>32%</td> <td>30%</td> </tr> <tr> <td>2024</td> <td>35%</td> <td>33%</td> <td>32%</td> <td>31%</td> </tr> </tbody> </table> <p>Source: <a href="#">County Health Rankings</a>, BRFSS. The 2024 Annual Data Release used data from 2021 for this measure.</p>	Year	Sumner	Tennessee	US Avg	Top Performers	2021	27%	33%	30%	28%	2022	33%	35%	31%	30%	2023	35%	34%	32%	30%	2024	35%	33%	32%	31%	<ul style="list-style-type: none"> <li>• Physical inactivity is linked to increased risk of health conditions such as Type 2 diabetes, cancer, stroke, hypertension, cardiovascular disease, and shortened life expectancy.</li> </ul> <p style="text-align: center;"><b>Physical inactivity</b> (% 20 yo+ reporting no leisure time physical activity) Lower is better</p> <table border="1"> <caption>Physical Inactivity Data (2021-2024)</caption> <thead> <tr> <th>Year</th> <th>Sumner</th> <th>Tennessee</th> <th>US Avg</th> <th>Top Performers</th> </tr> </thead> <tbody> <tr> <td>2021</td> <td>32%</td> <td>28%</td> <td>24%</td> <td>20%</td> </tr> <tr> <td>2022</td> <td>29%</td> <td>29%</td> <td>26%</td> <td>23%</td> </tr> <tr> <td>2023</td> <td>25%</td> <td>24%</td> <td>22%</td> <td>20%</td> </tr> <tr> <td>2024</td> <td>25%</td> <td>28%</td> <td>24%</td> <td>21%</td> </tr> </tbody> </table> <p>Source: <a href="#">County Health Rankings</a>, BRFSS. The 2024 Annual Data Release used data from 2021 for this measure.</p>	Year	Sumner	Tennessee	US Avg	Top Performers	2021	32%	28%	24%	20%	2022	29%	29%	26%	23%	2023	25%	24%	22%	20%	2024	25%	28%	24%	21%
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## Prioritized Needs

In the third phase, significant needs were further narrowed to a set of “prioritized needs.” Ascension defines **prioritized needs** as the significant needs that the hospital has prioritized to respond to through the three-year CHNA implementation strategy. Highpoint Health - Sumner with Ascension Saint Thomas and community members present at the health council meeting used the following criteria to identify the most significant health needs and asked the community to prioritize them during the community meeting.

- Magnitude - How many individuals does the problem affect?
- Seriousness of consequences - What would happen if the issue were not made a priority? What level of burden on the community (economic, social or other)?
- Equity – Does the issue affect one segment of the population more than another?
- Feasibility - Is the problem preventable, what is the community’s capacity to address?

Highpoint Health - Sumner with Ascension Saint Thomas, in collaboration with the health department and community health council, used Mentimeter, an online voting tool to rank their 1st, 2nd, and 3rd most significant health needs in the County.

The attendees selected the prioritized needs outlined below at the November 13, 2024, meeting for its 2024 CHNA implementation strategy:

- Mental health - This need was selected because the secondary data and focus groups identified the need as well as the inclusion of mental health in the health council’s health priorities.
- Access to care - This need was selected because the secondary data and focus groups identified the need.
- Healthy eating/active living - This need was selected because the secondary data and the focus groups as well as the health council identified the need.
- Substance misuse – This need was selected because the focus groups and the health council identified the need.

## Needs That Will Not Be Addressed

All significant needs prioritized were selected and will be addressed in this CHNA cycle.

## Summary of Impact of the Previous CHNA Implementation Strategy

Highpoint Health - Sumner with Ascension Saint Thomas did not prepare a CHNA previously as Sumner Regional Medical Center, they were for-profit, investor owned and did not meet the requirement to perform a CHNA.

## Approval by the Highpoint Health Governing Board

To ensure Highpoint Health - Sumner with Ascension Saint Thomas's efforts meet the needs of the community and have a lasting and meaningful impact, the 2024 CHNA was presented to the Highpoint Health Governing Board for approval and adoption on March 4, 2025. Although an authorized body of the hospital must adopt the CHNA and implementation strategy reports to be compliant with the provisions in the Affordable Care Act, adoption of the reports also demonstrates that the board is aware of the findings from the CHNA, endorses the health needs identified, and supports the strategies developed to respond to those needs.

## Conclusion

Highpoint Health - Sumner with Ascension Saint Thomas hopes this report offers a meaningful and comprehensive understanding of the most significant needs of Sumner County. This report will be used by internal stakeholders, nonprofit organizations, government agencies, and other Highpoint Health Governing Board community partners to guide the implementation strategies and community health improvement efforts as required by the Affordable Care Act. The 2024 CHNA will also be available to the broader community as a useful resource for further health improvement efforts.

As a Catholic health ministry, Highpoint Health - Sumner with Ascension Saint Thomas is dedicated to spiritually centered, holistic care that sustains and improves the health of not only individuals but the communities it serves. With special attention to those who are underserved and marginalized, we are advocates for a compassionate and just society through our actions and words. Highpoint Health - Sumner with Ascension Saint Thomas is dedicated to serving patients with compassionate care and medical excellence, making a difference in every life we touch. The hospital values the community's voice and welcomes feedback on this report. Please visit Highpoint Health's public website (<https://highpointhealthsystem.com/chna>) to submit any comments or questions.

## Appendices

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## Appendix A: Definitions and Terms

Catholic Health Association of United States (CHA) “is recognized nationally as a leader in community benefit planning and reporting.”<sup>3</sup> The definitions in Appendix A are from the CHA guide *Assessing and Addressing Community Needs, 2015 Edition II*, which can be found at [chausa.org](http://chausa.org).

### Demographics

Population characteristics of your community. Sources of information may include population size, age structure, racial and ethnic composition, population growth, and density.

### Key Stakeholder Focus Groups/Interviews

A method of obtaining input from community leaders and public health experts one-on-one. Interviews can be conducted in person or over the telephone (including computer/video calls). In structured focus groups and interviews, questions are prepared and standardized prior to the interview to ensure consistent information is solicited on specific topics. In less structured interviews, open-ended questions are asked to elicit a full range of responses. Key informants may include leaders of community organizations, service providers, and elected officials. Individuals with special knowledge or expertise in public health may include representatives from your state or local health department, faculty from schools of public health, and providers with a background in public health. Could also be referred to as Stakeholder Interviews.

### Medically Underserved Populations

Medically underserved populations include populations experiencing health disparities or that are at risk of not receiving adequate medical care because of being uninsured or underinsured or due to geographic, language, financial, or other barriers. Populations with language barriers include those with limited English proficiency. Medically underserved populations also include those living within a hospital facility’s service area but not receiving adequate medical care from the facility because of cost, transportation difficulties, stigma, or other barriers.

<sup>3</sup> Catholic Health Association of the United States. (2015). *Assessing & Addressing Community Health Needs, 2015 Edition II*.

## Appendix B: Community Demographic Data and Sources

The tables below provide further information on the community’s demographics. The descriptions of the data’s importance are largely drawn from the County Health Rankings & Roadmaps website.

### Table 1: Population

Why it is important: The composition of a population, including related trends, is important for understanding the community context and informing community planning.

Population	Sumner County	Tennessee	U.S.
Total	208,821	7,126,489	334,914,895
Male	49.0%	49.1%	49.6%
Female	51.0%	50.9%	50.4%

Source: StrategyHealth, [U.S. Census Bureau](#)

### Table 2: Population by Race and Ethnicity

Why it is important: The racial and ethnic composition of a population is important in understanding the cultural context of a community. The information can also be used to better identify and understand health disparities.

Race or ethnicity	Sumner County	Tennessee	U.S.
Asian	1.7%	2.2%	6.6%
Non-Hispanic Black / African American	8.3%	16.7%	13.6%
Hispanic / Latino	6.2%	6.4%	19.1%
American Indian or Alaska Native	.4%	.5%	1.3%
Non-Hispanic White	81.5%	72.9%	58.9%

Source: StrategyHealth, [U.S. Census Bureau](#), [CHR](#)

### Table 3: Population by Age

Why it is important: The age structure of a population is important in planning for the future of a community, particularly for schools, community centers, healthcare, and child care. A population with more youths will have greater education and childcare needs, while an older population may have greater healthcare needs.

Age	Sumner County	Tennessee	U.S.
Median age	39.4	39.2	39.0

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Ages 0-17	22.8%	21.8%	21.7%
Ages 18-64	60.1%	60.9%	61.0%
Ages 65+	17.1%	17.3%	17.3%

Source: StrategyHealth, [U.S. Census Bureau](#)

**Table 4: Income**

Why it is important: Median household income and the percentage of children living in poverty, which can compromise physical and mental health, are well-recognized indicators. People with higher incomes tend to live longer than people with lower incomes. In addition to affecting access to health insurance, income affects access to healthy choices, safe housing, safe neighborhoods, and quality schools. Chronic stress related to not having enough money can have an impact on mental and physical health as well. ALICE, an acronym for Asset Limited, Income Constrained, Employed, are households that earn more than the U.S. poverty level but less than the basic cost of living for the county. Combined, the number of poverty and ALICE households equals the total population struggling to afford basic needs.

Income	Sumner County	Tennessee	U.S.
Median household income	\$81,883	\$64,035	\$75,149
Per capita income	\$40,419	\$36,040	\$41,261
People with incomes below the federal poverty guideline	7.5%	13.3%	11.5%
ALICE households	29%	30%	29%

Source: StrategyHealth, [U.S. Census Bureau](#), [United for Alice](#)

**Table 5: Education**

Why is it important: There is a strong relationship between health, lifespan, and education. In general, as income increases, so does lifespan. The relationship between more schooling, higher income, job opportunities (e.g., pay, safe work environment), and social support helps create opportunities for healthier choices.

Income	Sumner County	Tennessee	U.S.
High school diploma or higher	91.4%	89.3%	89.1%
Bachelor's degree or higher	31.2%	29.7%	34.3%

Source: StrategyHealth, [U.S. Census Bureau](#), [CHR](#)

**Table 6: Insured/Uninsured**

Why it is important: Lack of health insurance can have serious health consequences due to lack of preventive care and delays in care that can lead to serious illness or other health problems.

Income	Sumner County	Tennessee	U.S.
Uninsured	11.6%	11.9%	10.0%
Medicaid Participation, not Eligible	22.7%	22.4%	25.1%

Source: < StrategyHealth, [County Health Rankings](#), [TennCare Enrollment](#), [Medicaid.gov](#)

## Appendix C: Community Input Data and Sources

### Key stakeholder focus groups

Highpoint Health - Sumner with Ascension Saint Thomas were able to secure 21 individuals representing 15+ organizations and agencies in Sumner County as those interviewed were active in several organizations. We thank the following organizations for their willingness to volunteer their time and knowledge to this effort:

Organization	Represents
Congressman John Rose’s Office	All
U.T. Extension	All
Chamber of Commerce	Business
Sumner County Schools	Children & Youth
Gallatin Police Department	All
Sumner County Government	All
Business, former County Mayor, Hospital Board	All
Retired Banker, former City Council, Hospital Board	All
Highpoint Health Sumner	All
Sumner County School Health	Children & Youth
Vol State	All
Sumner County Health Department	All
United Way	All
Economic Development City of Gallatin, Shalom Zone Board	All
Community Volunteer, Hospital Board	All
Retired physician, community volunteer, Hospital Board	All
Hope Family Health	Access to Care

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Conducted in person and via telephone, the key stakeholder interviews loosely followed the following set of questions:

1. Can you share about your role(s) here in your community?
2. When I say “quality of life” what do you think about? How would you define “quality of life”?
3. Thinking about this shared definition, what are the top three things you believe you would improve QOL in your community?
4. What changes have you noticed in QOL for those who live in Sumner County?
5. What do you think are your community’s strongest assets? For improving health?
6. What are the obstacles or challenges within your community? For improving health?
7. What would you say are the top three issues specific to health or health care that you are most concerned about in Sumner County?
8. If you had a magic wand, what top initiatives would you implement in your community?

**The Community Health Summit**

On November 13, 2024, 29 community stakeholders including the health department and health council members met to receive the results of the CHNA, prioritize the most significant health needs, and brainstorm some solutions to the most significant issues. Below is a list of attendees.

Organization	Represents
Congressman John Rose’s Office	All
U.T. Extension	All
Chamber of Commerce	Businesses
Sumner County Schools	Children & Youth
Unlimited Potential	All
Sumner County Government	All
Business, former County Mayor, Hospital Board	All
Second Harvest	Food Insecure
Highpoint Health Sumner	All

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CHANT at Sumner County Health Department	All
Sumner County Health Department	All
Community Volunteer, Hospital Board	All
Sumner County EMS	All
Hope Family Health	Access to Care
Second Harvest	Food Insecure
Highpoint Health Sumner	All
TN Voices	Mental Health

There were four tables each addressing one of the issues: substance misuse, mental health, healthy eating and active living, and access to care.

Below are the results of their brainstorming.

**Significant Community Health Issue:**

**Mental Health**

Please list your top 2 community health goals relative to your topic. Please make these goals SMART (Specific, Measurable, Attainable, Realistic, Time-bound)

1. Improve access to current mental health resources \_\_\_
2. Increase mental health resources\_\_\_\_\_

**Create a Community Action Plan for your 2 Goals with suggested resources needed:**

<b>Goal 1: (from above) Improve access to current mental health resources</b>	
<b>Actions</b>	<b>Resources/Collaborators Needed</b>
Improve insurance coverage for mental health services – private insurance, TennCare Improve access to mental health care, free and school-based therapy Provide transportation vouchers Provide telehealth therapy Provide workplace education to give workers time off to receive help.	Governments, insurance companies, transportation companies, MidCumberland, Internet, employers, parents, schools  Connecting Forward at TN voices in partnership with child and family services that addresses housing, substance abuse, children.

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Communicate to parents and get consent for treatment in schools	Employers need to focus on the cost of mental health issues.  Partner with Shalom Zone to learn about resources.  Partner with Second Harvest to reach out to all areas of the county.
Ensure consistent funding streams. Many mental health programs are grant funded and the program ends when the grant ends, creating distrust.	State, county, federal governments Grantees, lobbyists

<b>Goal 2:</b> (from above) Increase mental health resources	
<b>Actions</b>	<b>Resources/Collaborators Needed</b>
Find the gaps in resources More school-based prevention programs More local in and outpatient treatment options Flexible school models Coordination of care	School nurses Administrators Hospital
Improve funding streams	School boards, governments, non-profits/healthcare providers

**Significant Community Health Issue:**

**Access to Care**

Please list your top 2 community health goals relative to your topic. Please make these goals SMART (Specific, Measurable, Attainable, Realistic, Time-bound)

1. Decrease the uninsured percentage from 10.7% to 8% by 2030
2. Improve the ratio of population to healthcare providers by 2030

**Create a Community Action Plan for your 2 Goals with suggested resources needed:**

<b>Goal 1:</b> (from above) Decrease the uninsured percentage from 10.7% to 8% by 2030	
<b>Actions</b>	<b>Resources/Collaborators Needed</b>
Increase benefit navigators	Health Department, schools, Community Health Centers, Hospitals

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Increase publicity so the public knows about insurance options	News media, Health care providers
Expand Medicaid	State legislature

<b>Goal 2: (from above) Improve ratio of population to healthcare providers by 2030</b>	
<b>Actions</b>	<b>Resources/Collaborators Needed</b>
Increase internships and residencies in Sumner County	Medical schools – continue partnership with LMU Rural providers
Provide more assistance with cost of PCP recruitment and retention, such as loan repayment	Tennessee Hospital Association General Assembly/policy makers

**Significant Community Health Issue:**

**Healthy eating/active living**

Please list your top 2 community health goals relative to your topic. Please make these goals SMART (Specific, Measurable, Attainable, Realistic, Time-bound)

1. Implement basic nutrition cooking education curriculum in 5% of pediatric health settings by 2026
2. Implement resources for physical activity and education about what is needed

**Create a Community Action Plan for your 2 Goals with suggested resources needed:**

<b>Goal 1: (from above) Implement basic nutrition cooking education in 5% of pediatric health settings by 2026</b>	
<b>Actions</b>	<b>Resources/Collaborators Needed</b>
Create or use evidence-based curriculum and disseminate to pediatric settings targeting parents and children. Gather resources, coordinate efforts	UT extension, Second harvest, SNAP education, Health Department
Assign teaching responsibilities	Trained nutrition educators – UT Extension, food pantries, school system, health department
Provide information about growing your own food, gardening in pots, raised beds, kiddie pools	Shalom Zone, Second Harvest, Health Department, UT Extension

<b>Goal 2:</b> (from above) Implement resources of physical activity and education about what is needed.	
<b>Actions</b>	<b>Resources/Collaborators Needed</b>
Provide resources about how to exercise without joining a gym (dance party, obstacle course at home, videos on YouTube or TikToc) or provide information about inexpensive exercise resources such as the Civic center.	Gyms, Civic center, UT Extension,
Provide information on nontraditional exercise like gardening.	

**Significant Community Health Issue:**

**Substance Misuse**

Please list your top 2 community health goals relative to your topic. Please make these goals SMART (Specific, Measurable, Attainable, Realistic, Time-bound)

1. Provide education in schools
2. Provide education in the community

**Create a Community Action Plan for your 2 Goals with suggested resources needed:**

<b>Goal 1:</b> (from above) Provide education on vaping and prescription medication misuse	
<b>Actions</b>	<b>Resources/Collaborators Needed</b>
Assemble a panel of youth that have had adverse experiences with vaping, an inmate who can speak to youth, someone from Recovery Court, a parent who has lost a child to drugs to speak to kids and parents about drug use.	Churches, schools, jail administration, SRO, recovery programs,
Add supplemental information to these presentation and continue to dialogue through the year, adding the information to websites	Youth Groups, prevention coalition, civic clubs,

<b>Goal 2:</b> (from above) Find, create, and maintain a resource guide	
<b>Actions</b>	<b>Resources/Collaborators Needed</b>
Determine who will update the resource guide, make it a living document	
Disseminate the guide throughout the county	Agencies, civic clubs

**Input of those with special knowledge or expertise in public health**

The Sumner County Health Department was consulted prior to beginning the CHNA process for advice and counsel. Representatives of the Sumner County Health Department participated in the interviews.

**Consulting with persons representing the community's interests and taking into account input from persons who represent the broad interests of the community served by Highpoint Health-Sumner**

21 key community members were interviewed. Those selected were chosen based on their knowledge of Sumner County and its health needs. Highpoint Health-Sumner and the Sumner County Health Department recommended the interviewees who represented the broad interests of the community. The request to participate was done through email communication with community stakeholders; which represents a very broad swathe of the community representing many different agencies and organizations.

**Solicit and take into account members of the medically underserved, uninsured, and minority population served by the hospital or other representatives**

Many of the interviewees were selected because they represented the medically underserved, uninsured and minority population.

## Appendix D: Secondary Data and Sources

The tables below are based on data vetted, compiled, and made available on the County Health Rankings and Roadmaps (CHRR) website (<https://www.countyhealthrankings.org/>). The site is maintained by the University of Wisconsin Population Health Institute, School of Medicine and Public Health, with funding from the Robert Wood Johnson Foundation. CHRR obtains and cites data from other public sources that are reliable. CHRR also shares trending data on some indicators.

CHRR compiles new data annually and shares it with the public. The data below is from the 2024 publication. It is important to understand that reliable data is generally two to three years behind due to the importance of careful analysis.

How to Read These Charts	
<b>Why they are important:</b>	Explains why we monitor and track these measures in a community and how it relates to health. The descriptions for “why they are important” are largely drawn from the CHRR website.
<b>County vs. state:</b>	Describes how the county’s most recent data for the health issue compares to the state average.
<b>Trends:</b>	CHRR provides a calculation for some measures to explain if a measure is worsening or improving. <ul style="list-style-type: none"> <li>● Red: The measure is worsening in this county.</li> <li>● Green: The measure is improving in this county.</li> <li>● Empty: There is no data trend to share, or the measure has remained the same.</li> </ul>
<b>United States (U.S.):</b>	Describes how the county’s most recent data for the health issue compares to the U.S.
<b>Description:</b>	Explains what the indicator measures, how it is measured, and who is included in the measure.
<b>N/A:</b>	Not available or not applicable. There might not be available data for the community on every measure. Some measures will not be comparable.

### Table 7: Health Outcomes

Why they are important: Health outcomes reflect how healthy a county is right now. They reflect the physical and mental well-being of members within a community. NA= not available

Indicators	Trend	Sumner	TN	U.S.	Description
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Length of Life					
Premature death		8,835	11,043	8,000	Years of potential life lost before age 75 per 100,000 population (age-adjusted)
Life expectancy		76	74	78	How long the average person is expected to live
Infant mortality		4.6	6.9	6.0	Number of all infant deaths (within one year) per 1,000 live births
Physical Health					
Poor or fair health		16%	18%	14%	Percentage of adults reporting fair or poor health
Poor physical health Days		3.9	4.1	3.1	Average number of physically unhealthy days reported in the past 30 days (age-adjusted)
Frequent physical distress		12%	13%	10%	Percentage of adults with 14 or more days of poor physical health per month
Low birth weight		8%	9%	8%	Percentage of babies born too small (less than 2,500 grams)
Falls 65+ (by state)		NA	31.2%	27.6%	Older adult falls reported by state
Fall fatalities 65+ (by state)		NA	85.9	78.0	Number of injury deaths due to falls among those 65 years of age and over per 100,000 population
Mental Health					
Poor mental health days		5.7	5.8	4.8	Average number of mentally unhealthy days reported in the past 30 days
Frequent mental distress		18%	19%	15%	Percentage of adults reporting 14 or more days of poor mental health per month
Suicide		19	17	14	Number of deaths due to suicide per 100,000
Morbidity					
Diabetes prevalence		10%	12%	10%	Percentage of adults ages 20 and above with diagnosed diabetes
Cancer deaths (by state)		199.1	207.5	210.2	Average annual cancer death rate per 100,000
Communicable Disease					
HIV prevalence		133.3	318.1	382.0	Number of people ages 13 years and over with a diagnosis of HIV per 100,000
Sexually transmitted infections		350	562	496	Number of newly diagnosed chlamydia cases per 100,000

Source: [County Health Rankings, 2024](#); [AHR fall rates CDC falls](#); [State Cancer Profiles](#)

**Table 8: Social and Economic Factors**

Why they are important: These factors have a significant effect on our health. They affect our ability to make healthy decisions, afford medical care, afford housing and food, manage stress, and more.

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Indicator	Trend	Sumner	TN	U.S.	Description
<b>Economic Stability</b>					
Median household income		\$81,883	\$64,035	\$75,149	The income where half of households in a county earn more and half of households earn less
Unemployment		2.7%	3.5%	3.5%	Percentage of population ages 16 and older unemployed but seeking work
Poverty		7.5%	13.3%	11.5%	Percentage of population living below the federal poverty line
Childhood poverty		9%	18%	16%	Percentage of people under age 18 in poverty
<b>Educational Attainment</b>					
High school completion		91%	89.3%	89.1%	Percentage of adults ages 25 and over with a high school diploma or equivalent
Some college		68%	63%	68%	Percentage of adults ages 25-44 with some post-secondary education
<b>Social/Community</b>					
Children in single-parent homes		19%	28%	25%	Percentage of children who live in a household headed by a single parent
Social associations		7.5	11.0	9.7	Number of membership associations per 10,000 population
Disconnected youth		4.7%	7%	7%	Percentage of teens and young adults ages 16-19 who are neither working nor in school
Violent crime		231.3	613.4	380.7	Number of reported violent crime offenses per 100,000 population
<b>Access to Healthy Foods</b>					
Food environment index		8.2	6.5	7.7	Index of factors that contribute to a healthy food environment (0 = worst, 10 = best)
Food insecurity		9%	12%	10%	Percentage of the population who lack adequate access to food
Limited access to healthy foods		7%	9%	6%	Percentage of the population who are low-income and do not live close to a grocery store

Source: [County Health Rankings](#), [FBI Crime Data Explorer](#), [Bureau of Labor Statistics](#).

**Table 9: Physical Environment**

Why they are important: The physical environment is where people live, learn, work, and play. The physical environment impacts our air, water, housing, and transportation to work or school. Poor physical environment can affect our ability and that of our families and neighbors to live long and healthy lives.

Indicator	Trend	Sumner	TN	U.S.	Description
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Physical Environment					
Severe housing cost burden		11%	12%	14%	Percentage of households that spend 50 percent or more of their household income on housing
Severe housing problems		12%	13%	17%	Percentage of households with at least one of four housing problems: overcrowding, high housing costs, lack of kitchen facilities, and/or lack of plumbing facilities
Air pollution: particulate matter		7.1	7.6	7.4	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5)
Home ownership		73%	67.1%	65.0%	Percentage of occupied housing units that are owned

Source: [County Health Rankings, 2024](#)

**Table 10: Clinical Care**

Why it is important: Access to affordable, quality care can help detect issues sooner and prevent disease. This can help individuals live longer and have healthier lives.

Indicator	Trend	Sumner	TN	U.S.	Description
<b>Healthcare Access</b>					
Uninsured		11%	12%	10%	Percentage of population under age 65 without health insurance
Uninsured adults		13.0%	14.6%	12.0%	Percentage of adults under age 65 without health insurance
Uninsured children		4.6%	4.6%	5.0%	Percentage of children under age 19 without health insurance
Primary care physicians		2,134	1,440	1,330	Ratio of the population to primary care physicians
Mental healthcare providers		922	530	320	Ratio of the population to mental healthcare providers
<b>Hospital Utilization</b>					
Preventable hospital stays		3,242	2,896	2,681	Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees
<b>Preventive Healthcare</b>					
Flu vaccinations		49%	47%	46%	Percentage of fee-for-service Medicare enrollees who had an annual flu vaccination
Mammography screenings		41%	42%	43%	Percentage of female Medicare enrollees ages 65-74 who received an annual mammography screening

Source: [County Health Rankings, 2024](#)

**Table 11: Health Behaviors**

Why they are important: Health behaviors are actions individuals take that can affect their health. These actions can lead to positive health outcomes or they can increase someone’s risk of disease and

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premature death. It is important to understand that not all people have the same opportunities to engage in healthier behaviors.

Indicator	Trend	Sumner	TN	U.S.	Description
<b>Healthy Lifestyle</b>					
Adult obesity		35%	36%	34%	Percentage of the adult population (ages 20 and older) that reports a body mass index (BMI) greater than or equal to 30 kg/m2
Physical inactivity		25%	27%	23%	Percentage of adults ages 20 and over reporting no leisure-time physical activity
Access to exercise opportunities		60%	67%	84%	Percentage of population with adequate access to locations for physical activity
Insufficient sleep		31%	34%	33%	Percentage of adults who report fewer than seven hours of sleep on average
Motor vehicle crash deaths		11	17	12	Number of motor vehicle crash deaths per 100,000 population
Teen births		20	24	17	Number of births per 1,000 female population ages 15-19
<b>Substance Misuse</b>					
Adult smoking		18%	20%	15%	Percentage of adults who are current smokers
Excessive drinking		15%	17%	18%	Percentage of adults reporting binge or heavy alcohol drinking
Alcohol-impaired driving deaths		30%	24%	26%	Alcohol-impaired driving deaths
Overdose deaths: any opioids by state		26	43.1	24.4	Rate of opioid-related deaths by state per 100,000 persons
<b>Sexual Health</b>					
Sexually transmitted infections		350	562.4	495.5	Number of newly diagnosed chlamydia cases per 100,000 population

Sources: [County Health Rankings, 2024](#); [TN Dept of Health Drug Overdose dashboard](#)

**Table 12: Disparities**

Why they are important: Differences in access to opportunities that affect health can create differences between groups of people in the community. A focus on equity is important to improve health for everyone in the community.

Indicator	Population	Measure
<b>Health Disparities</b>		
	<b>Overall Tennessee</b>	10,731.3

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Premature death: Years of potential life lost before age 75 per 100,000 population (age-adjusted)	Non-Hispanic White	10,014.6
	Non-Hispanic Black	15,316.7
	Non-Hispanic American Indian/Alaska Native	5,053.4
	Non-Hispanic Asian/HL native/Pacific Islander	3,934.3
	Hispanic all races	7,447.5
Low birthweight: Percentage of live births with low birthweight (< 2,500 grams)	<b>Overall Tennessee</b>	9%
	Asian	9.1%
	Non-Hispanic Black / African American	14.9%
	Hispanic / Latino	7.5%
	American Indian or Alaska Native	7.5%
	Non-Hispanic White	7.5%

Source: [CDC Wonder 2020,6,886,834](#); [March of Dimes 2020-2022](#)

## Appendix E: Health Care Facilities and Community Resources

As part of the CHNA process, Highpoint Health - Sumner with Ascension Saint Thomas has cataloged resources available in Sumner County that respond to the significant needs identified in this CHNA. Resources may include acute care facilities (hospitals), primary and specialty care clinics and practices, mental health providers, and other non-profit services. State and national resources can also provide information regarding programs that can better serve the needs of a person experiencing a specific problem.

The resources listed under each significant need heading are not intended to be exhaustive.

### Mental Health

Organization	Phone	Website
Statewide Crisis Line	855-CRISIS-1 (855-274-7471)	
Heart Felt Needs Counseling and Caring Center, Inc.	423-886-5663	<a href="https://heartfeltneeds.com/">https://heartfeltneeds.com/</a>
Cheer Mental Health (McMinnville)	931-473-9649	<a href="https://www.vbhcs.org/locations/mcminnville/">https://www.vbhcs.org/locations/mcminnville/</a>

### Substance Misuse

Organization	Phone	Website
Tennessee REDLINE	800-680-0633	
Cheer Mental Health (McMinnville)	931-473-9649	<a href="https://www.vbhcs.org/locations/mcminnville/">https://www.vbhcs.org/locations/mcminnville/</a>
AA and NA meetings	800-559-2252	<a href="https://www.aa.org/">https://www.aa.org/</a> , <a href="https://www.na.org/">https://www.na.org/</a>

### Access to Care

Organization	Phone	Website
Highpoint Health - Sumner with Ascension Saint Thomas Medical Center	(615) 563-4001	<a href="https://healthcare.ascension.org/locations/tennessee/tnnas/Gallatin-ascension-saint-thomas-stones-river">https://healthcare.ascension.org/locations/tennessee/tnnas/Gallatin-ascension-saint-thomas-stones-river</a>
Gallatin Medical Center, P.C.	615-563-2891	<a href="https://Gallatinmedicalcenter.org/">https://Gallatinmedicalcenter.org/</a>
Mountain View Medical	615-563-3245	<a href="https://healthcare.ascension.org/find-care/provider/1376544767/james-spurlockiii">https://healthcare.ascension.org/find-care/provider/1376544767/james-spurlockiii</a>
Family Practice-Gallatin	615-563-2891	<a href="https://healthcare.ascension.org/find-care/provider/1700823713/jeffrey-todd">https://healthcare.ascension.org/find-care/provider/1700823713/jeffrey-todd</a>
Fast Pace Urgent Care	615-616-6010	<a href="https://fastpacehealth.com/location/Gallatin/">https://fastpacehealth.com/location/Gallatin/</a>

**Highpoint Health - Sumner with Ascension Saint Thomas**

Sumner County Health Department	615-563-4243	<a href="https://Sumnercountytn.gov/health-department/">https://Sumnercountytn.gov/health-department/</a>
Community Wellness Clinic	615-563-7515	<a href="https://www.tncommunitywellness.com/">https://www.tncommunitywellness.com/</a>

**Obesity and Resulting Chronic Conditions**

Organization	Phone	Website
All of the above under Access to Care		
Parks: Lincoln's Place Jim Cummings Park Justin Pemberton Park Dillon Park CS Hawkins Park		
American Diabetes Association	(317) 352-9226	<a href="https://diabetes.org/local/tennessee">https://diabetes.org/local/tennessee</a>
American Heart Association	615-340-4100	<a href="https://www.heart.org/en/affiliates/tennessee">https://www.heart.org/en/affiliates/tennessee</a>

## Appendix F: Evaluation of Impact from the Previous CHNA Implementation Strategy

**Section required by IRS:** *The purpose of this section is to complement the "[Summary of Impact of the Previous CHNA Implementation Strategy](#)" above and more fully describe the impacts made during the previous CHNA cycle. Per IRS requirements, this section must include a listing of the impact of any actions taken to address the prioritized health needs identified in the hospital facility's prior CHNA (Part V, Section B, Line 3i).*

Highpoint Health - Sumner with Ascension Saint Thomas did not prepare a CHNA previously as Sumner Regional Medical Center, they were for-profit, investor owned and did not meet the requirement to perform a CHNA. Therefore, there is no previous CHNA.