



# 2022

Murray and Whitfield  
Counties, GA

Community Health  
Needs Assessment



**Hamilton**  
Health Care System

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# Perspective / Overview

## About Hamilton Health System

Hamilton Health Care System is a not-for-profit, fully united system of care serving the northwest Georgia region. The Dalton-based flagship of the system, Hamilton Medical Center, is a 255-bed regional acute-care hospital that offers major medical, surgical and diagnostic services, including award-winning, accredited stroke and chest pain centers.

Known for its advanced care and personalized service, Hamilton Health Care System offers innovative treatment options in state-of-the-art facilities while maintaining a compassionate, friendly, and tranquil healing environment.

Our mission is to provide leadership, partnerships and seamless resource coordination to meet healthcare needs that advance the quality and dignity of life.

Hamilton Medical Center offers many things to its patients and community. Here are just a few recent activities that prove there is a Hamilton Advantage.

### Technology Minded

The battle against cancer can be a trying process physically and emotionally. Peebles Cancer Institute provides the therapeutic and support services necessary to fight the disease. For residents across Northwest Georgia, the Peebles Cancer Institute offers some of the most advanced techniques for the treatment of cancer all under one roof.

To serve the families of Northwest Georgia, as well as neighboring communities in the region and beyond, Hamilton Health Care System has opened Anna Shaw Children's Institute. Dedicated to the memory of Anna Sue Shaw, the Institute is a regional leader of and advocate for the care of children and families who are experiencing the challenges of developmental delays.

Cutting-edge diagnostic and treatment capabilities position Hamilton Medical Center as a regional and national health care leader.

Hamilton was the first hospital in this area to offer the latest generation of the da Vinci® surgical robot featuring advanced 3-D visualization capabilities.

Digital mammography at Peebles Cancer Institute provides advanced technology for diagnosing breast cancer with the GE Senographe workstation, the latest breast cancer diagnosis equipment.

Hamilton's Mashburn Cardiac Pavilion's two cardiac catheterization labs feature fully digital Artis Zee® angiography systems with flat-panel detectors that enable physicians to view high-resolution images allowing them to see interventional devices such as guidewires, catheters, and coronary stents in precise detail and from almost any angle. Hamilton's hybrid suite features the first multi-axis system with robotic technology, the Siemens Artis Zeego angiography system. It is used for cardiac and non-cardiac procedures, including endovascular procedures.

## Perspective / Overview, cont.

### About Hamilton Health Care System, cont.

Angioplasty is now available at Hamilton Medical Center as part of Hamilton's participation in Georgia's C-PORT program. HMC was selected as one of 10 Georgia hospitals to participate in this national program that has allowed hospitals without an open-heart surgery program to perform angioplasty for its patients.

HMC is the first in the region with Interstim Therapy, a procedure for patients who have an overactive bladder or urinary urge incontinence and have not benefited from medications.

New computerized tomography (CT) system joins HMC's arsenal of diagnostic and imaging equipment. It remains among the most advanced CT scanners in the world.

Regional Neonatal Specialists operate Hamilton's Level III Neonatal Intensive Care Unit (NICU). They work with Dalton area obstetricians and pediatricians to provide specialty care to pregnant women and newborn infants at Hamilton.

### Community Focused

More than 25 years of promoting healthy lifestyles and fighting disease through preventative measures at Bradley Wellness Center.

Hamilton Convenient Care was created for illnesses and injuries that require prompt attention but are not emergencies. We treat adults and children over 2 years of age.

Qualified physicians like specialists in vascular surgery, gynecology, urology, psychiatry, internal and family medicine.

Renovated Emergency Care Department including enlarging Hamilton Medical Center's ER space from 12,600 to 27,700 square feet and increasing the number of treatment rooms from 29 to 35.

### Award-Winning

Hamilton Ambulatory Surgery Center (HASC) is a free-standing facility specifically designed for outpatient procedures such as arthroscopies, biopsies, tubal ligations, hernia repairs, cholecystectomy, and many others. HASC received the prestigious Summit Award from Press Ganey Associates, Inc. for the eighth (2013) year in a row.

Full accreditation from the Accreditation Review Committee making Hamilton Medical Center the seventh accredited Chest Pain Center in Georgia and the 243rd in the nation



## Creating a Culture of Health in the Community



*Action Cycle Source: the Robert Wood Johnson Foundation's County Health Rankings website:*

*<http://www.Countyhealthrankings.org/roadmaps/action-center>*

The Community Health Needs Assessment (CHNA) uses systematic, comprehensive data collection and analysis to define priorities for health improvement, creates a collaborative community environment to engage stakeholders, and an open and transparent process to listen and truly understand the health needs of Murray and Whitfield Counties, Georgia.

The Action Cycle shows how to create healthy communities. The rankings later in the document assist in understanding what makes a healthy community.

# Impact of 2019 CHNA and Implementation Plan

## Impact

COVID-19 impacted implementation in 2020. Groups were unable to meet in person and services were limited in the community. However, progress was made prior to COVID.

In 2019, Hamilton Health Care System selected the following significant health needs:

1. Lifestyle – Nutrition and Activity
2. Chronic Diseases
  - Diabetes
  - Cardiovascular Disease and Hypertension
  - Cancer
3. Mental Health
4. Access to Care
  - Access to providers
  - Access to free and reduced cost care
5. Substance Use – including tobacco
6. Social Determinants of Health – socioeconomics, housing, family dynamics, food insecurity

Page 43 outlines initiatives and impact of those initiatives.

## 2022 Community Health Needs Assessment

This document is a single facility hospital Community Health Needs Assessment (CHNA) for Hamilton Medical Center.

Hamilton Health Care System, as the sponsors of the assessment, engaged national leaders in community health needs assessments to assist in the project. Stratasan, a healthcare analytics and services company based out of Nashville, Tennessee, provided the analysis of community health data, facilitated the focus groups, conducted the interviews and facilitated a community health summit to receive community input into the priorities and brainstorm goals and actions the community could take to improve health.

- ✓ Starting on **September 30, 2022**, this report is made widely available to the community via Hamilton Health Care System's website <https://www.hamiltonhealthcare.com> and paper copies are available free of charge at Hamilton Medical Center, 1200 Memorial Drive, Dalton, GA 30722, or by phone 706-272-6000
- ✓ Hamilton Medical Center's board of directors approved this assessment on **September 22, 2022**.

## 2022 Community Health Needs Assessment

### PROJECT GOALS

- 1 To continue a formal and comprehensive community health assessment process which allows for the identification and prioritization of significant health needs of the community to assist with resource allocation, informed decision-making, and collective action that will improve health.
- 2 To continue a collaborative partnership between all stakeholders in the community by seeking input from persons who represent the broad interests of the community.
- 3 To support the existing infrastructure and utilize resources available in the community to instigate health improvement in the community.

“ We initiated the Community Health Needs Assessment with the goal to assess the health and needs of the community. This process is an affirmation of what we’ve been doing to improve health and has jumpstarted our next implementation plan,” said Bill Caldwell, CEO Hamilton Health Care System.

The information gathered both from public health data and from community stakeholders provided the insight the community needed to set priorities for significant health issues and will be used by the community to inform and support our implementation plans,” added Kimberly Reynolds, Executive Director Marketing, Hamilton Health Care System

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## Community

### Input and Collaboration

#### Data Collection and Timeline

In April 2022, Hamilton Health Care System began a Community Health Needs Assessment for Murray and Whitfield Counties and sought input from persons who represent the broad interests of the community using several methods:

- Information gathering, using secondary public health sources, occurred in May – July 2022.
- Community members participated in focus groups and individual interviews for their perspectives on community health needs and issues on June 20, 2022.
- A community online and paper survey was conducted from May 1 – July 11, 2022.
- An online survey of Hamilton Health Care System employees and community providers was conducted
- An online survey of community-based organizations was conducted with 54 community organizations participating from June 10 – July 11, 2022.
- A Community Health Summit was conducted on August 19, 2022, with community stakeholders. The audience consisted of healthcare providers, business leaders, government representatives, schools, not-for-profit organizations, and other community members.





Photo Credit: HHCS

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## Information Gaps

While this assessment was quite comprehensive, it cannot measure all possible aspects of health in the community, nor can it adequately represent all possible populations of interest. It must be recognized that these information gaps might in some ways limit the ability to assess all the community's health needs.

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## Participants

Over seventy individuals from forty-one community organizations collaborated to implement a comprehensive CHNA process focused on identifying and defining significant health needs, issues, and concerns of Murray and Whitfield Counties. The three-month process centered on gathering and analyzing data, as well as receiving input from persons who represented the broad interests of the community, to provide direction for the community, hospitals, and partnership to create a plan to improve the health of the communities.

## Participation by those Representing the Broad Interests of the Community

Participation in focus groups, interviews and the Community Health Summit creating the Murray and Whitfield Counties Community Health Needs Assessment and Improvement Plan included:

Organization	Population Represented (kids, low income, minorities, those w/o access)	How Involved
Boys and Girls Club of Northwest Georgia	Kids, youth	Focus Group
Chatsworth-Murray County Public Library	Community, Kids, youth	Focus Group
Coalition of Latin Leaders	Minorities	Focus Group
Community Christmas	Poverty, kids, youth	Focus Group
Community Foundation	Youth, education	Focus Group
Community Foundation of Northwest Georgia	Youth, education	Focus Group/Summit
Conasauga Circuit Juvenile Court	Kids, youth	Focus Group
Dalton Housing Authority	Businesses, minorities	Focus Group/Summit
Dalton Public Schools	Kids, youth	Focus Group/Summit
DEON-Whitfield Senior Center	Seniors	Focus Group
DEO Clinic	Public health	Focus Group
Department of Family and Children Services	Kids, youth	Focus Group
Family Support Council	Kids, youth	Focus Group
Georgia Department of Education	Youth, education	Focus Group
Georgia Mountains Health Services	Public health	Focus Group/Summit
Hamilton Diabetes and Endocrinology Center	Public health	Focus Group
Hamilton Health Care System- Population Health	Public health	Focus Group/Summit
Hamilton Medical Center	Public health	Focus Group
Highland Rivers Health	Public health	Focus Group
Junior Achievement of Georgia	Youth, education	Focus Group
Junior Achievement of Northwest Georgia	Youth, education	Focus Group
Khensani Consulting Services	Businesses	Focus Group
Latin American Association	Minorities	Focus Group/Summit
Live 4 It	Health, nutrition	Focus Group/Summit
Mack Gaston Community Center	Community	Focus Group/Summit
Murray Arts Council	Community	Focus Group
Murray County Chamber Young Professionals	Kids, youth	Focus Group
Murray County Family Connection	Kids, youth	Focus Group
Murray County Health Department	Community	Focus Group
Murray Whitfield CASA	Kids, youth	Focus Group
Peoples Cancer Institute	Public health	Focus Group
Rotary Club of Dalton	Community	Focus Group
Shaw Industries	Community	Focus Group/Summit
United Way of Northwest Georgia	Poverty, kids, education	Focus Group/Summit
Venue 208	Community	Focus Group
Whitfield County Family Connection	Kids, youth	Focus Group
Whitfield County Health Department	Public health	Focus Group
Whitfield County Schools	Kids, youth	Focus Group
Whitfield-Murray Historical Society	Community	Focus Group
Alliant Health Plans	Community	Summit
Family Connection	Kids, youth	Summit

In many cases, several representatives from each organization participated.





Photo Credit: HHCS

## Community Engagement and Transparency

Many members of the community participated in focus group, individual interviews, community surveys, and the Summit. We are pleased to share the results of the Community Health Needs Assessment with the rest of the community in hopes of attracting more advocates and volunteers to improve the health of our communities. The following pages highlight key findings of the assessment. We hope you will take the time to review the health needs of our community as the findings impact every citizen in one way or another; and join in the improvement efforts.

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### Input of the Medically Underserved, Low-Income, and Minority Populations

Input of medically underserved, low-income and minority populations was received through interviews, focus groups, surveys and the community health summit. Agencies representing these population groups were intentionally invited to the focus groups, interviews and summit. The community survey was representative of the whole community – by age, income, and education.

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### Input of those with Expertise in Public Health

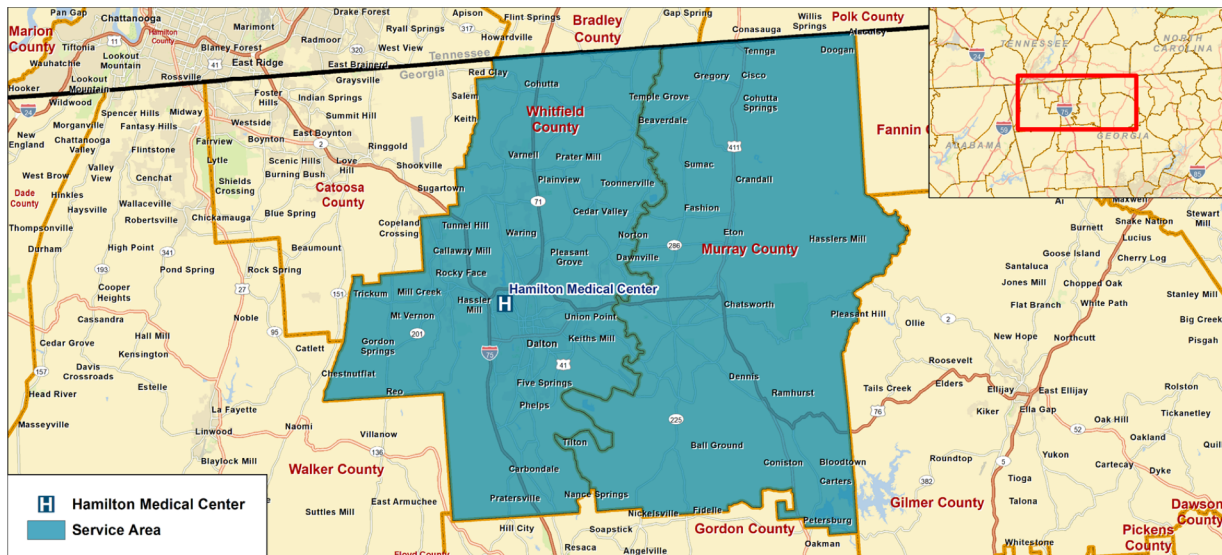
The health department participated in the focus groups and in the community health summit.

## Community Selected for Assessment

Murray and Whitfield Counties were the primary focus of the CHNA due to the service area of Hamilton Health Care System. Used as the study area, Murray and Whitfield Counties provided **50%** of inpatient discharges from January 1, 2021, through December 31, 2021. The community includes medically underserved, low-income, and minority populations who live in the geographic areas from which Hamilton Health Care System draws their patients.

All patients were used to determine the service area without regard to insurance coverage or eligibility for financial assistance under Hamilton Health Care System's Financial Assistance Policy.

## Hamilton Health Care System Study Area - 2022





# Key Findings

## Community Health Assessment

### Results

Based on the previous CHNA priorities, secondary data, focus groups, and surveys, the summit participants selected the following significant health needs to be the focus of the work of community over the next three years.

1. Mental Health
2. Access to care
3. Healthy Eating/Active Living
4. Socioeconomics/Social determinants of care
5. Substance use disorder
6. Chronic disease management
7. Education

### Process and Methods

Both primary and secondary data sources were used in the CHNA.

#### Primary methods included:

- Focus groups with community members
- Community online surveys
- Community Health Summit

#### Secondary methods included:

- Public health data – death statistics, County Health Rankings, cancer incidence
- Demographics and socioeconomics – population, poverty, uninsured, unemployment
- Psychographics – behavior measured by spending and media preferences



Photo Credit: HHCS

# Description of the Communities Served

## Demographics

The table below shows the demographic summary of Murray and Whitfield Counties compared to Georgia and the U.S.

	Murray County	Whitfield County	Georgia	USA
Population	41,360	103,941	10,815,378	333,934,112
Median Age	38.3	35.8	37.2	38.8
Median Household Income	\$49,777	\$51,535	\$60,605	\$64,730
Annual Pop. Growth (2021-2026)	0.25%	0.31%	1.05%	0.71%
Household Population	14,710	35,697	4,013,721	126,470,675
Dominant Tapestry	Southern Satellites (10A)	Forging Opportunity (7D)	Southern Satellites (10A)	Green Acres (6A)
Businesses	761	3,269	353,744	12,013,469
Employees	7,911	50,413	4,675,136	150,287,786
Health Care Index*	76	84	97	100
Average Health Expenditures	\$4,722	\$5,268	\$6,026	\$6,237
Total Health Expenditures	\$0.1 B	\$0.2 B	\$24.2 B	\$788.8 B
<b>Racial and Ethnic Make-up</b>				
White	86%	73%	56%	69%
Black	1%	4%	32%	13%
American Indian	1%	1%	0%	1%
Asian/Pacific Islander	1%	2%	5%	6%
Other	10%	18%	5%	7%
Mixed Race	2%	3%	3%	4%
Hispanic Origin	17%	38%	10%	19%

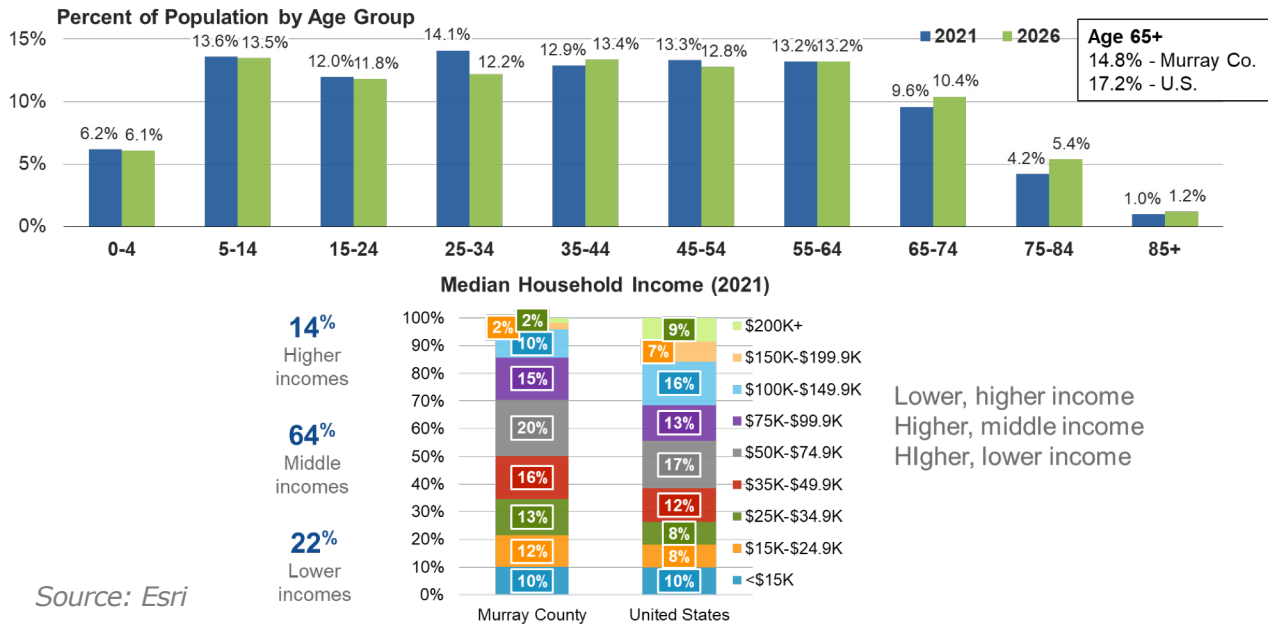
Source: Esri

*\*The Health Care Index is household-based, and represents the amount spent out of pocket for medical services and insurance relative to a national index of 100.*

*The median is the value at the midpoint of a frequency. There is an equal probability of falling above or below the median.*

## Demographics, cont.

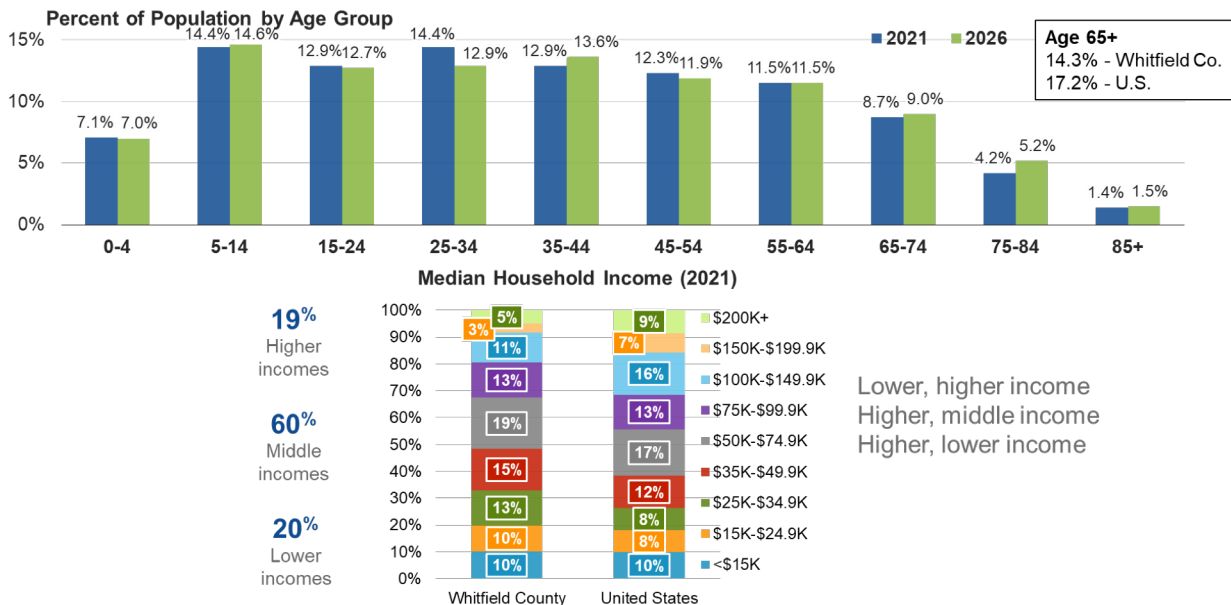
### Murray County



- The population of Murray County is projected to increase from 2021 to 2026 (.25% per year). Georgia is projected to increase 1.05% per year. The U.S. is projected to increase 0.71% per year.
- Murray County had a higher median age (38.3 median age) than GA (37.2), but lower than the U.S. (38.8), but. In Murray County the percentage of the population 65 and over was 14.8%, lower than the U.S. population 65 and over at 17.2%.
- Murray County's median household income at \$49,777 was lower than GA (\$60,605) and the U.S. (\$64,730). The rate of poverty in Murray County was 15.9% which was higher than GA (14.0%) and the U.S. (11.9%).
- The household income distribution of Murray County was 14% higher income (over \$100,000), 64% middle income, and 22% lower income (under \$25,000). The largest income group is the 20% making \$50,000 to \$74,999.
- The health care index measures how much the populations spent out-of-pocket on health care services including insurance premiums. The U.S. index was 100. Murray County was 76, indicating 24% less spent out of pocket than the average U.S. household on medical care (doctor's office visits, prescriptions, hospital visits) and insurance premiums.
- The racial and ethnic make-up of Murray and Whitfield Counties was 86% White, 1% Black, 17% Hispanic origin, 2% more than one race, 1% Asian/Pacific Islander, 1% American Indian and 10% other. *(These percentages total to over 100% because Hispanic is an ethnicity, not a race.)*

## Demographics, cont.

### Whitfield County



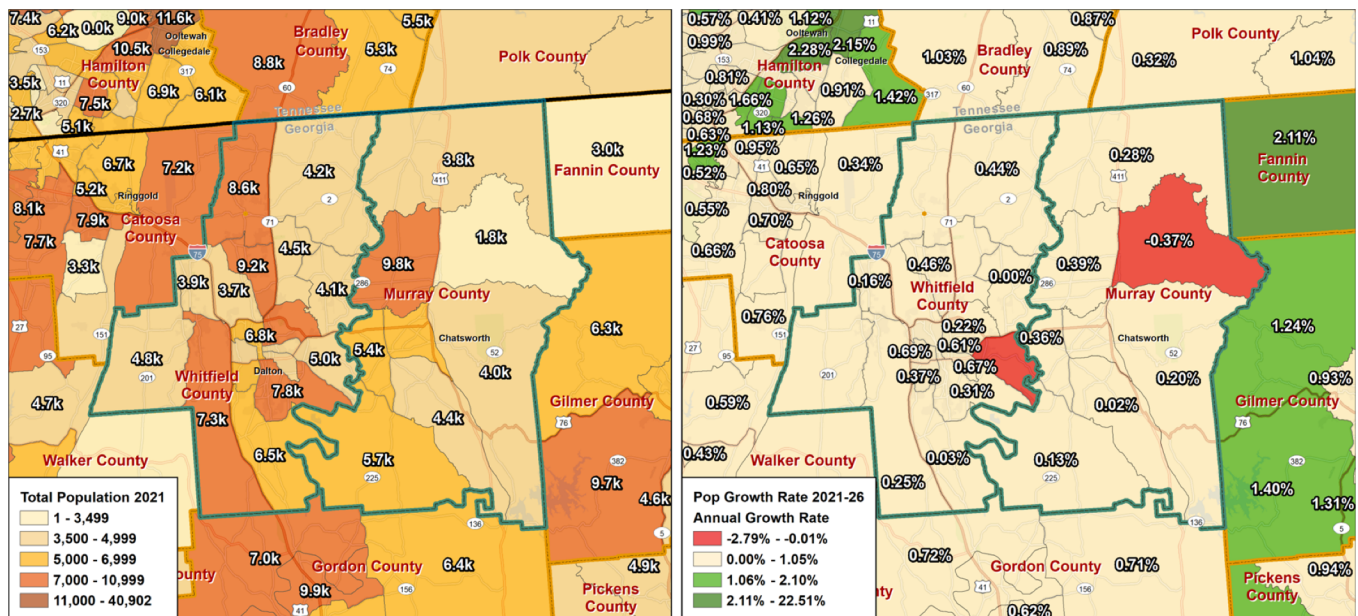
Source: Esri

- The population of Whitfield County is projected to increase from 2021 to 2026 (.31% per year). Georgia is projected to increase 1.05% per year. The U.S. is projected to increase 0.71% per year.
- Whitfield County had a lower median age (35.8 median age) than GA (37.2) and the U.S. (38.8). In Whitfield County the percentage of the population 65 and over was 14.3%, lower than the U.S. population 65 and over at 17.2%.
- Whitfield County's median household income at \$51,535 was lower than GA (\$60,605) and the U.S. (\$64,730). The rate of poverty in Whitfield County was 13.0% which was lower than GA (14.0%) but higher than the U.S. (11.9%).
- The household income distribution of Whitfield County was 19% higher income (over \$100,000), 60% middle income, and 20% lower income (under \$25,000). The largest income group is the 19% making \$50,000 to \$74,999.
- The health care index measures how much the populations spent out-of-pocket on health care services including insurance premiums. The U.S. index was 100. Whitfield County was 84, indicating 16% less spent out of pocket than the average U.S. household on medical care (doctor's office visits, prescriptions, hospital visits) and insurance premiums.
- The racial and ethnic make-up of Whitfield County was 73% White, 4% Black, 38% Hispanic origin, 3% more than one race, 2% Asian/Pacific Islander, 1% American Indian, and 18% other. (These percentages total to over 100% because Hispanic is an ethnicity, not a race.)



## Demographics, cont.

### 2021 Population by Census Tract and Change (2021-2026)



Source: Esri

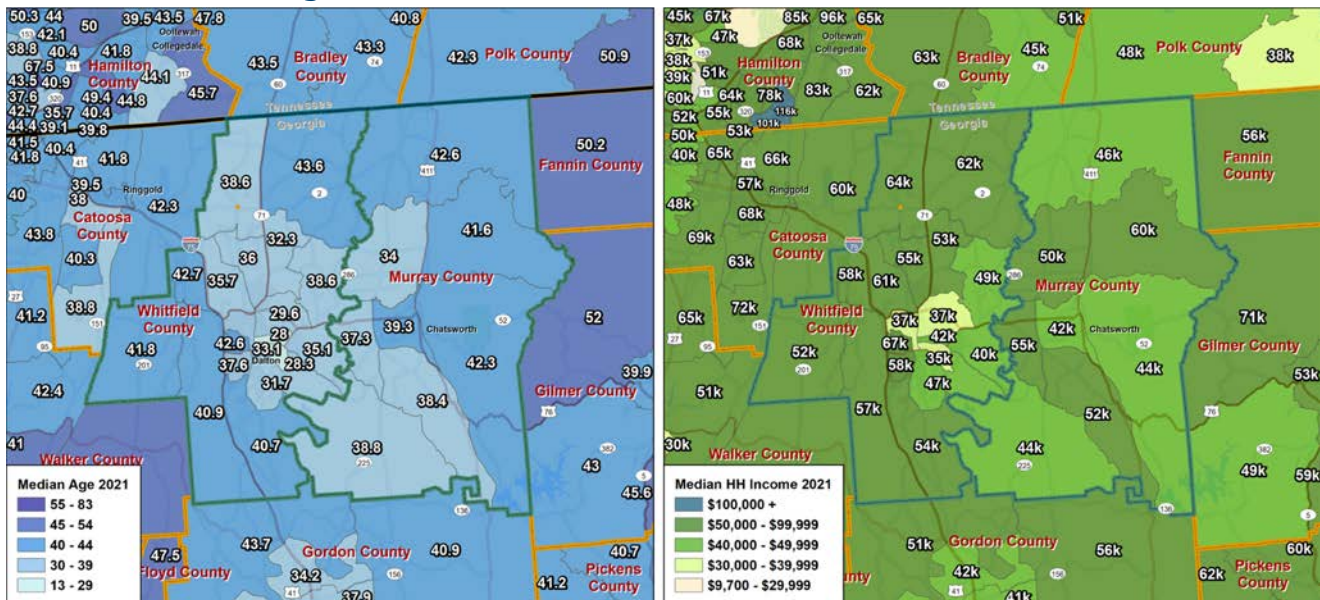
Red is population decline  
 Yellow is positive up to the GA growth rate  
 Green is greater than the GA growth rate  
 Dark green is twice the GA growth rate

Census tracts generally have a population size between 1,200 and 8,000 people, with an optimum size of 4,000 people. The higher populated census tracts are smaller geographically and the less populated census tracts are larger in geography. The highest populated census tracts contain about 7K-10K and five are in Whitfield County and one is in Murray County.

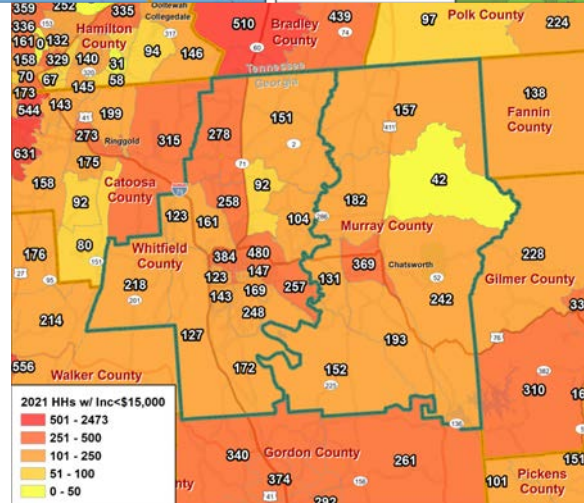
All census tracts in the two counties are projected to increase except two which are projected to decline, one in Whitfield County and one in Murray County.

## Demographics, cont.

### 2021 Median Age & Income



Source: Esri



The top two maps depict median age and median income by census tract. Looking at age and income by census tract is helpful to demonstrate all areas of a county are not the same. The health needs may be very different in the census tract in North Dalton with a lower median age (33.1) and the tract in the northeast corner of Whitfield County at the state border with a median age of 43.6.

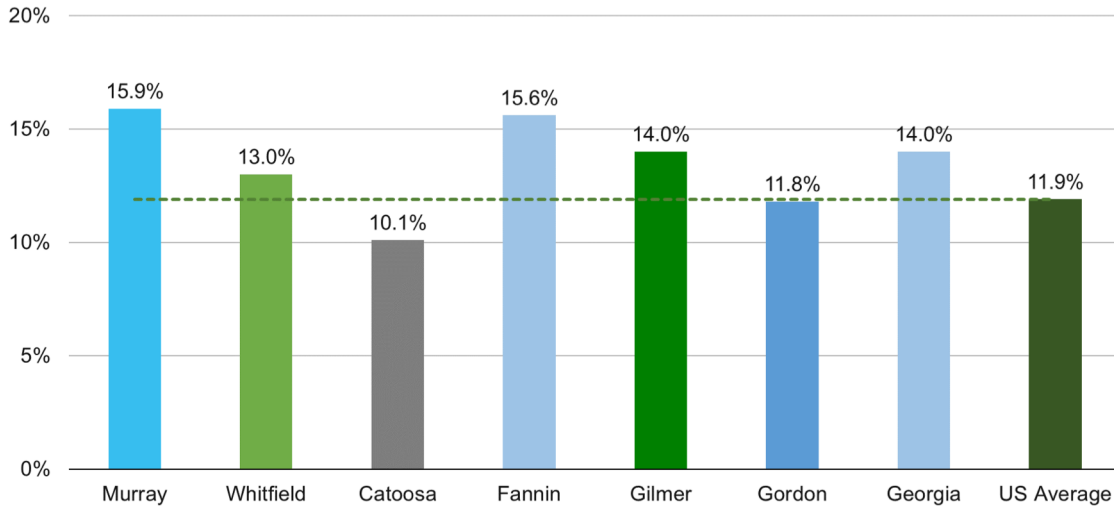
Looking at median household income by census tract also gives insight into health status. The lower income areas may require more resources than the higher income tracts. The three census tracts in Dalton with the lower median household incomes (\$35K and \$37K per year) will have very different health outcomes compared to the census tract in the northwest corner of Whitfield County with \$64,000 median household income.

The lower map is the number of households making less than \$15,000 per year. Again, further attempting to identify those areas within the county that may have a lower health status. A census tract in Dalton had 480 families making less than \$15,000 per year.

## Demographics, cont.

Murray County's 2020 poverty percentage was 15.9% and Whitfield was 13.0% compared to Georgia at 14.0% and the U.S. at 11.9%. The cost of living in Murray and Whitfield Counties was lower than GA and the U.S.

### Percent in Poverty



Source(s): Stratasan (2022); U.S. Census Bureau, Small Area Income and Poverty Estimates (SAIPE) Program (2020 data, released 2021)

## Business Profile

58% percent of employees in Murray County were employed in:

- Manufacturing (21.6%)
- Educational Services (17.7%)
- Retail Trade (14.1%)
- Accommodation & Food Services (8.5%)
- Health Care & Social Assistance (8%)

58% percent of employees in Whitfield County were employed in:

- Manufacturing (31.9%)
- Retail Trade (14.4%)
- Health Care & Social Assistance (8.8%)
- Educational Services (7%)
- Accommodation & Food Services (6.8%)

Source: Esri

Retail, accommodation and food service offer health insurance at a lower rate than healthcare, public administration, and educational services.

Murray and Whitfield Counties' May 2022 preliminary unemployment was 3.4% and 3.5% respectively, compared to 3% for Georgia and 4% for the U.S.

It is beneficial to contact people in groups to improve health. There are three primary places people gather during the week: work, church and school. These are three excellent places to reach people to create a culture of health.



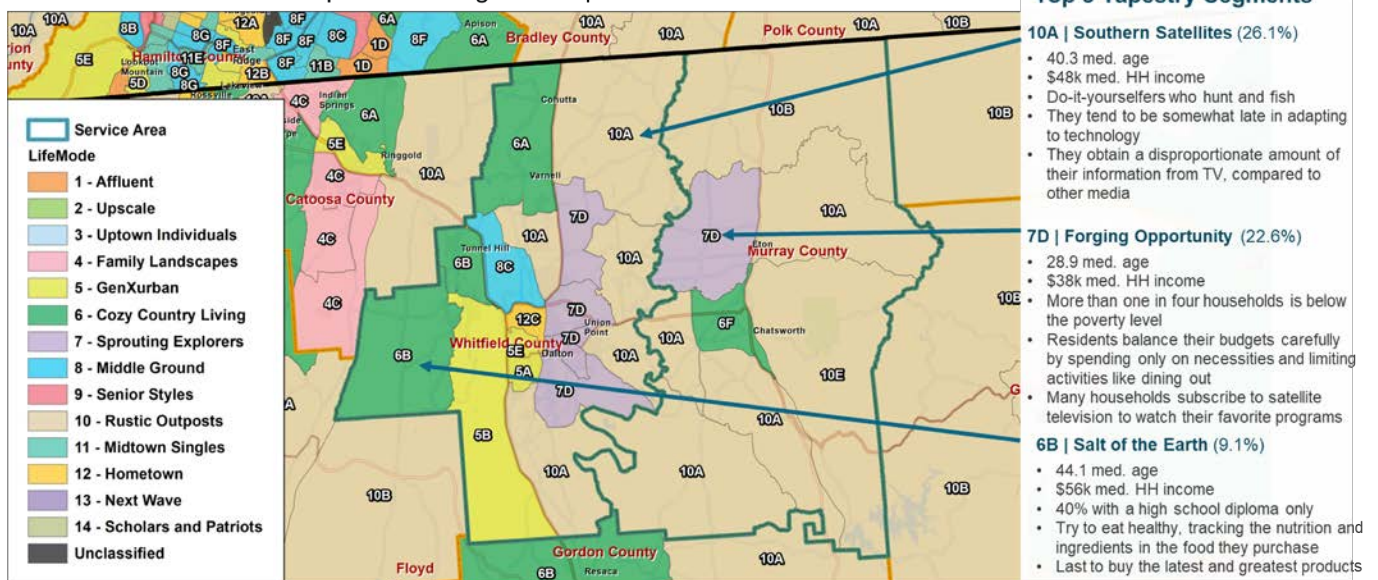
### Tapestry Segmentation

Demographics are population, age, sex, and race. Psychographics are adding behavior data in the form of spending habits and survey data on top of demographics. 58.7% of Murray and Whitfield Counties are included in three Tapestry Segments. The map below is color coded by LifeMode, which are groupings of Tapestry Segments that behave similarly. The dominant Tapestry Segment of each census tract is identified by number.

The dominant Tapestry Segments in the county were Southern Satellites (26.1%), Forging Opportunity (22.6%), and Salt of the Earth (9.1%). The map below demonstrates the dominant Tapestry Segment by census tract.

There is a very brief description of the segments on the right of the map. There is much more information on Tapestry Segments, at <http://doc.arcgis.com/en/Esri-demographics/data/tapestry-segmentation.htm>. Analyzing the Tapestry Segments in the study area helps determine health habits and communication preferences of residents, enabling more effective communication and implementation of solutions to improve health. Many spoke of meeting people where they are in the focus group and interviews. Studying their Tapestry Segment can help do that.

Top three categories represent 57.8% of total households.



Source: Esri



## Focus Group and Survey Results

### Focus Groups

Community stakeholders representing the broad interests of the community as well as those representing low income, medically underserved, and minority populations participated in individual interviews and focus groups on June 20, 2022, for their input into the community's health. Community participation in individual interviews represented a broad range of interests and backgrounds. Below is a summary of the focus groups and interviews. The full summary is included in the appendices.

The participants defined health as overall wellbeing - physical, mental, spiritual, and emotional health. They also believe that health is more than just the absence of disease, and depends on access to resources.

The most significant health issues for the communities were:

- Mental health – lack of resources, lack of follow up and support
- Healthcare – uninsured, lack of trust in the system, lack of providers, dental health, vaccines
- Chronic illness - hypertension, diabetes, COPD, cancer
- Substance misuse
- Socioeconomics – cost of medications, housing, poverty, Maslow's hierarchy of needs
- Lack of education, low health education
- Lack of transportation
- Stigmas
- Community not eating health or exercising regularly

If given a magic wand and no resource restrictions, the participants selected the following solutions to improve health.

- Increased transportation, low-cost or free transportation
- Increased education options, help with paperwork
- Increased housing for seniors, unhoused and low-income communities
- Physical healthcare – free clinics, affordable medications, focus on prevention, prenatal care for everyone, increased providers
- Mental healthcare – more resources and providers, create culturally appropriate care
- Increase childcare, nurse in every elementary
- Resources – Food bank in Murray County, resource center in every neighborhood, aqua therapy for seniors, increase communication about available resources, translate all communication

## Survey Results

The partners conducted online community surveys via SurveyMonkey in Murray and Whitfield Counties. 367 surveys (359 in English and 8 in Spanish) were completed from July 4, 2022, through July 26, 2022. Respondents that answered they live outside of Murray County and Whitfield County were disqualified from continuing the survey. See the full survey in the appendices. Below is a summary of the most significant health needs.

Q28. What are the top three most significant health issues in the counties?

1. Obesity (51.3%)
2. Substance misuse – including alcohol, illegal drugs, prescription drugs (44.1%)
3. Access to mental health services for stress, anxiety, depression, bi-polar disorder, etc. (34.9%)
4. Healthy diet (24.8%)
5. Availability and quality of mental health services (22.3%)
6. Access to affordable healthcare (21%)
7. Physical activity (15.1%)
8. Other responses were less than 15%

Q29. In your opinion, what are the top 3 health concerns for children and youth in your community? (Select three responses)

1. Responsible, involved parents (36.1%)
2. Healthy diet (34.9%)
3. Obesity (30.7%)
4. Physical activity (29.4%)
5. Stress/anxiety (18.1%)
6. Access to mental health services (16.8%)
7. Education – children falling behind in school (15.5%)
8. Other responses were less than 15%

Q30. Have you ever been told by a doctor you have any of these conditions, diseases or challenges?

1. Overweight or obese (35.1%)
2. High blood pressure/hypertension (34.1%)
3. High cholesterol (27.8%)
4. Arthritis (21%)
5. Mental or emotional problem (19%)
6. Other responses were less than 15%

## Health Status Data, Rankings and Comparisons

### Health Status Data

Based on the 2022 County Health Rankings study performed by the Robert Wood Johnson Foundation and the University of Wisconsin<sup>2</sup>, Murray County ranked 73<sup>rd</sup> out of 159 Georgia counties ranked for health outcomes (1= the healthiest; 159 = unhealthiest), and 111<sup>th</sup> for health factors. Whitfield County ranked 35<sup>th</sup> for health outcomes and 81<sup>st</sup> for health factors. Health outcomes are composed of length of life and quality of life. Health factors are comprised of health behaviors, clinical care, social & environmental factors, and physical environment.

County Health Rankings suggested the areas to explore for improvement in Murray County were higher adult smoking, higher percentage of adult obesity, higher percentage of physical inactivity, higher number of teen births, higher percentage of uninsured, higher percentage of preventable hospital stays, lower percentage of high school and post secondary completion, lower number of social associations, and lower number of violent crimes. The areas of strength were lower percentage of alcohol-impaired driving deaths, higher flu vaccinations, and less income inequality.

County Health Rankings suggested the areas to explore for improvement in Whitfield County were higher adult smoking, higher percentage of adult obesity, higher percentage of physical inactivity, higher uninsured, higher percentage of preventable hospital stays, and lower high school completion and college attendance. The areas of strength were lower percentage of excessive drinking and alcohol-impaired driving deaths, and higher income inequality and injury deaths.

When analyzing the health status data, local results were compared to Georgia, the U.S. (where available), and the top 10% of counties in the U.S. (the 90<sup>th</sup> percentile). Where Murray and Whitfield Counties' results were worse than GA and the U.S., groups and individuals have an opportunity to act and improve these community measures. To become the healthiest community in Georgia and eventually the nation, Murray and Whitfield Counties must close several lifestyle gaps. For additional perspective, Georgia was ranked the 38<sup>th</sup> healthiest state out of the 50 states. (Source: 2020 America's Health Rankings; lower is better) Georgia strengths were low racial disparity in premature death rates, low prevalence of excessive drinking, and low percentage of housing with lead risk. The challenges for Georgia were high prevalence of non-medical drug use, high prevalence of insufficient sleep and high percentage of adults who avoided care due to cost.

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## Health Status Data, Rankings and Comparisons

### Comparisons of Health Status

Information from County Health Rankings and America's Health Rankings was analyzed in the CHNA in addition to the previously reviewed sociodemographic information and other public health data. Other data analyzed is referenced in the bullets below, such as: causes of death, demographics, socioeconomics, consumer health spending, and interviews. If a measure was better than Georgia, it was identified as a strength, and where an indicator was worse than Georgia, it was indicated as an opportunity for improvement. To prevent strengths from becoming opportunities for improvement, it's important to continually focus on them. Opportunities were denoted with red octagons, and strengths were denoted with green stars for easy interpretation. The years displayed on the County Health Rankings graphs show the year the data was released. The actual years of the data are contained in the source notes below the graphs.

*<sup>2</sup> The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play. Building on the work of America's Health Rankings, the University of Wisconsin Population Health Institute has used this model to rank the health of Georgia's counties every year since 2003.*



## Comparisons of Health Status

In most of the following graphs, Murray county will be blue, Whitfield County will be red, Georgia (GA) will be orange, the U.S. will be green and the 90<sup>th</sup> percentile of counties in the U.S. will be gold.

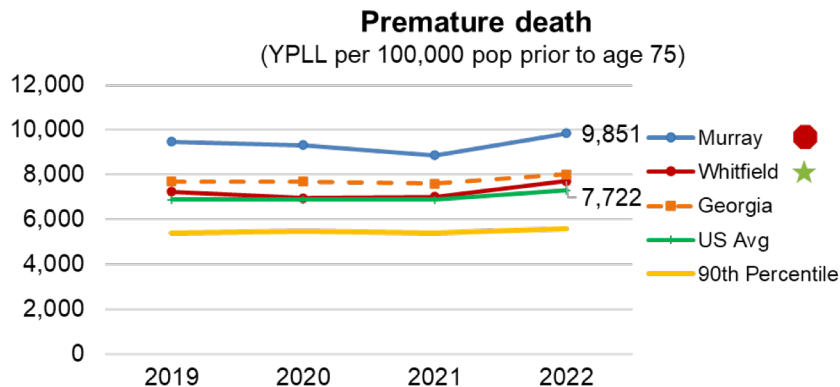
### Health Outcomes (Length of Life and Quality of Life)

Health Outcomes are a combination of length of life and quality of life measures. Murray and Whitfield Counties ranked 73<sup>rd</sup> and 35<sup>th</sup> respectively in health outcomes out of 159 Georgia counties.

#### Length of Life

Length of life was measured by years of potential life lost per 100,000 population prior to age 75; here, lower is better. For example, a 25-year-old killed in an accident equates to 50 years of potential life lost prior to age 75. Murray and Whitfield Counties ranked 70<sup>th</sup> and 20<sup>th</sup> respectively in length of life in GA. Murray and Whitfield Counties lost 9,851 years and 7,722 years of potential life per 100,000 population respectively, which was higher than GA and the U.S.

Murray County residents can expect to live 2 years less than the average U.S. resident, and 2.3 years less than GA residents. Whitfield County residents can expect to live .2 years longer than the average U.S. resident and .1 years less than GA residents.



**Life Expectancy**  
(Average number of years a person can expect to live)

2018-2020		Murray Co.		Whitfield Co.
Murray Co.	75.0	2018-2020		
Whitfield Co.	77.2	American Indian & Alaska Native	NR	NR
Georgia	77.3	Asian	NR	NR
US Avg*	77.0	Black	NR	71.7
90th Percentile	80.6	Hispanic	100+	90.1
		White	73.8	75.2

\*Due to COVID and impacts of COVID, life expectancy in the US decreased 1.87 years in 2020.

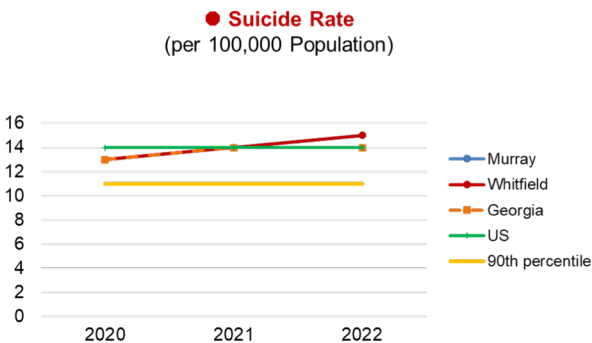
Source: County Health Rankings; National Center for Health Statistics – Mortality File 2018-2020

## Leading Causes of Death: Age-Adjusted Death Rates per 100,000 Population

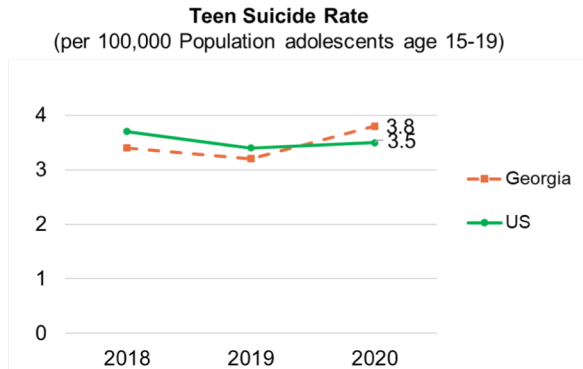
Cause of Death	Murray County	Whitfield County	Georgia	US
Heart Disease	206.0	195.3	183.7	168.2
Cancer	188.0	153.0	147.6	144.1
COVID-19*	89.9	120.2	81.7	85.0
Accidents (Unintentional Injuries)	54.8	43.6	50.8	57.6
Strokes	47.7	43.8	43.0	38.8
Respiratory Diseases	70.9	54.2	41.6	36.4
Alzheimer's	50.2	47.0	45.9	32.4
Diabetes	32.5	18.8	23.9	24.8
Suicide	16.6	16.1	13.7	13.5
Liver Disease	15.7	14.5	12.1	13.3
Influenza and Pneumonia	12.4	15.5	13.8	13.0
Nephritis, nephrosis	18.1	17.2	18.5	12.7
Parkinson Disease	12.1	10.7	10.9	9.9
Septicemia	13.8	9.6	15.6	9.7

\*COVID is only 2020. Age-adjusted rates per 100,000 population. Murray County, and Whitfield County data combined from 2017-2020. US and GA data from 2020. Rates that appear in red for a county denote a higher value compared to state data. Age Adjustment Uses 2000 Standard Population.

Rates in red had death rates higher than GA. The leading causes of death in Murray County were heart disease, cancer, COVID-19, respiratory diseases, followed by accidents, and Alzheimer's. The leading causes of death in Whitfield County were heart disease, cancer, COVID-19, followed by respiratory diseases and Alzheimer's.



Age-adjusted rates per 100,000 population. Murray County, Whitfield County, Georgia, and US data are from individual years. Murray County and Whitfield County both had identical numbers each year so only one line is shown. Age Adjustment Uses 2000 Standard Population.



Crude rates per 100,000 population. Georgia, and US data are from individual years. Age Adjustment Uses 2000 Standard Population.

Murray and Whitfield Counties' suicide rate was above GA and the U.S. The Teen suicide rate in GA increased in 2020.

Source(s): Wonder CDC.gov (2019) Age-adjusted rates per 100,000 population. Age Adjustment Uses 2000 Standard Population.



Photo Credit: HHCS

## **Length of Life STRENGTHS**

- Whitfield County had lower death rates in diabetes, nephritis, accidents, Parkinson, and septicemia than GA.
- Murray County had a lower death rate from the flu and pneumonia, nephritis, and septicemia than GA.
- Whitfield County had a lower number of premature deaths than GA (8,017) at 7,722.
- Whitfield and Murray Counties' Hispanic population had a longer life expectancy than GA by 22.7 years and 12.8 years, respectively.

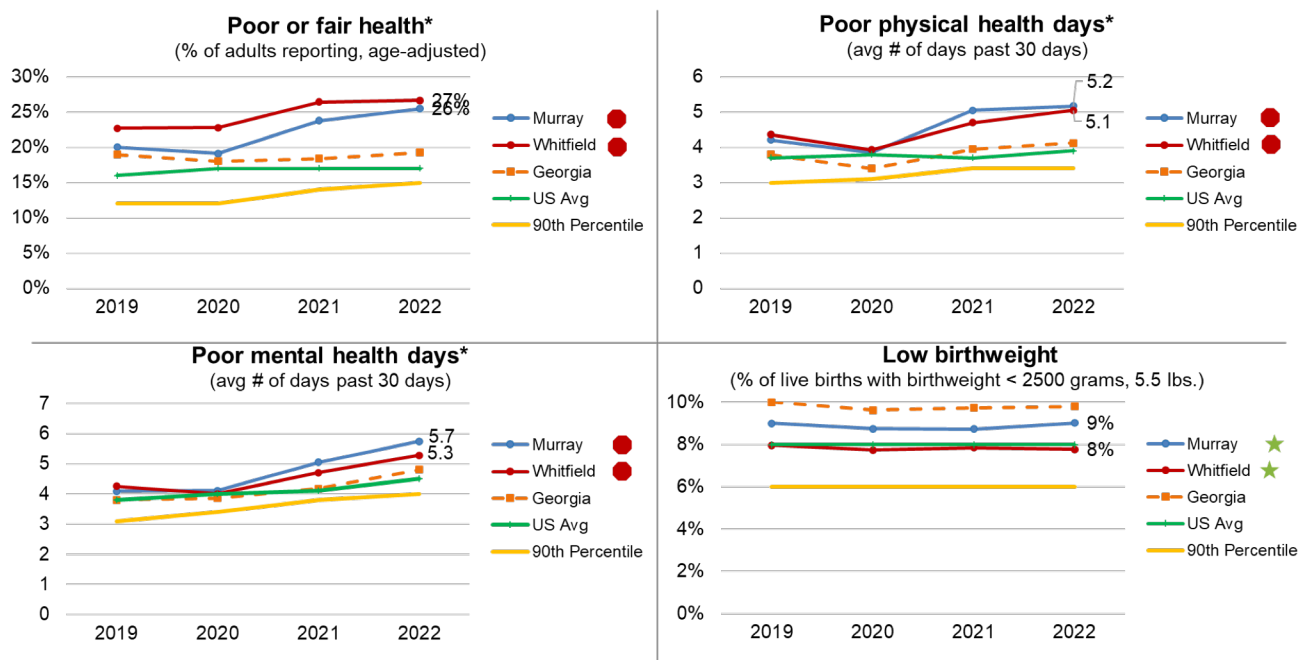
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## **Length of Life OPPORTUNITIES**

- Murray and Whitfield counties had shorter life expectancy at 75 years and 77.2 years respectively than GA (77.3).
- Murray County had higher death rates for all but three leading causes of death than both GA and the U.S.
- Murray County had a higher number of premature deaths than GA (8,017) at 9,851.
- Whitfield County had a slightly higher number of suicides at 15 than GA (14), and is trending upward.
- Whitfield and Murray Counties' White population had a shorter life expectancy than GA by 3.5 years and 2.1 years, respectively.
- Whitfield County's Black population had a shorter life expectancy than GA by 5.6 years.

## Quality of Life

Quality of life was measured by: % reporting fair or poor health, the average number of poor physical health days and poor mental health days in the past 30 days, and % of live births with birthweight less than 2500 grams, or 5.5 lbs. Murray and Whitfield Counties ranked 76<sup>th</sup> and 47<sup>th</sup> respectively in quality of life out of 159 Georgia counties.



Source: County Health Rankings; Behavioral Risk Factor Surveillance System (BRFSS) 2019  
Source: County Health Rankings; National Center for Health Statistics – Natality files (2014-2020)

## Quality of Life STRENGTHS

- Murray and Whitfield Counties had a lower percentage of low birthweight babies at 9% and 8%, respectively, than GA at 10%.

## Quality of Life OPPORTUNITIES

- Murray and Whitfield Counties had a higher percentage of poor or fair health days than both GA (19%) at 26% and 27%, respectively.
- Murray and Whitfield Counties had a higher average number of poor physical health days in the last 30 days at 5.2 days and 5.1 days than GA at 4.1.
- Murray and Whitfield Counties had a higher average number of poor mental health days at 5.7 and 5.3 respectively than both GA at 4.8.



## Health Factors or Determinants

Health factors or determinants rankings are comprised of measures related to health behaviors (30%), clinical care (20%), social & economic factors (40%), and physical environment (10%). Murray and Whitfield Counties ranked 111<sup>th</sup> and 81<sup>st</sup> respectively in health factors out of 159 Georgia counties.

## Health Behaviors

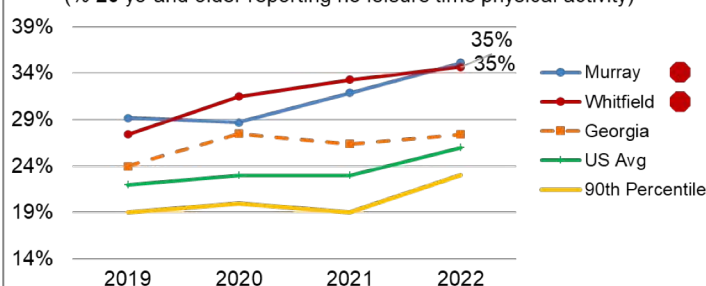
Health behaviors are made up of nine measures and account for 30% of the county rankings. Murray and Whitfield Counties ranked 65<sup>th</sup> and 34<sup>th</sup> respectively in health behaviors out of 159 counties in Georgia.

**Adult obesity**  
(% of adults that report a BMI of 30 or more)

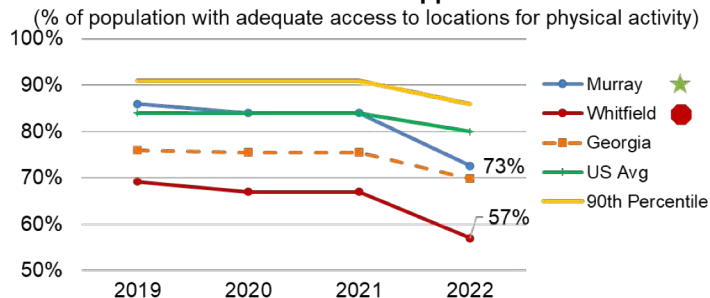
2022	
Murray County	37%
Whitfield County	34%
Georgia	33%
US Avg	32%
90th Percentile	30%

Beginning with 2022 CHR, the CDC has updated their modeling procedure for producing small-area estimates. 2022 released data should not be compared to prior years.

**Physical inactivity**  
(% 20 yo and older reporting no leisure time physical activity)



**Access to exercise opportunities**



**Adult smoking**

(% that report every day or "most days")

2022	
Murray County	23%
Whitfield County	21%
Georgia	17%
US Avg	16%
90th Percentile	15%

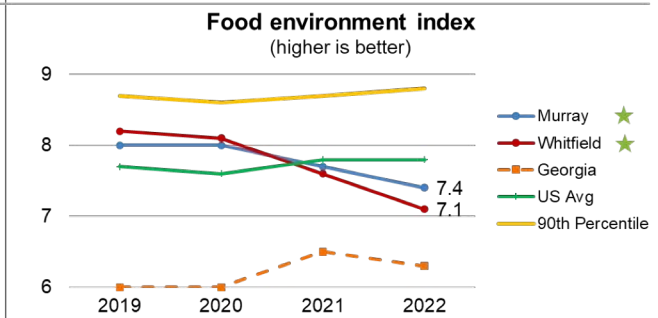
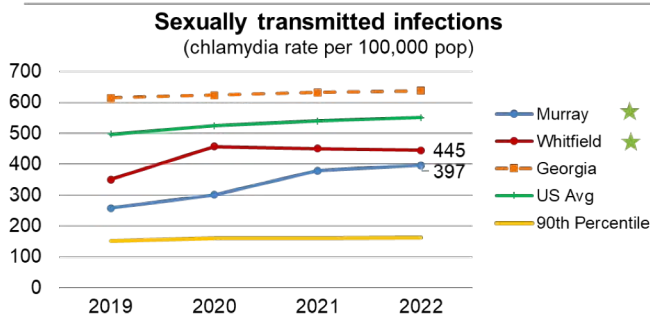
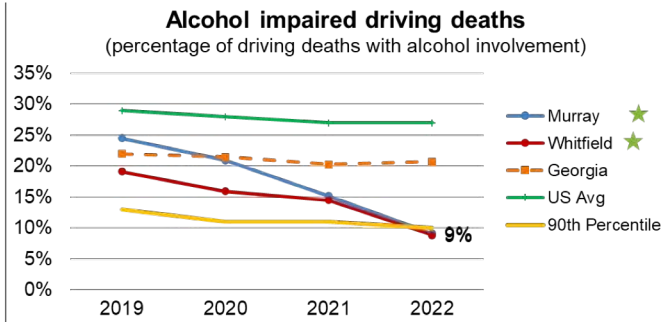
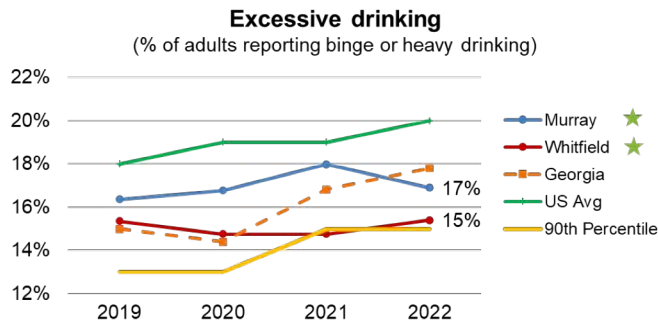
In 1965, 45% of the US smoked

Beginning with 2022 CHR, the CDC has updated their modeling procedure for producing small-area estimates. 2022 released data should not be compared to prior years.

Source: Obesity & Physical Inactivity – CHR, Behavioral Risk Factor Surveillance System, 2019  
 Source: Access to exercise opportunities – CHR, Business Analyst, Delorme map data, Esri, & US Census Tigerline Files, 2010 and 2021. Measures the percentage of individuals in a County who live reasonably close to a location for physical activity, defined as parks or recreational facilities (local, state national parks, gyms, community centers, YMCAs, dance studios and pools based on SIC codes)

Source: Smoking - CHR; Behavioral Risk Factor Surveillance System (BRFSS), 2019

## Health Behaviors, Cont.



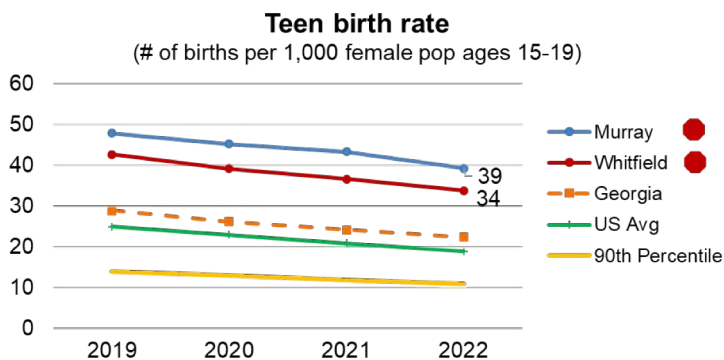
Source: Excessive drinking - CHR; Behavioral Risk Factor Surveillance System (BRFSS), 2019

Source: Alcohol-impaired driving deaths - CHR; Fatality Analysis Reporting System, 2016-2020

Source: STIs - CHR; National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2019

Source: Food environment: CHR; USDA Food Environment Atlas, Map the Meal Gap from Feeding America, 2019

The food environment index is comprised of % of the population with limited access to healthy foods and % of the population with food insecurity. Limited access to foods estimates the % of the population who are low income and do not live close to a grocery store. Food insecurity is the % of the population who did not have access to a reliable source of food during the past year.



**Teen birth rate**  
(# of births per 1,000 female pop ages 15-19)

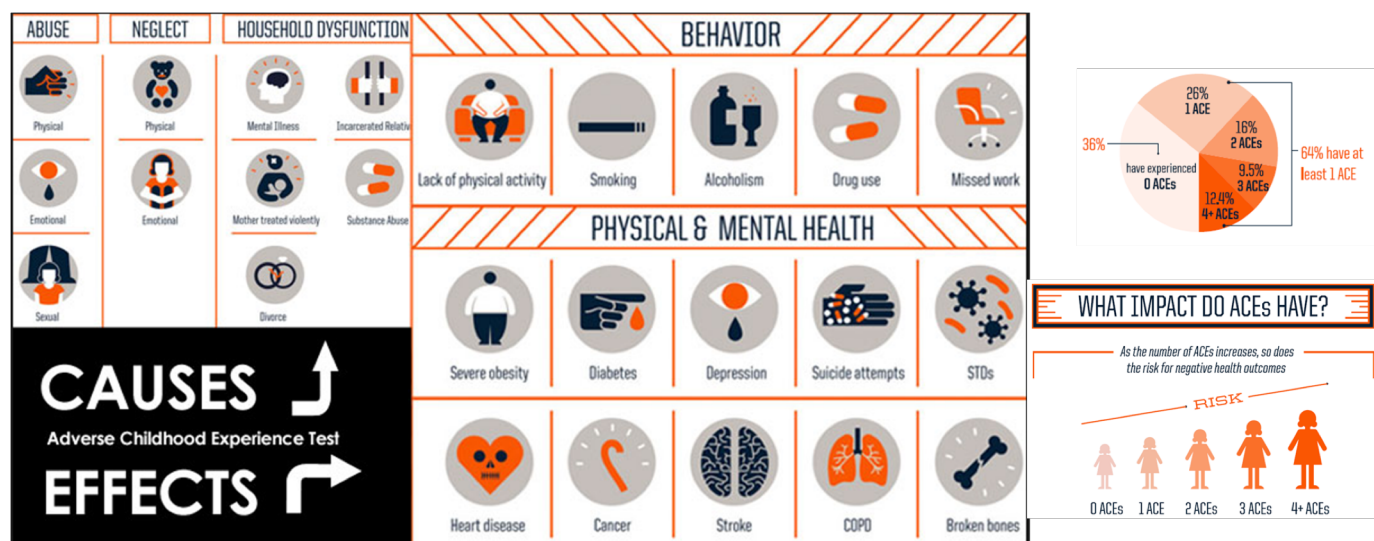
Ethnicity/Race	Murray	Whitfield
American Indian & Alaska Native	NR	NR
Asian	NR	NR
Black	NR	32
Hispanic	26	31
White	44	38

Source: Teen birth rate - CHR; National Center for Health Statistics - Natality files, 2014-2020

## Health Behaviors, Cont.

### Adverse Childhood Experiences (ACEs)

Abuse, neglect and household dysfunction have the effect of poor health behaviors as well as poor physical and mental health. The more ACEs a child has the higher risk they are for poor health outcomes. According to the CDC, "Adverse Childhood Experiences have a tremendous impact on future violence victimization and perpetration, and lifelong health and opportunity." ACEs are strongly associated with social inequities. While present in all populations, females, LGBTQ+, people of color, and those experiencing income disparities are at a greater risk of experiencing multiple ACEs.



	0 ACEs	1 ACEs	2+ ACEs
<b>United States</b>	54%	25%	22%
<b>Georgia</b>	52%	23%	25%

Among children from birth through age 17, percentage reported to have had zero, one, and two or more ACEs, nationally and by state. Data Source: National Survey of Children's Health 2016, Health Resources and Services Administration, Maternal and Child Health Bureau. <https://mchb.hrsa.gov/data/national-surveys>. Citation: Child and Adolescent Health Measurement Initiative. 2016 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health supported by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB). Retrieved [09/15/21] from [www.childhealthdata.org].

ACEs data is not available for Murray and Whitfield Counties. However, compared to the U.S., Georgia had a lower percentage of youth with no ACEs, and 1 ACE, but a higher percentage of youth with 2+ ACEs.





Photo Credit HHCS

## Health Behaviors **STRENGTHS**

- Sexually transmitted infections measured by chlamydia rate per 100,000 population were lower in Murray (397) and Whitfield (445) Counties than GA (638).
- The percentage of alcohol impaired driving deaths was lower in Murray and Whitfield Counties at 9% than both GA (21%).
- Murray and Whitfield Counties had lower percentages of adults reporting binge or heavy drinking at 17% and 15% respectively than GA at 18%.
- 73% of Murray County had access to exercise opportunities compared to 70% in GA.
- The food environment index in Murray (7.4) and Whitfield (7.1) Counties were higher than GA at 6.3.

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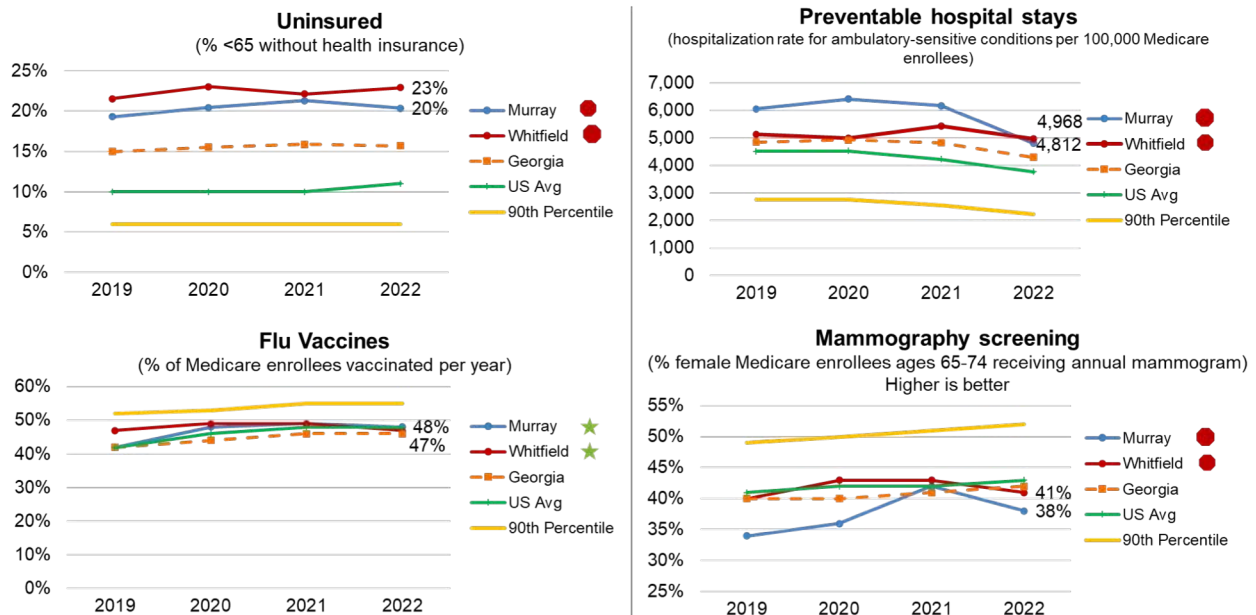
## Health Behaviors **OPPORTUNITIES**

- Adult obesity in Murray and Whitfield Counties was 37% and 34% respectively, higher than GA at 33%. Obesity puts people at increased risk of chronic diseases including diabetes, kidney disease, joint problems, hypertension, and heart disease. Obesity can cause complications in surgery and with anesthesia. It has been implicated in Alzheimer's and often leads to metabolic syndrome and type 2 diabetes.
- Physical inactivity was higher in Murray and Whitfield Counties at 35% than in GA at 27%.
- Only 57% of Whitfield had access to exercise opportunities compared to 70% in GA.
- Murray and Whitfield Counties had a higher percentage of adult smokers at 23% and 21% respectively than both GA at 17%.
- Murray and Whitfield had higher number of teen births per 1,000 female population ages 15-19 both at 39 and 34, respectively, than GA at 23.
- In both Murray and Whitfield Counties, the White population had the highest number of teen births than any other group.



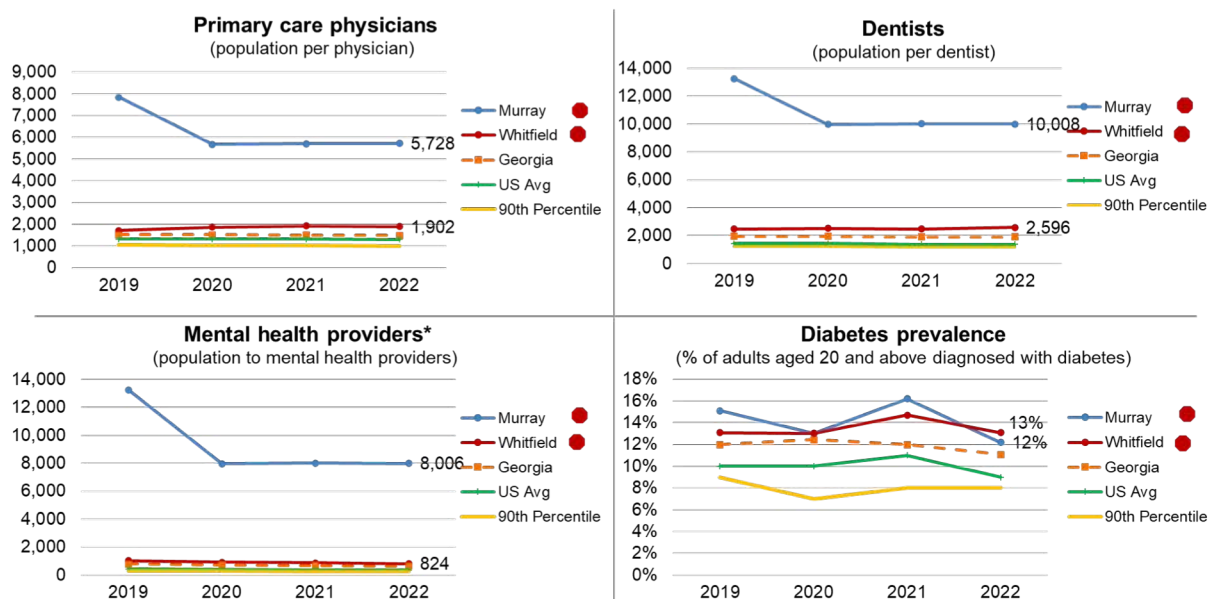
## Clinical Care

Clinical care ranking is made up of seven indicators, and account for 20% of the county rankings. Murray and Whitfield Counties ranked 132<sup>nd</sup> and 128<sup>th</sup> respectively in clinical care out of 159 Georgia counties.



Source: Uninsured - CHR; Small Area Health Insurance Estimates, 2019

Source: Preventable hospital stays, mammography screening, flu vaccinations - CHR, CMS Mapping Medicare Disparities Tool, 2019



Source: Pop to PCP - CHR; Area Health Resource File/American Medical Association, 2019

Source: Pop to Dentists - CHR; Area Health Resource File/National Provider Identification file, 2020

Source: Pop to mental health provider (psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists and advanced practice nurses specializing in mental health) CHR; CMS, National Provider Identification, 2021

Source: Diabetes prevalence - Behavioral Risk Factor Surveillance System, 2019

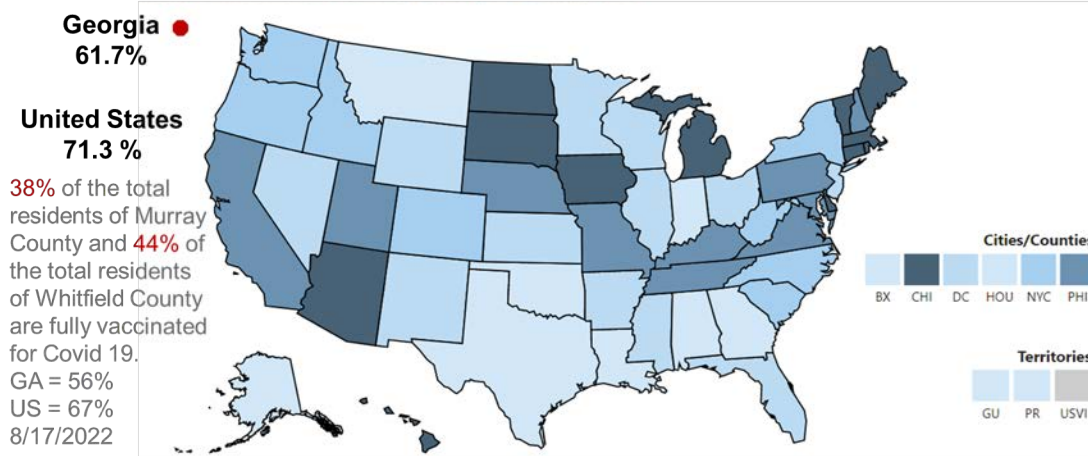


## Clinical Care, cont.

GA had a lower vaccination percentage among children 19-35 months old than the U.S. Murray and Whitfield both had lower COVID-19 vaccination rates than GA and the U.S.

## Vaccination Coverage Among Children and COVID-19 Vaccination Rates

Combined 7 Series Vaccination Coverage by Age 24 Months among Children Born in 2018, National Immunization Survey-Child (NIS-Child), 2018



Combined 7 vaccine series (4:3:1:3\*:3:1): 4 or more doses of DTaP, 3 or more doses of Polio, 1 or more doses of MMR, Hib full series (3 or 4 doses, depending on product type received), 3 or more doses of HepB, 1 or more doses of Varicella, and 4 or more doses of PCV (In 2013 data, referred to as 4:3:1:4:3:1:4-FS)

Source: CDC, National Center for Immunization and Respiratory Diseases (2017 data posted 2020)

## Clinical Care **STRENGTHS**

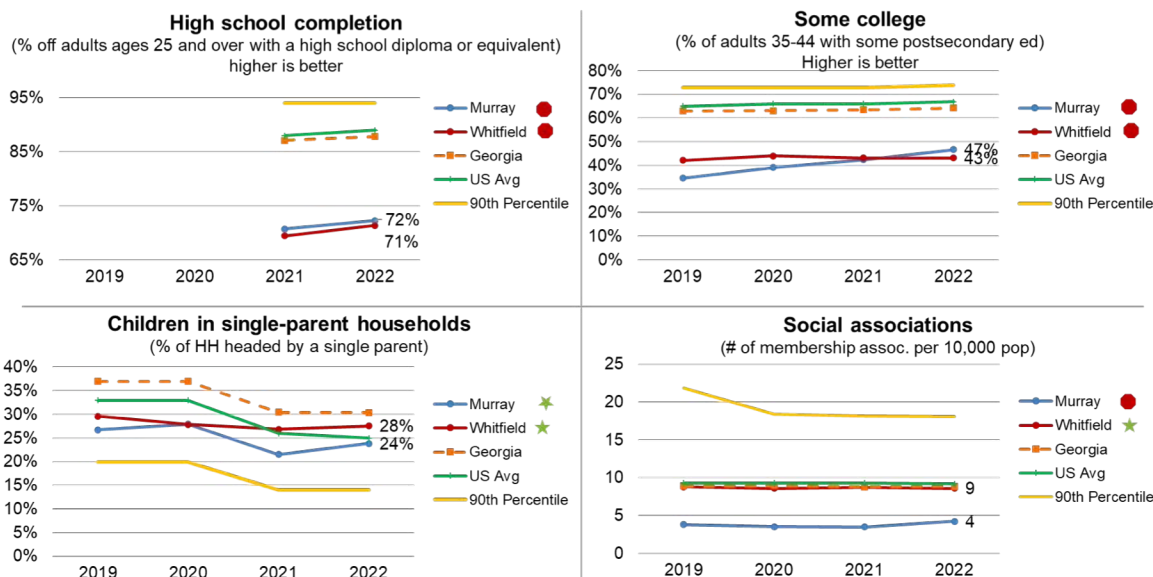
- The population per primary care physician was 1,217 in Murray County, the same as GA (1,629) and lower than the U.S. (1,310).
  - The percent of population under sixty-five without health insurance in Murray County was 6% lower than GA at 7%.
  - The percent of Medicare enrollees with flu vaccines per year was higher in Murray (48%) and Whitfield Counties (47%) than GA (46%).
  - Whitfield County had a lower number of cancer incidence rates at 420.7 than GA at 468.5.
- .....

## Clinical Care **OPPORTUNITIES**

- COVID-19 vaccinations were lower in Murray and Whitfield Counties at 38% and 44% respectively than GA at 61.7%.
- The population per dentists in Murray (10,008) and Whitfield (2,596) Counties was higher than GA at 1,921.
- Preventable hospital stays in Whitfield County were 3,064 per 100,000 Medicare enrollees which was lower than GA (3,966) and the U.S. (3,767). Hospitalization ambulatory-care sensitive conditions, which are diagnoses treatable in outpatient settings, suggests that the quality of care provided in the outpatient setting was less than ideal. This measure may also represent a tendency to overuse hospitals as a main source of care. Preventable Hospital Stays could be classified as both a quality and access measure, as some literature describes hospitalization rates for ambulatory care-sensitive conditions primarily as a proxy for access to primary health care. Source: CHR; Brumley R, Enguidanos S, Jamison P, et al. Increased satisfaction with care and lower costs: Results of a randomized trial of in-home palliative care. J Am Geriatric Soc. 2007;55:993-1000.
- The population per primary care physician was 5,728 and 1,902 in Murray and Whitfield Counties, higher than GA at 1,492.
- The number of mental health providers in Murray and Whitfield Counties was 8,006 and 824 respectively, higher than GA at 637.
- Diabetes prevalence in Murray and Whitfield Counties was 12% and 13% respectively, higher than GA at 11%.
- Murray and Whitfield Counties had a higher percentage of uninsured at 20% and 23% respectively, higher than GA at 16%.
- Murray (38%) and Whitfield (41%) Counties' mammography screening was lower than GA at 42%.
- Murray County had a higher prevalence of cancer incidence rates at 472.1 than 468.5.

## Social & Economic Factors

Social and economic factors account for 40% of the county rankings. There are eight measures in the social and economic factors category. Murray and Whitfield Counties ranked 126<sup>th</sup> and 105<sup>th</sup> respectively in social and economic factors out of 159 Georgia counties.

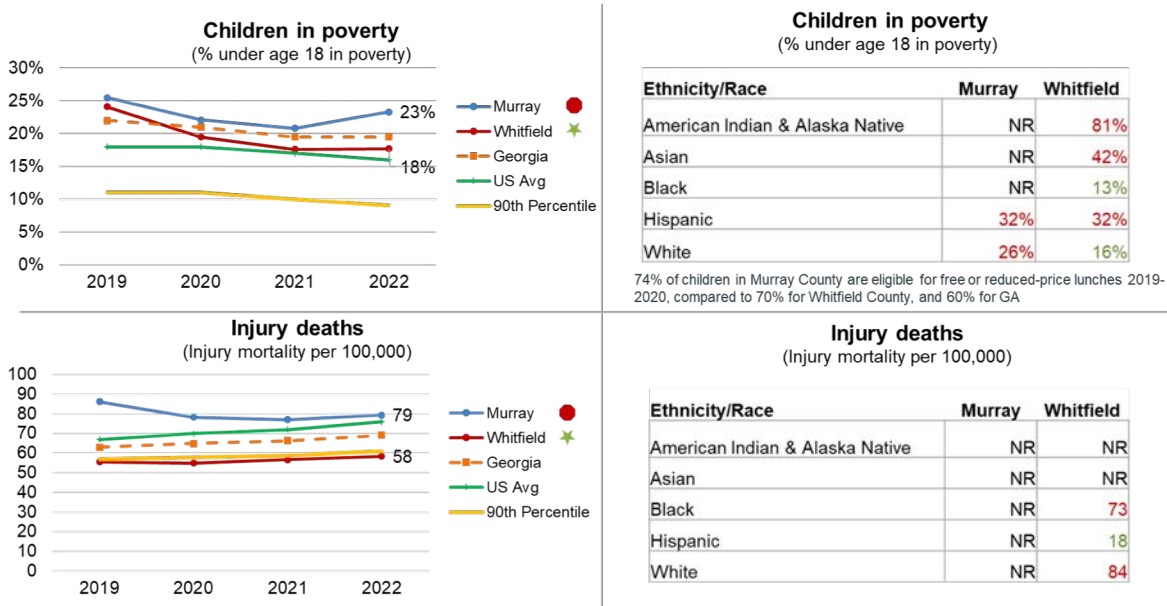


Source: High school completion– CHR, American Community Survey, 5-yr estimates, 2016-2020

Source: Some college CHR; American Community Survey, 5-year estimates, 2016-2020.

Source: Children in poverty - CHR; U.S. Census, Small area Income and Poverty Estimates, 2020

Source: Social associations - CHR; County Business Patterns, 2019



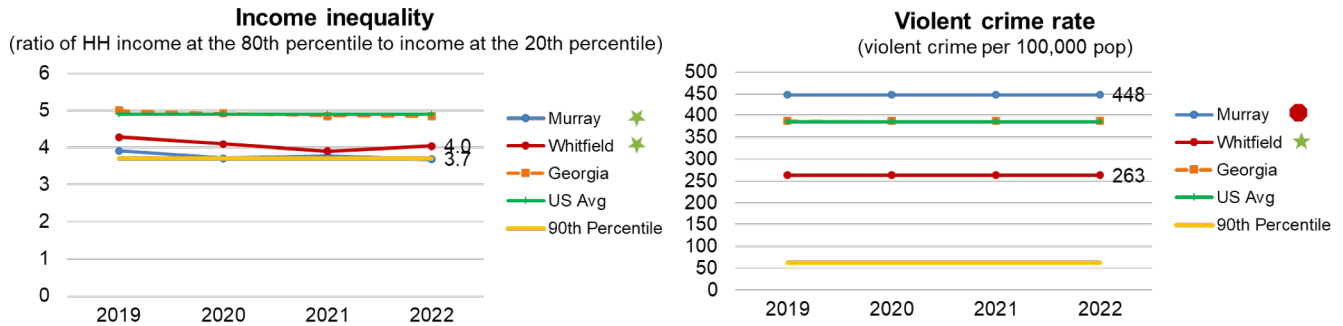
Source: Income inequality and children in single-parent households - CHR; American Community Survey, 5-year estimates 2016-2020

Source: Injury deaths – CHR; National Center for Health Statistics – Mortality Files, 2016-2020

Source: Violent crime - CHR; Uniform Crime Reporting – FBI, 2014 & 2016



## Social & Economic Factors Cont.



## Social & Economic Factors STRENGTHS

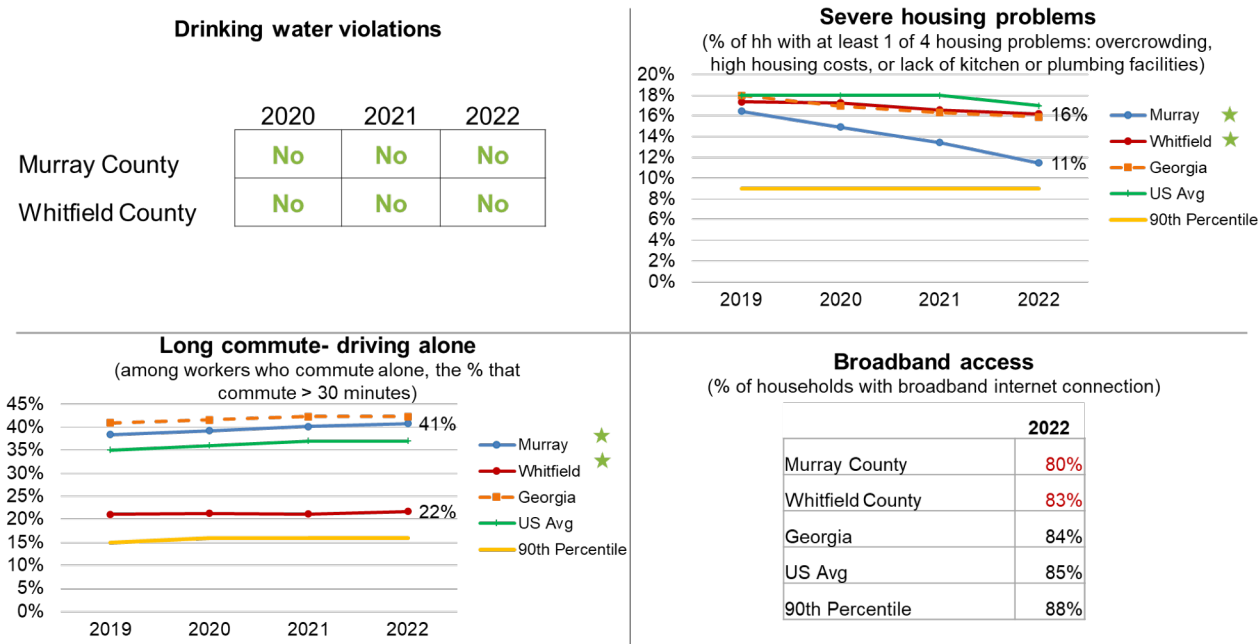
- The percentage of children in single-parent households was 24% in Murray County 28% in Whitfield County, lower than GA at 30%.
- Social associations were lower in Murray County at 4 memberships per 10,000 population than GA at 9 memberships. Associations include membership organizations such as civic organizations, bowling centers, golf clubs, fitness centers, sports organizations, religious organizations, political organizations, labor organizations, business organizations, and professional organizations.
- Income inequality represents the ratio of household income at the 80<sup>th</sup> percentile compared to income at the 20<sup>th</sup> percentile. Income inequality was lower in Murray and Whitfield Counties at 3.7 and 4.0 respectively than GA at 4.9.
- The number of violent crimes per 100,000 population was lower in Whitfield County at 263 than GA at 386.
- The percentage of children in poverty was lower in Whitfield (18%) County than GA at 20%.
- Injury deaths were lower in Whitfield County at 58 per 100,000 population than GA (69).

## Social & Economic Factors OPPORTUNITIES

- High school completion in Murray (72%) and Whitfield (71%) Counties was lower than GA at 88%.
- The percentage of adults 35-44 with some postsecondary education was lower in Murray at 47% and Whitfield 43% than in GA at 64%.
- Injury deaths were higher in Murray County at 79 per 100,000 population than GA (69).
- The percentage of children in poverty was higher in Murray (23%) County than GA at 20%.
- The median household income in Murray and Whitfield Counties was \$49,777 and \$51,535 respectively, lower than GA at \$60,605 and the U.S. at \$64,730.
- The number of violent crimes per 100,000 population was higher in Murray County at 448 than GA at 386.

## Physical Environment

Physical environment contains four measures in the category and accounts for 10% of the county rankings. Murray and Whitfield Counties ranked 81<sup>st</sup> and 111<sup>th</sup> respectively in physical environment out of 159 Georgia counties.



Source: Drinking water violations – County Health Rankings; EPA, Safe Drinking Water Information System, 2020 Source: Severe housing problems – County Health Rankings; HUD Comprehensive Housing Affordability Strategy data, 2014-2018. Source: Driving alone to work and long commute – County Health Rankings; American Community Survey, 5-year estimates, 2016-2020. Source: Air pollution – County Health Rankings; CDC National Environmental Health Tracking Network, 2018  
Source: Broadband access – CHR; American Community Survey, 5-yr estimates, 2016-2020

## Physical Environment STRENGTHS

- Murray County had a lower percentage of severe housing problems at 11% than GA at 16%.
- 41% of workers in Murray County and 22% of workers in Whitfield County who commute alone commute over 30 minutes, lower than GA at 42%.
- Murray and Whitfield Counties reported no drinking water violations since 2020.

## Physical Environment OPPORTUNITIES

- Broadband access was lower in Murray and Whitfield Counties at 80% and 83% respectively than GA (84%).



Photo Credit: HHCS

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### **There were Four Broad Themes that Emerged in this Process:**

- Murray and Whitfield Counties need to continue to create a “Culture of Health” which permeates throughout the towns, employers, churches, and community organizations to engender commitment to health improvement.
- There is a direct relationship between health outcomes and affluence (income and education). Those with the lowest income and education generally have the poorest health outcomes.
- While any given measure may show an overall good picture of community health, subgroups such as the lower income census tracts may experience lower health status measures.
- It takes partnerships with a wide range of organizations and citizens pooling resources to meaningfully impact the health of the community. Murray and Whitfield Counties has many assets to improve health.

## Results of the CHNA: Community Health Summit Prioritized Health Needs

### Prioritization of Health Needs

#### Prioritization Criteria

At the Community Health Summit, the attendees reviewed the community health information and used the criteria below to prioritize the health needs in the community.

<b>Magnitude / scale of the problem</b>	How big is the problem? How many people does the problem affect, either actually or potentially? In terms of human impact, how does it compare to other health issues?
<b>Seriousness of Consequences</b>	What degree of disability or premature death occurs because of this problem? What would happen if the issue were not made a priority? What is the level of burden on the community (economic, social or other)?
<b>Feasibility</b>	Is the problem preventable? How much change can be made? What is the community's capacity to address it? Are there available resources to address it sustainably? What's already being done, and is it working? What are the community's intrinsic barriers and how big are they to overcome?

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#### Most Significant Community Health Needs

The following needs were prioritized by attendees at the Community Health Summit. Using a nominal group technique, each attendee received three sticky notes and selected their top three health needs and posted their ideas on paper at the back of the room.

1. Mental Health (21)
2. Access to care (21)
3. Healthy Eating/Active Living (16)
4. Socioeconomics/Social determinants of care (9)
5. Substance use disorder (7)
6. Chronic disease management (6)
7. Education (3)



# Community Health Summit Brainstorming

## Community Health Goals and Actions Brainstorming

The summit participants discussed what might be done to improve the most significant health issues. Below are notes from the brainstorming.

### Significant Health Need 1: Mental health



#### **Goal 1 – Education of resources and coordination**

**Action 1** – Create Mental health council

*Resources/Collaborators Needed: Providers, food banks, schools, community organization, emergency services, employers*



#### **Goal 2 – Gather and centralize resources**

**Action 1** – Provide platform to access resources (print and online)

**Action 2** – Create community events

*Resources/Collaborators Needed: Providers*

---

### Significant Health Need 2: Access to care



#### **Goal 1 – Centralized Access to resources**

**Action 1** – Get Whitfield Transit to run a looping route

**Action 2** – Coordinate communication of health resources – DEO, financial assistance

*Resources/Collaborators Needed: Dalton city government, Whitfield County, school bus routes, schools, churches, social media, Sharing is Caring, radio*

---

### Significant Health Need 3: Healthy Eating/Active Living



#### **Goal 1 – Increase funding for food banks, healthy lunches, and take-home food for families**

**Action 1** – If fruit is left in lunchrooms after kids leave, collect and send home with kids/families in need

**Action 2** – Create social media campaign to raise funds for food banks

*Resources/Collaborators Needed: Schools, nutrition workers, IT resources, Healthcare collaboration, food banks*



#### **Goal 2 – Increase educational resources to help with obesity and diabetes**

**Action 1** – Create healthy eating classes at middle school level

**Action 2** – “Farm to Fork” – implement school gardens and use produce in cafeteria, hand out recipes at local Farmers market

**Action 3** – “Success stories” of healthy eating and losing weight and provide “Healthy Eating QR Codes” on social media

*Resources/Collaboration Needed: Schools, dieticians, diabetes management resources and clinics, social media, local farmers market*

---

## Community Health Goals and Actions Brainstorming

### Significant Health Need 4: Socioeconomics / SDOH

- ✓ **Goal 1 – Form a central facilitating agency to keep all agencies coordinated**  
**Action 1** – Hold meeting with all agencies to pitch the idea  
**Action 2** – Determine if it's feasible
- ✓ *Resources/Collaborators Needed: United Way, community foundation, Dalton State, social workers, LAA, CLILA*  
**Goal 2 – Resource centers in the neighborhoods as satellites**  
**Action 1** – Have all agencies work together to improve socioeconomic status  
**Action 2** – Create job fairs and health fairs  
*Resources/Collaborators Needed: Local employers, local providers, community*

---

### Significant Health Need 5: Chronic Disease Management

- ✓ **Goal 1 – Take advantage of employer sponsored healthcare facilities**  
**Action 1** – Evaluate current facts that employers are using the clinics, and if it matches chronic disease prevalence  
**Action 2** – Revamp the promotion of these services, possibly adding a Navigator at the workplace to assist the Medical and employees  
*Resources/Collaborators Needed: Facilitators. Health center staff, human resources, navigators, community organizations*
- ✓ **Goal 2 – Have affordable and culturally appropriate nutrition education programs**  
**Action 1** – Work with all current nutrition education programs and partner to create the best version that can be easily accessed and affordable  
**Action 2** – Find funding for individuals who cannot afford the 1:1 classes  
*Resources/Collaborators Needed: Community medical collaboration, doctors, clinics, churches, employers*

---

### Significant Health Need 6: Education

- ✓ **Goal 1 – Early childhood education (affordable/quality daycare and preschool)**  
**Action 1** – Increase affordable, quality rate daycare availability  
**Action 2** – Increase pre-K spots  
*Resources/Collaborators Needed: School system, daycares, churches, community partners, federal and state financial support*
- ✓ **Goal 2 – Extended learning opportunities**  
**Action 1** – Utilize outside school opportunities to offer character building, tutoring, leadership skills  
**Action 2** – Create summer enrichment youth leadership program  
*Resources/Collaborators Needed: Boy scouts, Girl scouts, school aftercare, Mac Gaston, DIA, DEM, JA, DSC, GNTC, 4H, private collaborators*

# Impact of 2019 CHNA and Implementation Plan

## Impact

COVID-19 impacted implementation in 2020. Groups were unable to meet in person and services were limited in the community. However, progress was made prior to COVID and as COVID restrictions were relaxed near the end of the CHNA period.

### **Lifestyle & Chronic Disease Management**

- Diabetes – added second endocrinologist and moved location to a much larger facility to improve access. Expanded access to Gordon and Catoosa counties.
- Cardiovascular Disease and Hypertension – recruited four cardiologists/surgeon and expanded services to include Open Heart Surgery, Structural Heart and Electrophysiology.
- Cancer – Opened PCI in January 2020 and recruited medical oncology physician leader. Started clinical trials in partnership with Emory University. Performed numerous cancer screening services to include lung, mammography, and colon.
- Transitioned education to virtual opportunities. Increased number of videos, podcasts, radio shows in all clinical areas to provide information to our community.

### **Mental Health**

- Partnering with community partners and reopened outpatient behavioral health services in May 2022.

### **Access to Care**

- Hamilton began Internal Medicine (2020) and Family Medicine (2021) Residency programs. Residency clinics located in Dalton and Chatsworth.
- Expanded Telehealth access throughout Hamilton physician practices
- Anna Shaw Children's Institute served over 1200 children (>30,000 visits) since opening in 2019
- Recruitment of physicians and subspecialties to the community
- Partnership with DEO Clinic and Health Department Healthy Babies Program
- Sports Medicine programs in 9 area high schools and Dalton State College

### **Substance Use**

- Community partnerships with local organizations including Highland Rivers
- Smoking Cessation programs offered twice a year at Hamilton

### **Lifestyle & Social Determinants of Health**

- Partnerships with Live4It, Physician Health Services to develop a community health initiative.
- Provide housing for low income and disabled seniors at Whitfield Place and Whitfield Commons.
- Partnering with a developer to provide additional housing in multi-family apartment homes.
- Developed property adjacent to health system campus with housing for residents and medical students.

# Appendices

1. Community Survey
2. Focus Group Summary
3. Community Asset Inventory



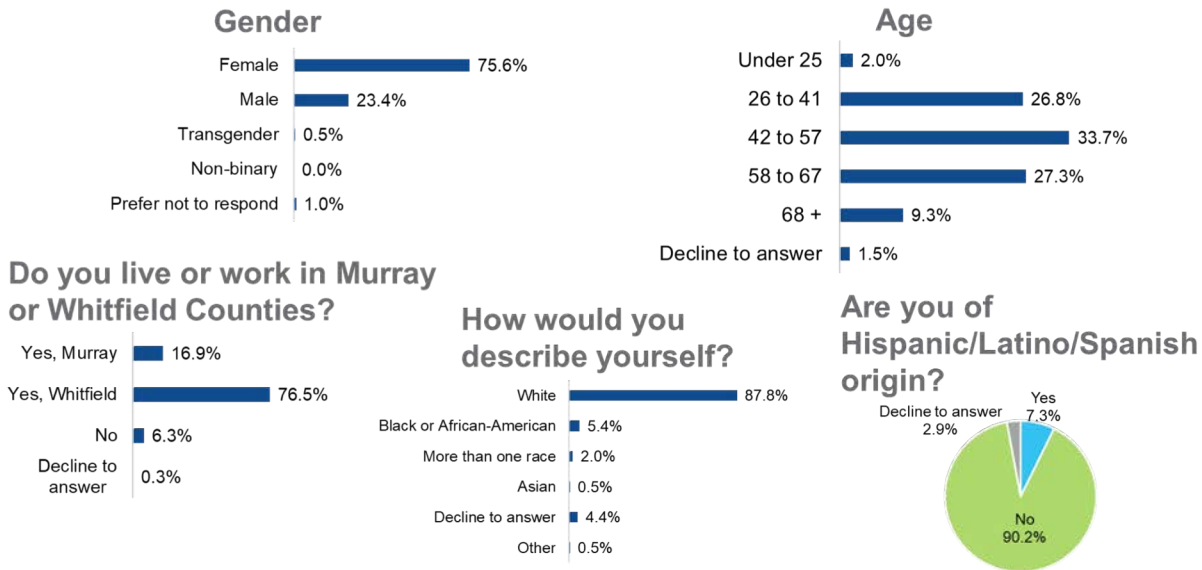


## Survey Results

### Community Survey

Stratason and Hamilton Health Care System conducted online community surveys via SurveyMonkey in Murray and Whitfield Counties. 367 surveys were completed from July 4, 2022, through July 26, 2022, 359 in English and 8 in Spanish

### Demographics



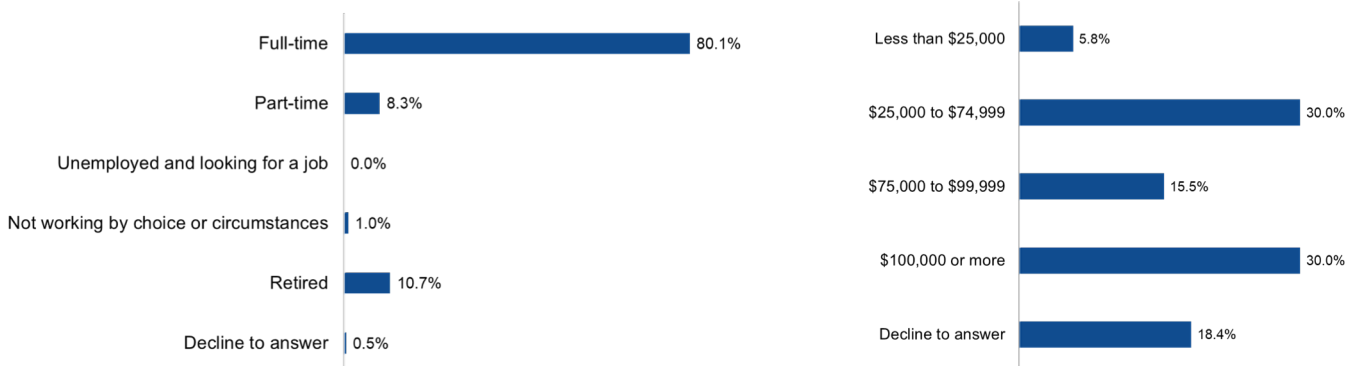
N=366 Q1. Do you live or work in Murray or Whitfield Counties?

N=205 Q42. What is your gender?  
N=205 Q43. Which of the following ranges includes your age?

N=205 Q49. How would you best describe yourself?  
N=205 Q50. Are you of Hispanic/Latino/Spanish origin?

### What is your current employment status?

### Which of the following includes your annual HH income?



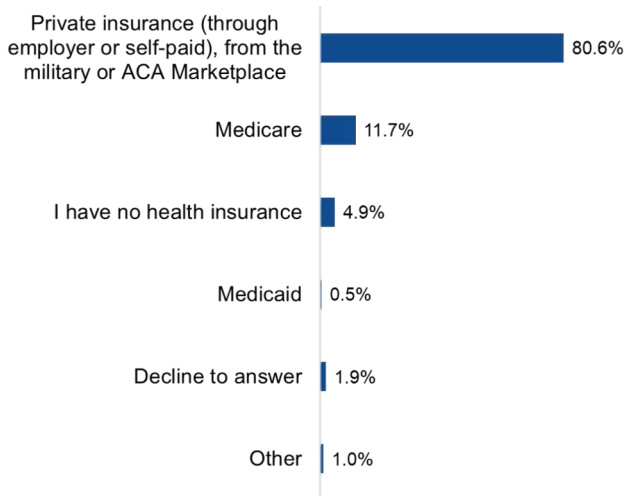
N=206 Q47. What is your current employment status?

N=207 Q48. Which of the following includes your annual household income?

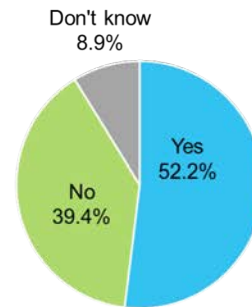
## Survey Results

### Community Survey, cont.

Which of the following best describes your health insurance situation?



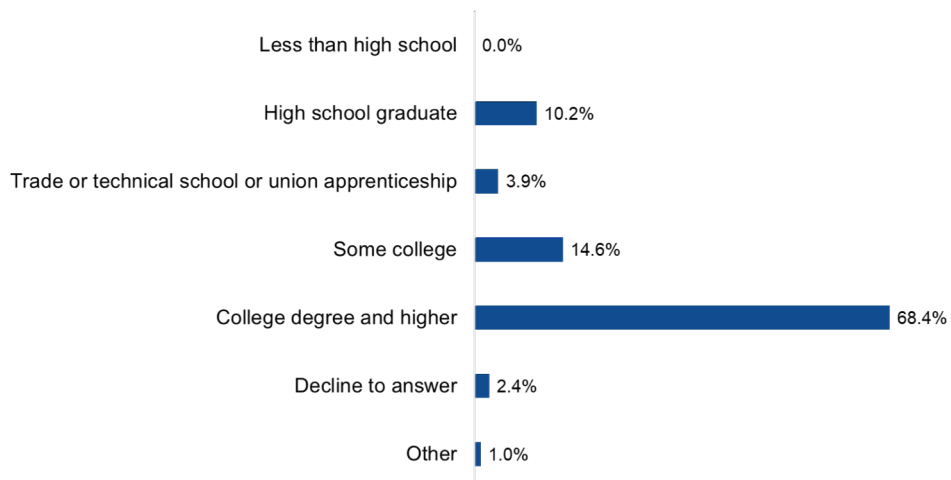
Do you have a high deductible health plan?



N=206 Q44. Which of the following best describes your health insurance situation?

N=203 Q45. Do you have a high deductible health plan? Defined as a deductible over \$1,350 for individual and \$2,700 for a family.

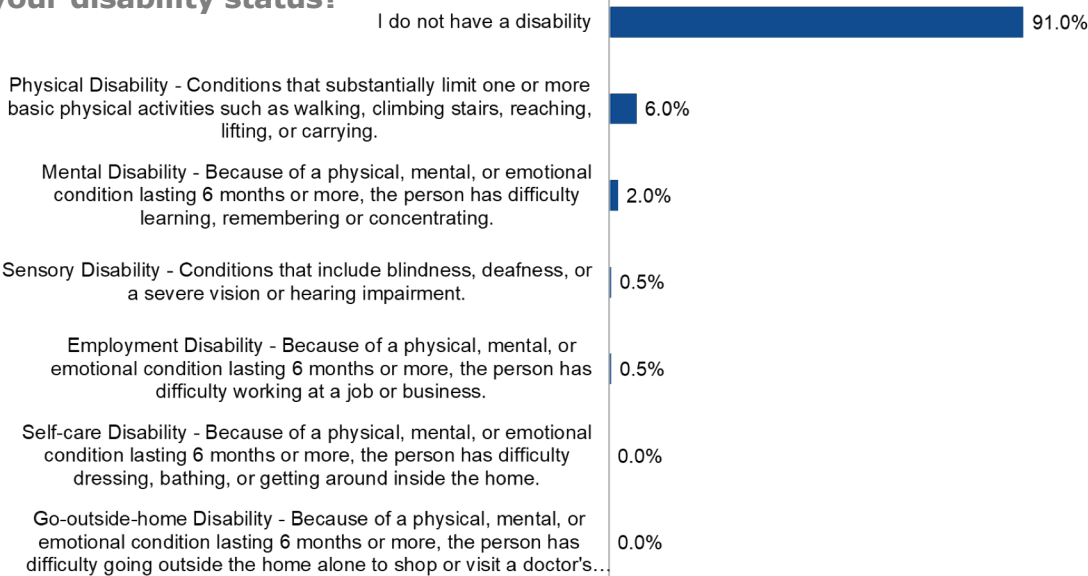
What is the highest level of formal education that you have completed?



# Survey Results

## Community Survey, cont.

### What is your disability status?



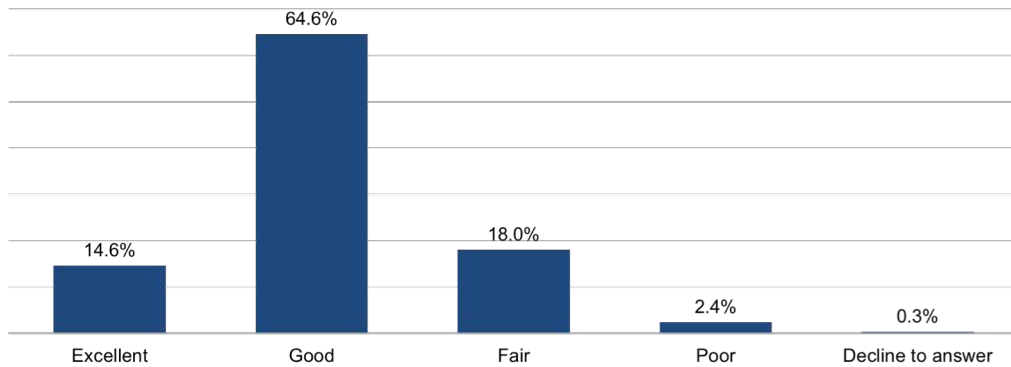
N=199 Q51. What is your disability status?

## Survey Results

### Community Survey, cont.

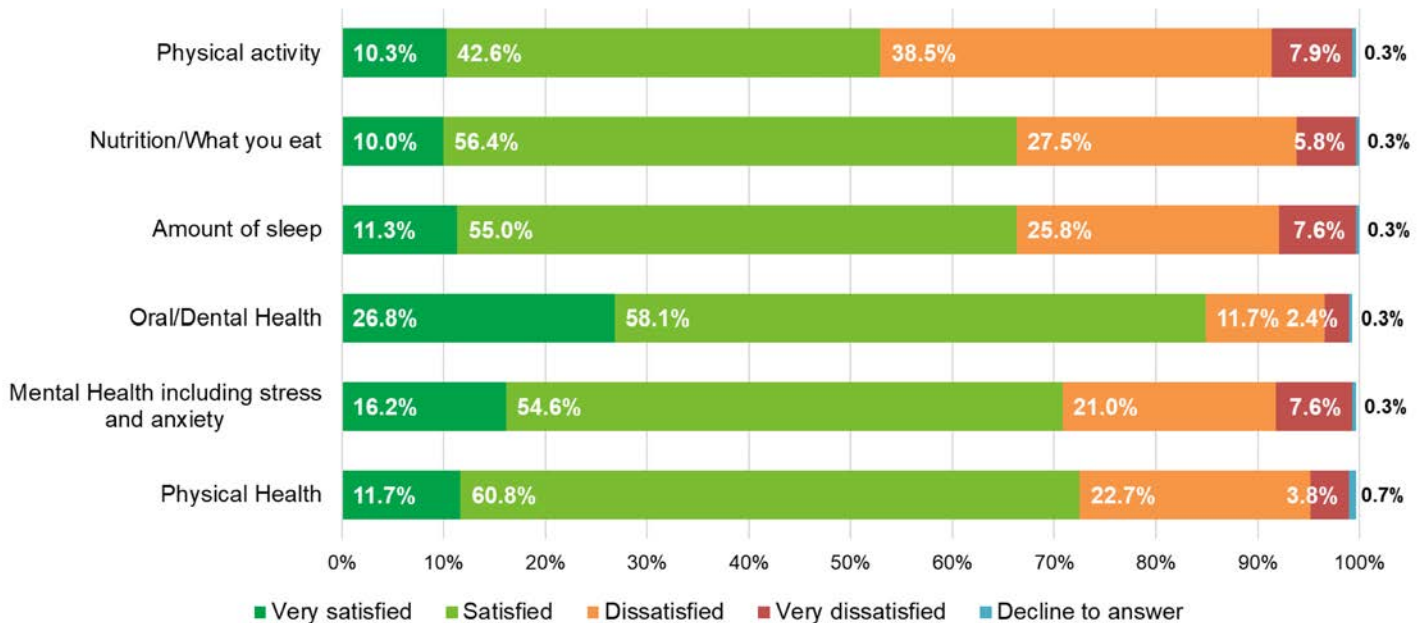
#### Health Status

Generally, how would you describe your health? Would you say it is...



N=294 Q2. Generally, how would you describe your health? Would you say it is...

Generally, how satisfied are you with your...



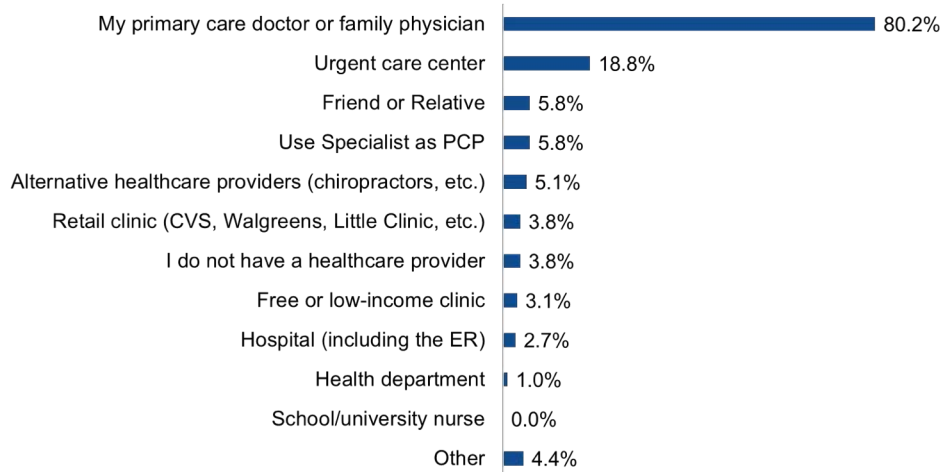
N=291 Q3. Generally, how satisfied are you with your...



## Survey Results

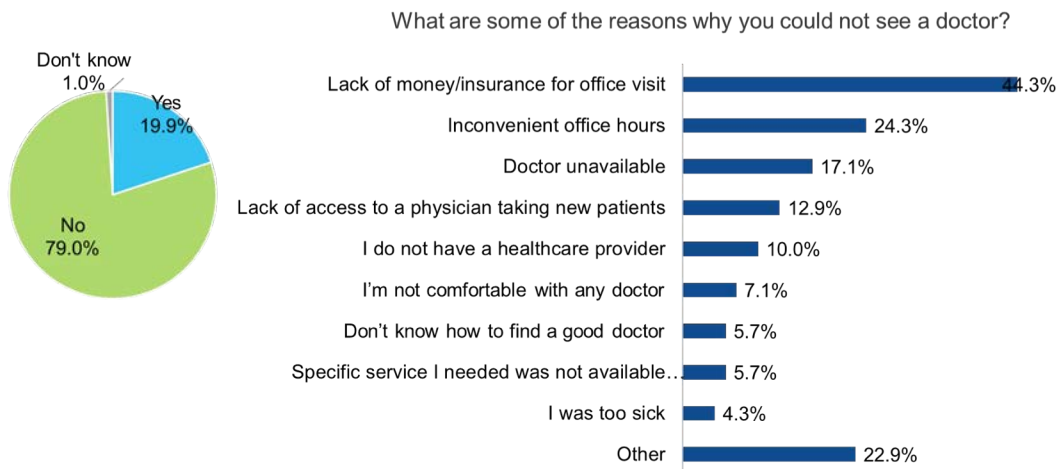
### Community Survey, cont.

**If you have one person or group you turn to for basic healthcare needs, where do you go most often?**



N=293 Q4. If you have one person or group you turn to for basic healthcare needs, where do you go most often? (May select multiple answers)

**Was there a time in the past 12 months when you needed to see a doctor but could not?**



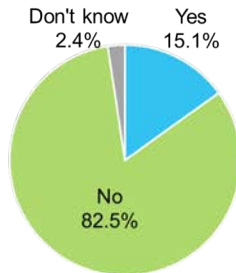
N=291 Q5. Was there a time in the past 12 months when you needed to see a doctor but could not?

N=70 Q6. If yes, what are some of the reasons why you could not see a doctor? (Select all that apply)

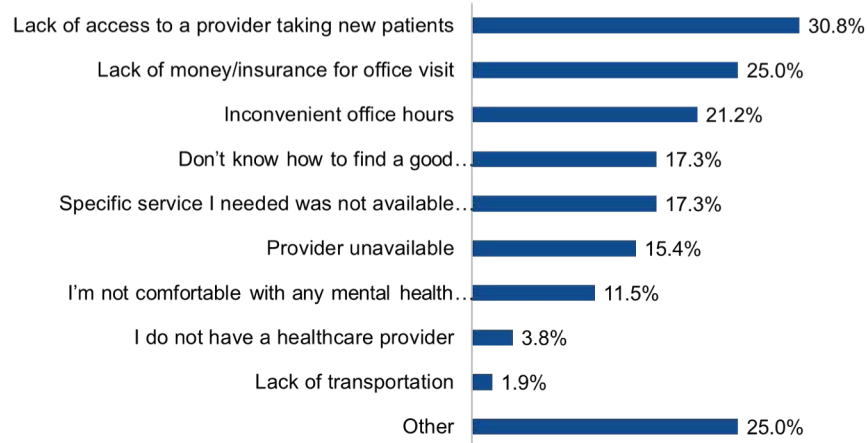
## Survey Results

### Community Survey, cont.

**Was there a time in the past 12 months when you needed to see a mental health professional but could not?**



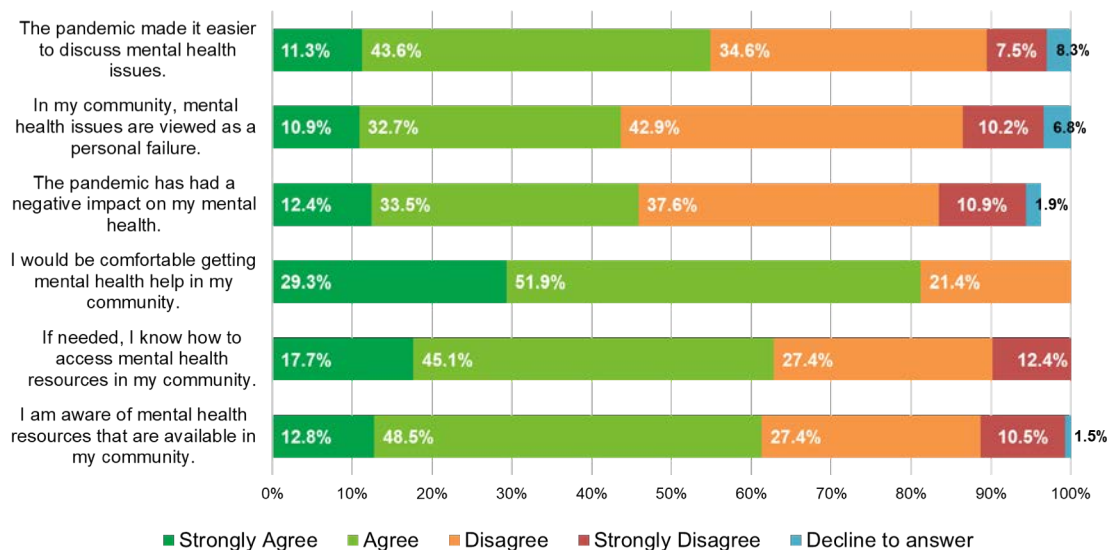
**What are some of the reasons why you could not see a mental health professional?**



N=292 Q7. Was there a time in the past 12 months when you needed to see a mental health professional but could not?

N=52 Q8. If yes, what are some of the reasons why you could not see a mental health professional? (Select all that apply)

**Please tell us to what level you agree or disagree with the following statements.**

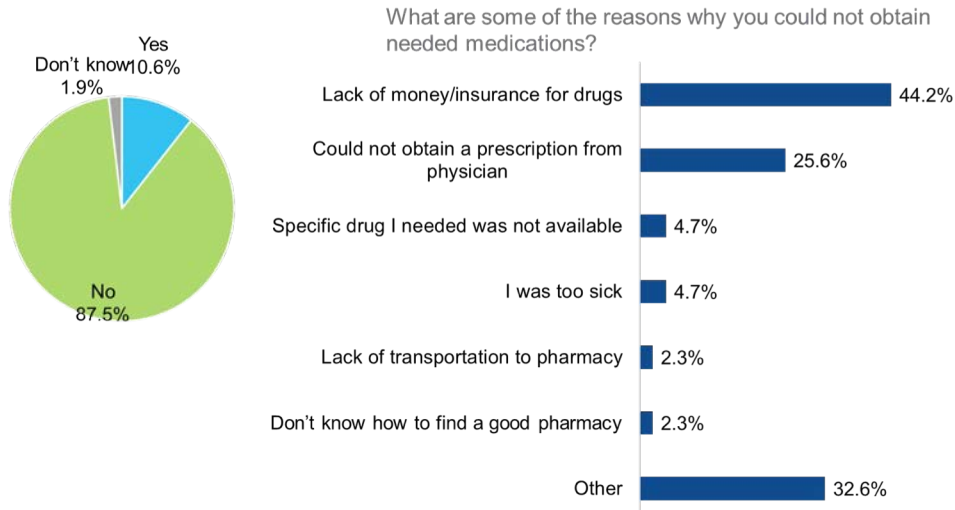


N=266 Q9. Please tell us to what level you agree or disagree with the following statements.

## Survey Results

### Community Survey, cont.

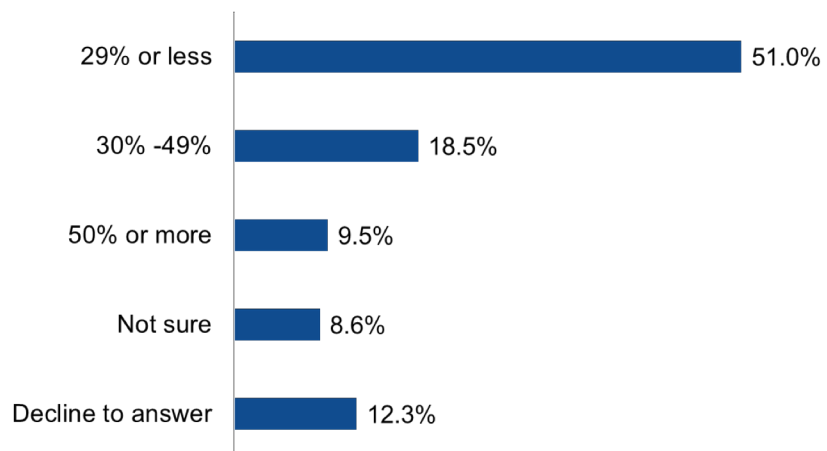
**Was there a time in the past 12 months when you needed to medications but could not obtain them ?**



N=264 Q14. Was there a time in the past 12 months when you needed medications but could not obtain them?

N=43 Q15. What are some of the reasons why you could not obtain needed medications? (Select all that apply)

**Approximately what percentage of your total household monthly income would you say you spend on your rent or mortgage payment?**

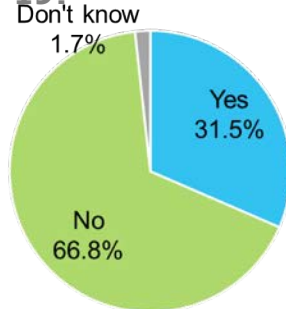


N=243 Q23. Approximately what percentage of your total household monthly income would you say you spend on your rent or mortgage payment?

## Survey Results

### Community Survey, cont.

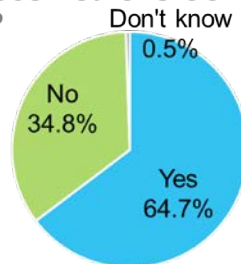
Have you ever been diagnosed with COVID-19?



Have you received the COVID-19 vaccine (first and second dose)?



Have you received the COVID-19 booster(s)?

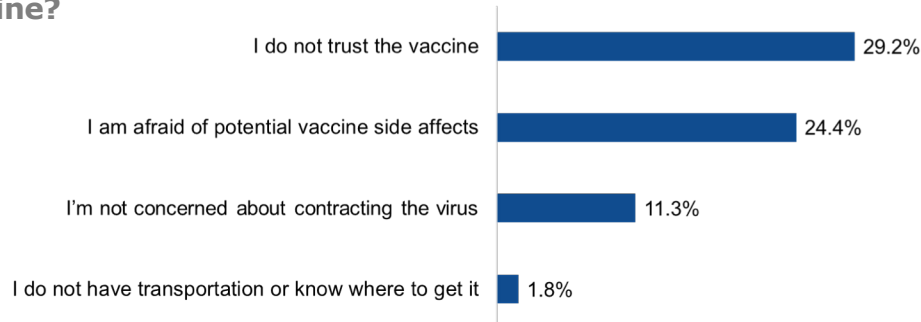


N=749 Q11. Have you ever been diagnosed with COVID-19?

N=746 Q12. Have you received the COVID-19 vaccine (first and second dose)?

N=745 Q13. Have you received the COVID-19 booster(s)?

What statement best describes your reason for not getting the COVID-19 vaccine?



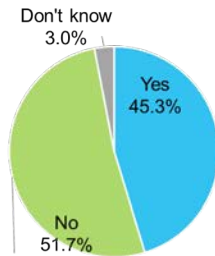
N=168 Q14. What statement best describes your reason for not getting the COVID-19 vaccine?



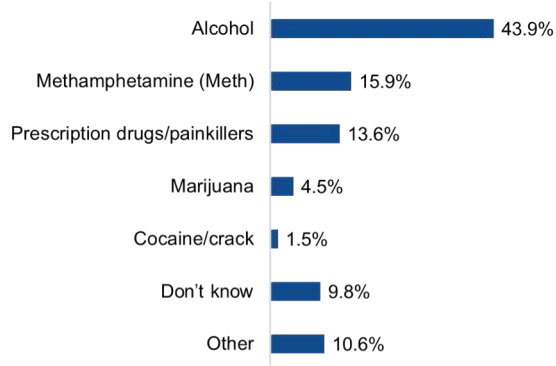
## Survey Results

### Community Survey, cont.

**Have you, a relative, or a close friend experienced substance abuse or addiction?**



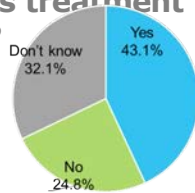
**What substance was involved?**



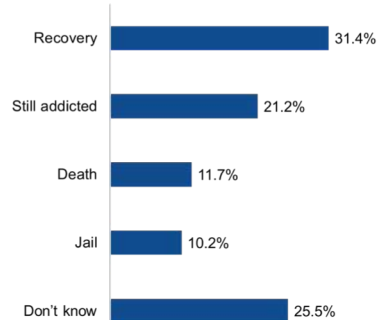
N=265 Q10. Have you, a relative, or a close friend experienced substance abuse or addiction?

N=132 Q11. If yes, what substance was involved?

**If yes, was treatment available?**



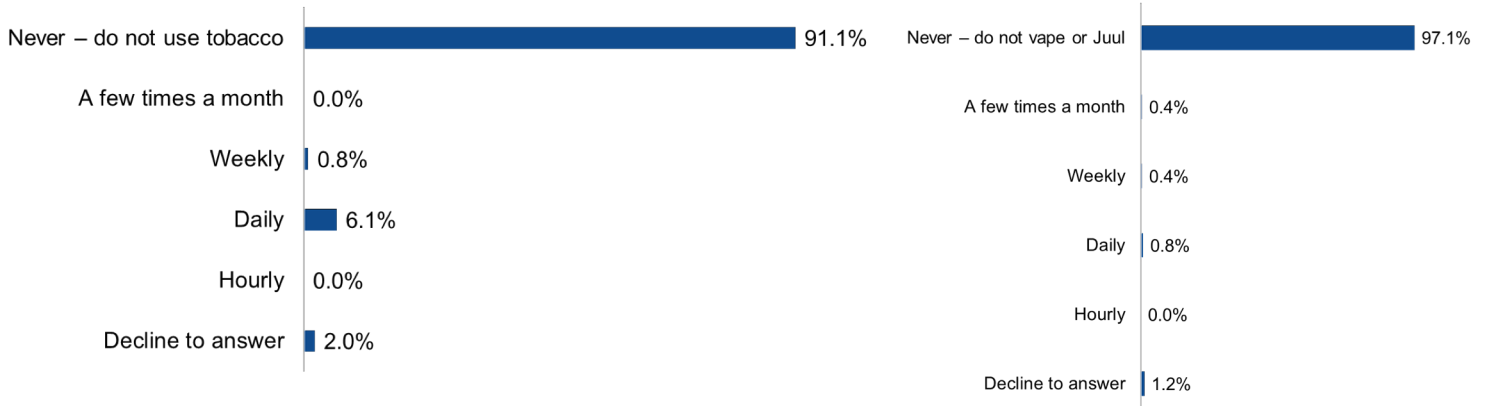
**What was the result of the addiction?**



N=371 N=231 Q17. Was addiction treatment available?

**How often do you smoke or use smokeless tobacco, if you do?**

**How often do you use e-cigarettes or vape, if you do?**



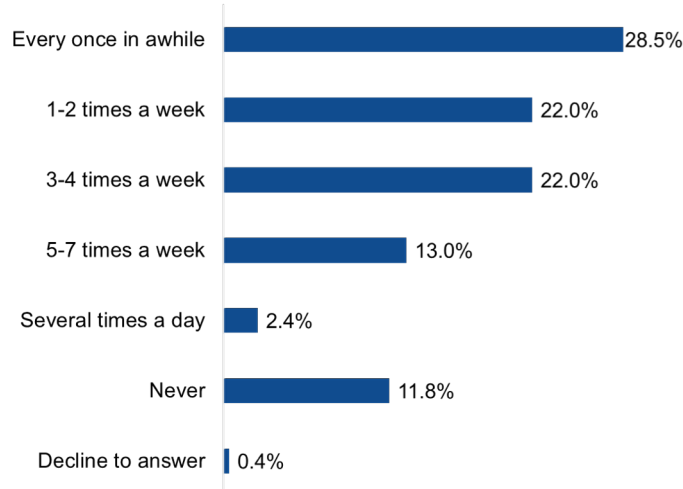
N=742 N=554 Q22. How often do you smoke or use smokeless tobacco, if you do?

N=724 N=549 Q23. How often do you use e-cigarettes or vape, if you do?

## Survey Results

### Community Survey, cont.

**How often did you participate in any physical activities or exercise such as fitness walking, running, weight-lifting, team sports, etc.?**



N=246 Q16. During the past month, other than on your regular job, about how often did you participate in any physical activities or exercise such as aerobics, walking, running, weight-lifting, team sports, etc.?

**If "never", What are the reasons you have not participated in any exercise during the past month? (Select all that apply)**

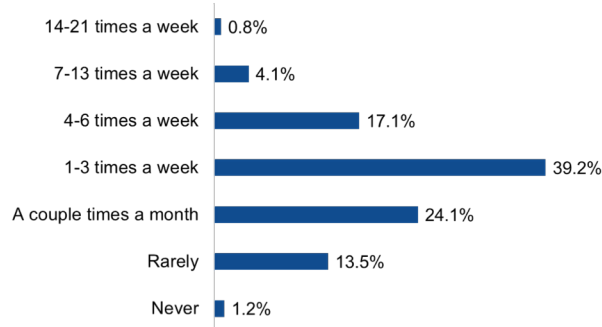


N=165 Q17. What are the reasons you have not participated in any exercise during the past month? (Select all that apply)

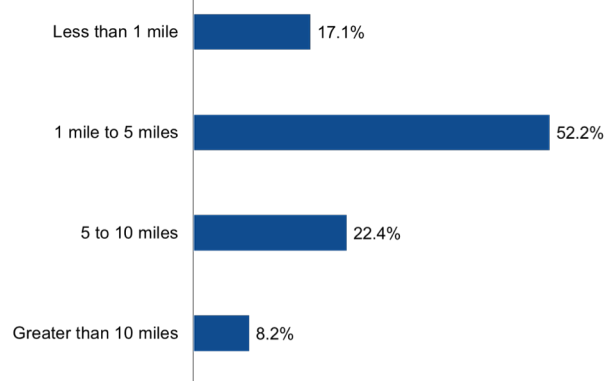
## Survey Results

### Community Survey, cont.

**How many times a week do you eat fast food?**



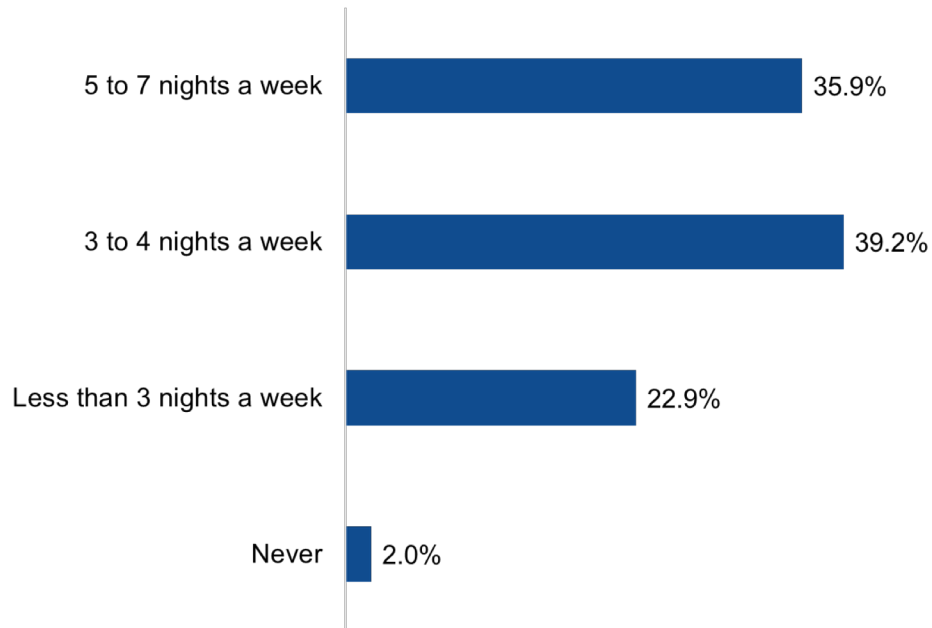
**How close in distance is the nearest store or market that offers fresh fruits and vegetables?**



N=733 N=560 Q24. Do you have access to healthy food?

N=749 N=557 Q25. How close in distance is the nearest store or market that offers fresh fruits and vegetables?

**How often do you or another family member cook dinner at home?**

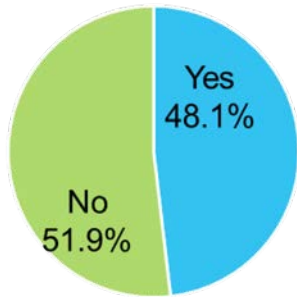


N=245 Q20. How often do you or another family member cook dinner at home?

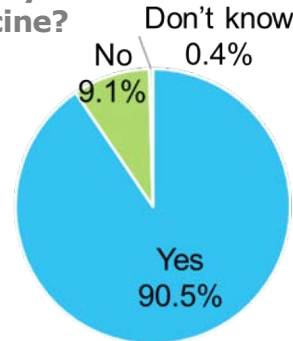
## Survey Results

### Community Survey, cont.

**Have you ever been diagnosed with COVID-19?**



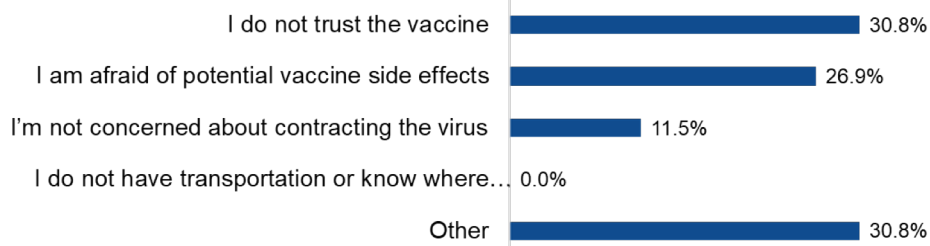
**Have you received the COVID-19 vaccine?**



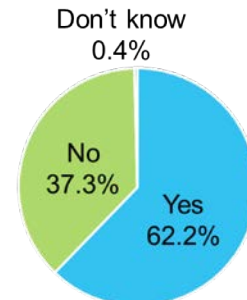
N=733 N=560 Q24. Do you have access to healthy food?

N=749 N=557 Q25. How close in distance is the nearest store or market that offers fresh fruits and vegetables?

**What statement best describes your reason for not getting the COVID-19 vaccine?**



**Have you received the COVID-19 booster(s)?**



N=243 Q24. Have you ever been diagnosed with COVID-19?

N=242 Q25. Have you received the COVID-19 vaccine?

N=26 Q26. If no, what statement best describes your reason for not getting the COVID-19 vaccine?

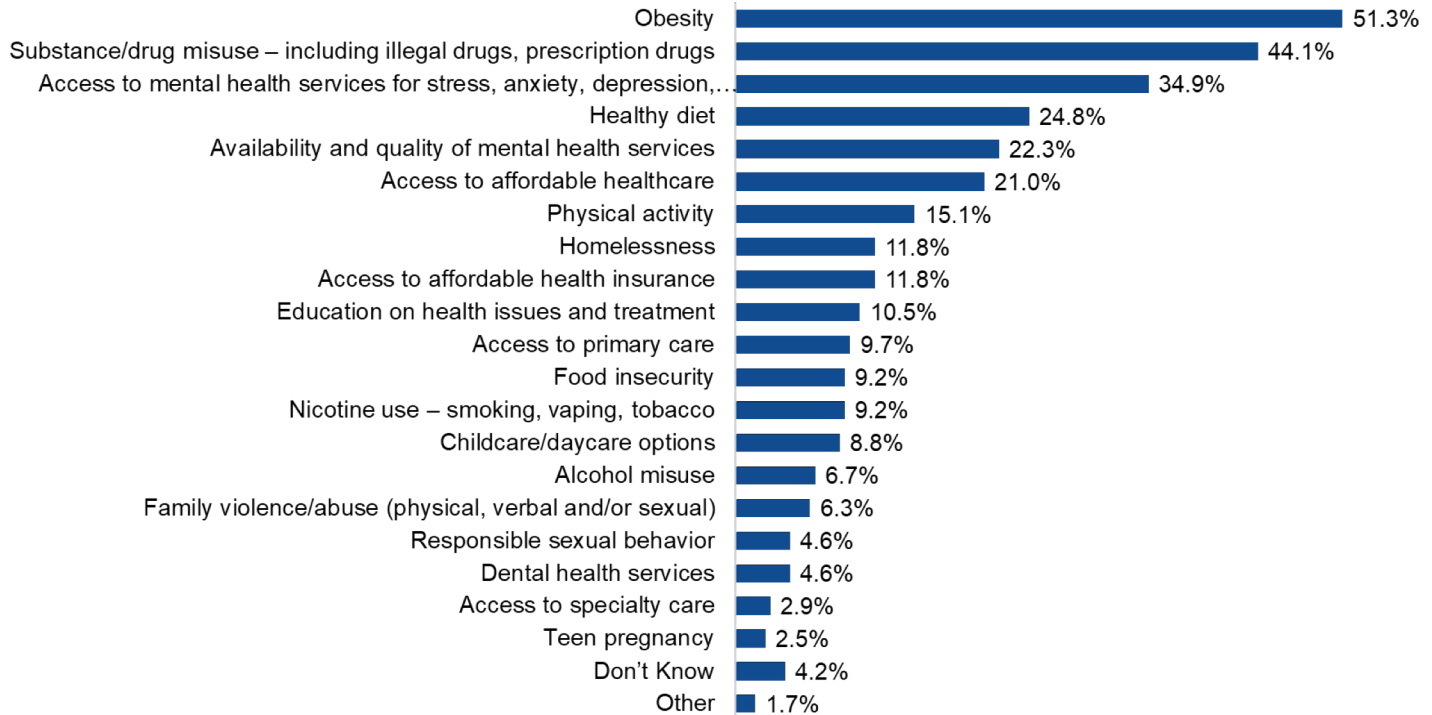
N=241 Q27. Have you received the COVID-19 booster(s)?



## Survey Results

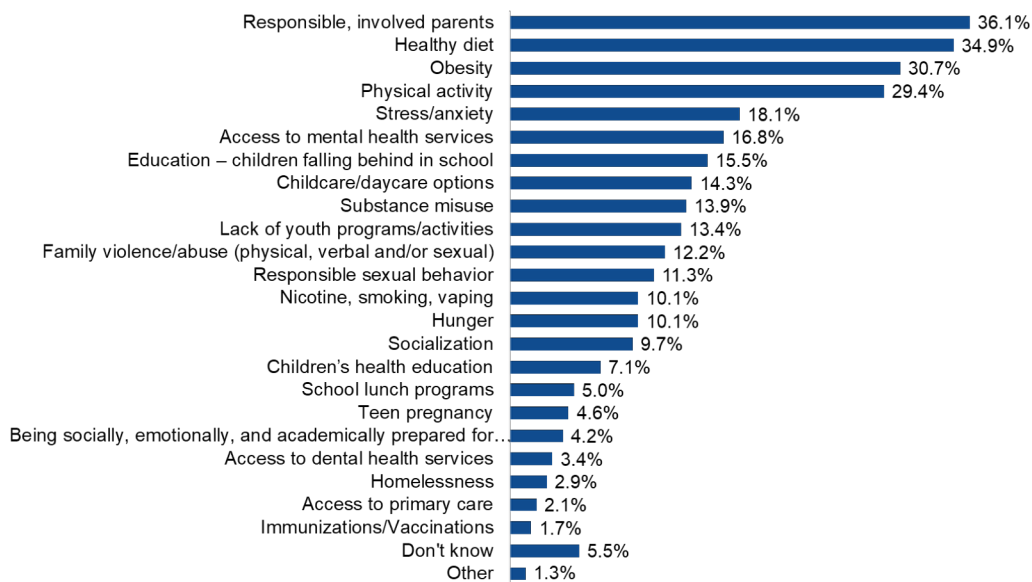
### Community Survey, cont.

**In your opinion, what are the top 3 most significant health issues in the counties? (Select up to three)**



N=238 Q28. In your opinion, what are the top 3 most significant health issues in the counties? (Select up to 3 responses)

**In your opinion, what are the top 3 health concerns for children and youth in your community? (Select up to three)**

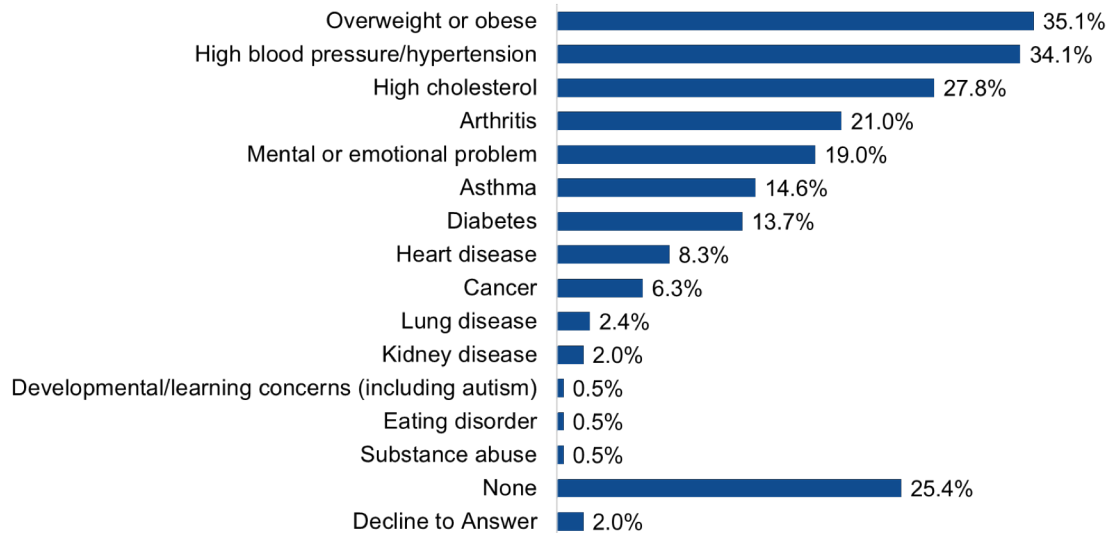


N=238 Q29. In your opinion, what are the top 3 health concerns for children and youth in your community? (Select three responses)

## Survey Results

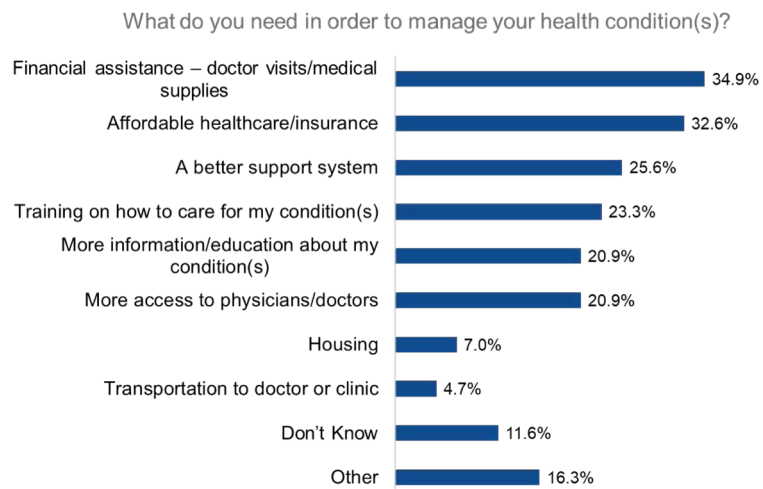
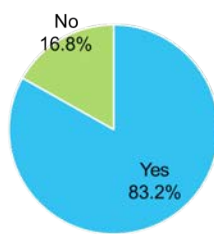
### Community Survey, cont.

**Have you ever been told by a doctor you have any of these conditions, diseases or challenges? (Select all that apply)**



N=205 Q31. Have you ever been told by a doctor you have any of these conditions, diseases or challenges? (Select all that apply)

### Do you feel you have all you need to manage your health conditions?



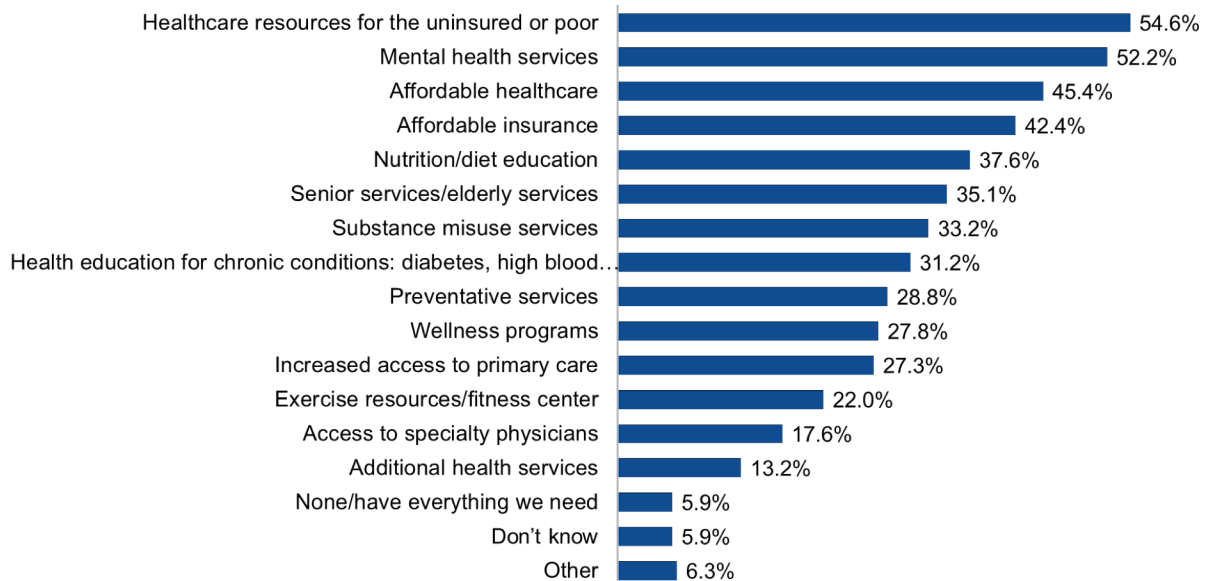
N=208 Q32. Do you feel you have all that you need to manage your health condition(s)?

N=43 Q33. If no, what do you need in order to manage your health condition(s)? (Select all that apply)

## Survey Results

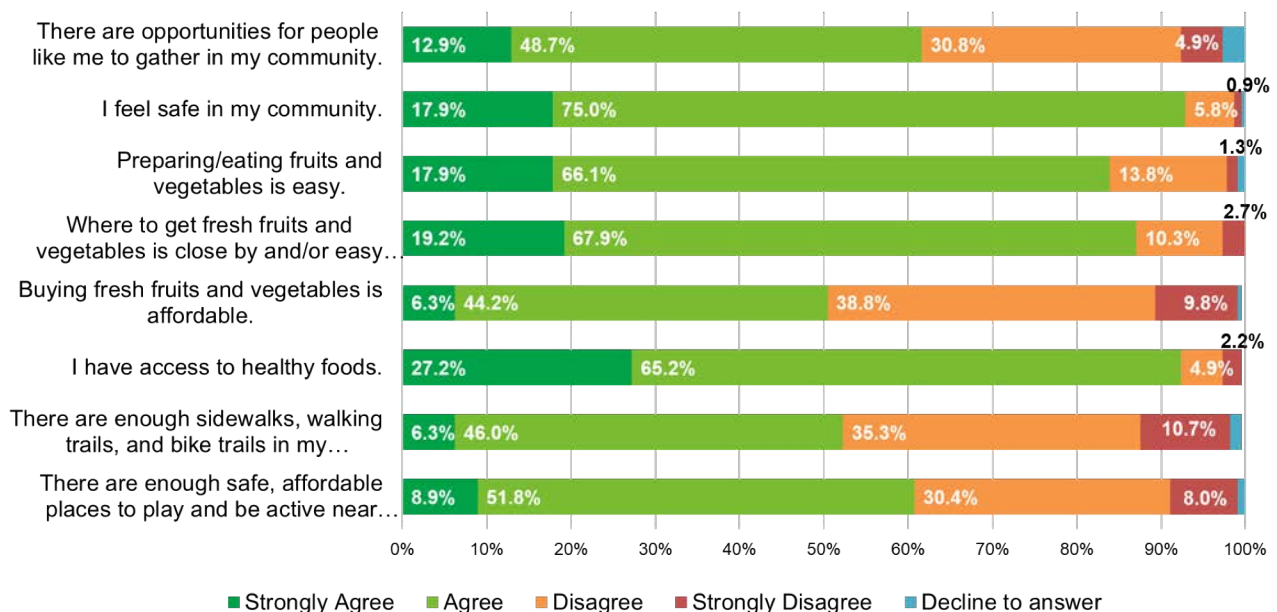
### Community Survey, cont.

**What healthcare, health education, or public health services or programs would you like to see offered in your community? (Select all that apply)**



N=205 Q34. What healthcare, health education, or public health services or programs would you like to see offered in your community? (Select all that apply)

**Please tell us to what level you agree or disagree with the following statements. (1 of 3)**

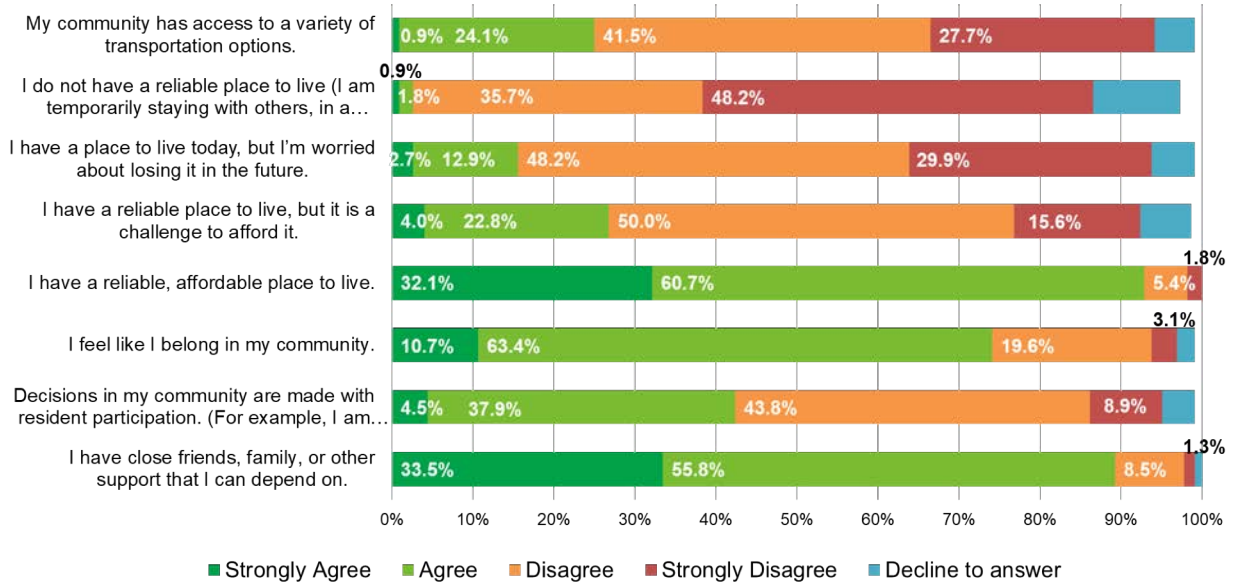


N=224 Q30. Please tell us to what level you agree or disagree with the following statements.

## Survey Results

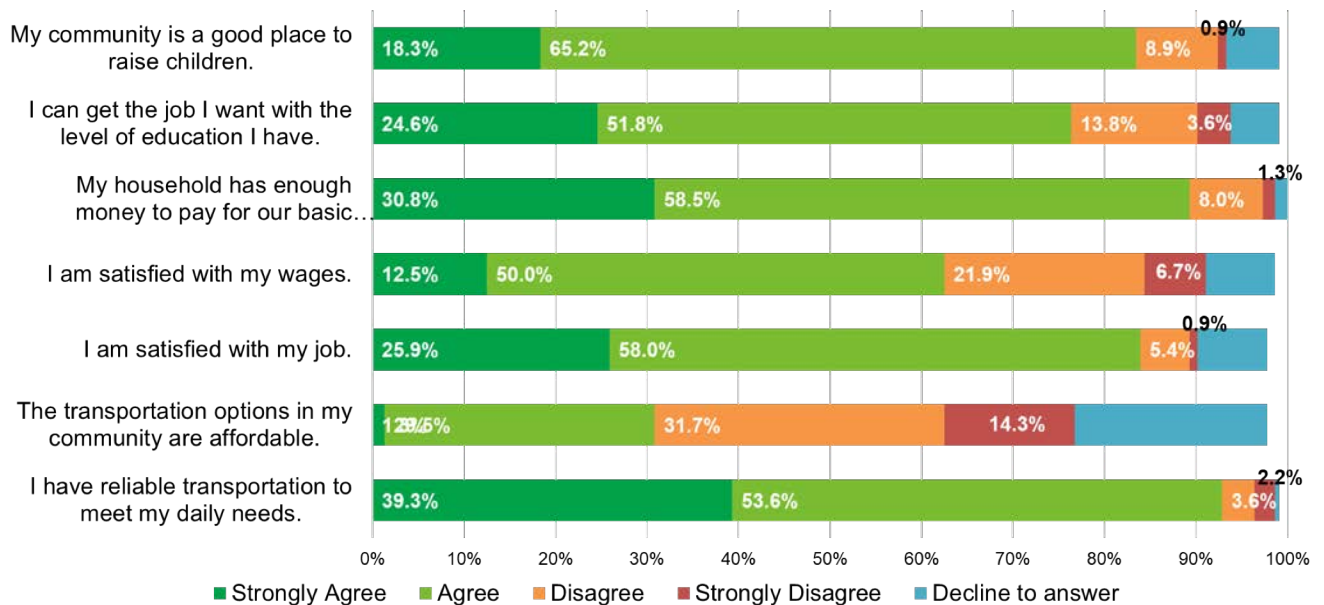
### Community Survey, cont.

Please tell us to what level you agree or disagree with the following statements. (2 of 3)



N=224 Q30. Please tell us to what level you agree or disagree with the following statements.

Please tell us to what level you agree or disagree with the following statements. (3 of 3)



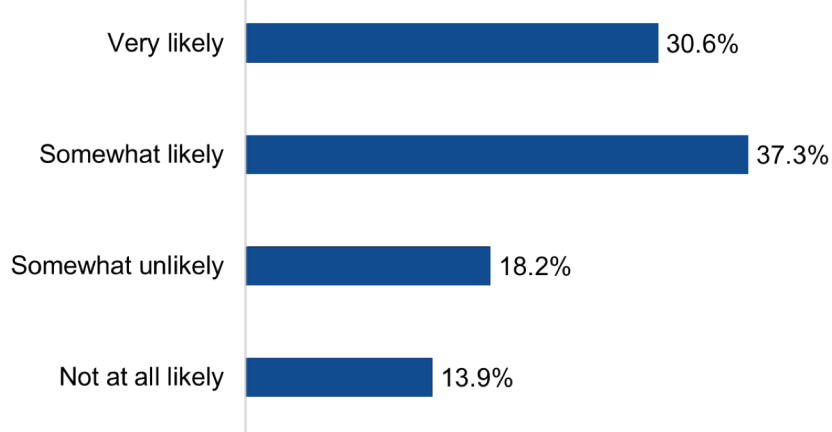
N=224 Q30. Please tell us to what level you agree or disagree with the following statements.



## Survey Results

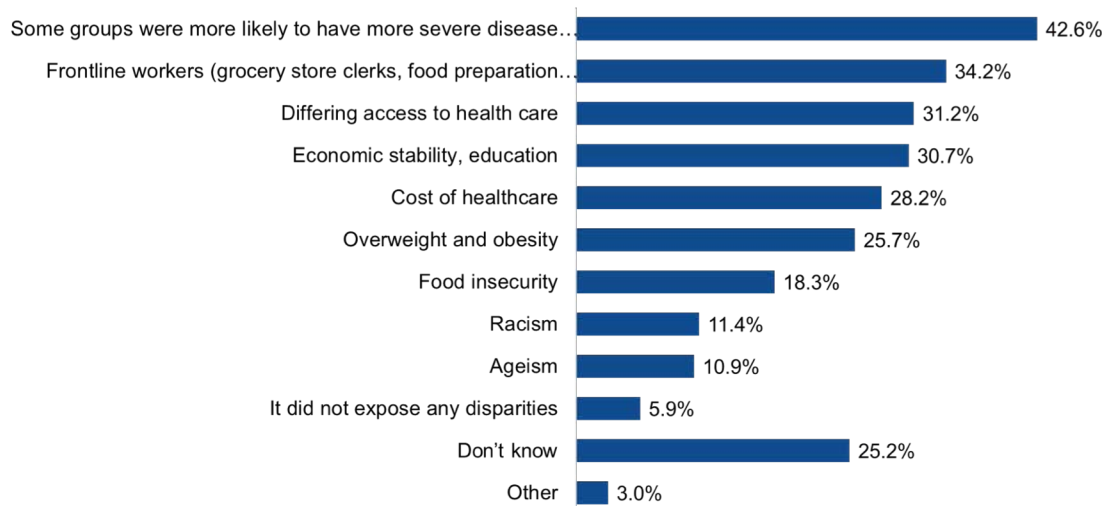
### Community Survey, cont.

**How likely are you to utilize virtual physician care such as through the computer or your smart phone?**



N=209 Q35. How likely are you to utilize virtual physician care through your computer or smart phone?

**What were the causes of health disparities or inequities (differences in health) exposed in your community by the COVID-19 pandemic? (select as many as desired)**



N=202 Q36. What were the causes of health disparities or inequities (differences in health) exposed in your community by the COVID-19 pandemic? (select as many as desired)

## Focus Group Results

### Focus Groups

Community stakeholders representing the broad interests of the community as well as those representing low income, medically underserved, and minority populations participated in individual interviews and focus groups on June 9, 2022, for their input into the community's health. Community participation in individual interviews represented a broad range of interests and backgrounds. Below is a summary of the focus groups and interviews. The full summary is included in the appendices.

#### 1. How do you define health?

- Physical mental, spiritual health, emotional health
- Wellness, overall physical, mental, emotional, financial wellness
- Access to resources for all children to seniors. They may not be able to access resources & services
- Not just the absence of disease an overall sense of wellbeing with outcome measures and quality of life

#### 2. For the purposes of this Community Health Needs Analysis, the community is Murray and Whitfield Counties, generally, how would you describe the community's health?

- Fair at best
- Struggling
  - Significant gaps
- Fair now
  - Having nurses in schools, can get more care
- Improving if you look back 10 years
  - Carpet mills have clinics
  - Residents at hospital have a clinic offering financial assistance
- There are extremes-really, really poor
  - Proliferation of part-time jobs that don't provide health insurance
  - Lower end really far from higher end
- 27% of children in 100% poverty, 63% in households 200% of poverty level
  - Health status connected to financial resources

Very clearly below both national and state averages on multiple fronts, chronic disease, morbidity and mortality as well as other quality metrics, access to care, Murray especially high population to primary care physicians.

#### 3. What are the biggest health concerns or issues for the communities today?

- **Mental Health**
  - Mental health - lack of resources
  - Mental health-resources
  - Lack of mental health - psychiatrists, therapists
  - Mental health- struggle referring
  - Mental health, trauma

## Focus Groups (cont.)

- **Healthcare**

- Dental
- Uninsured - don't seek services
- Dental health issues and no insurance
- Dental especially in Hispanic population
- Lack of providers that accept all payors
  - Access is difficult and navigate wait lists
- Lack of coordination between providers
- Adult vaccines, children's vaccines
- Timely screenings
- Uninsured elderly can't purchase their medicine
  - Paperwork barrier to receive Med Bank & must have a physician
  - Doesn't cover testing supplies
- Family planning clinic feminine products
  - Teen pregnancies – higher than State average
  - Have so many teens having babies
- Lack of trust in the system
- Hispanic population and others especially lower income only go to doctor when emergency
  - Miss preventative screenings
  - Use ER for primary care
- Medications for uninsured, management

- **Chronic Illness**

- Hypertension
- Diabetes
- COPD
- Lung issues
- Diabetes, obesity
- Diabetes on the rise
- Cancer rates are high especially lung. High smoking population
- Chronic disease diabetes obesity heart disease and cancer
- Cardiovascular

- **Substance Misuse**

- Increase in substance abuse
- Substance use
- Lack of follow up and support for substance misuse
- Still smoke a lot, stop smoking

- **Socioeconomics**

- Cost of medications – people making decision, “do I eat or fill my prescriptions”?
- Housing cost - not enough affordable housing
- Maslow's hierarchy of need. If their basic needs aren't being met, then can't worry about health

## Focus Groups (cont.)

- Murray Co doesn't have a shelter. Through the schools can track homelessness. Shelter in Whitfield-have to prove income, and costs \$400 per month. Have some people who are unhoused. Landlords aren't accepting housing vouchers
- Poverty
- Lack of jobs with higher wages and affordable benefits
- **Education**
  - Low education levels, Spanish as a second language
  - Education key factor in health
  - Lack of knowledge about health
  - Lower educated Moms
  - Goal for families-have their kids graduate from high school
  - Classes not offered in Spanish at technical college
- **Transportation**
  - Transportation Agencies that serve uninsured expansion would be great
  - 2 key issues - transportation & childcare basis for other issues
  - Transportation – getting back and forth to the doctor Access to foods an issue
  - Drive automobiles very aggressively. Reflected in the fact higher motor vehicle accidents.
- We have a “suck it up” mentality
- Stigma
- Knowledge there is help out there
- Low wage jobs competition. Hard to compete for employees
- Aware of resources
- Don't exercise regularly or eat healthy

### 4. What are the most important health issues facing various populations including medically-underserved, low-income populations?

- **Healthcare**
  - Dental access to care
  - Need to build rapport so they feel comfortable and build trust. Can't access providers when they're sick. "Never felt like a patient, I felt like a person" with my favorite doctor
  - Medical records show everything- can't fib anymore
  - Doctors on their computers all the time. Have to come to a happy medium
  - Trust-people don't want to hear your lifestyle choices are bad, quit smoking every visit. We need to meet them where they are
  - People don't seek care
  - Doctors seem more compassionate since COVID
  - Medicaid, no dental preventative care
  - Trying to take advantage of telehealth
- **Mental health**
  - Access to mental health- uninsured, bilingual mental health
  - Building trust w/ mental health patients takes time



## Focus Groups (cont.)

- Transportation – must make appointments between 8 and return home by 3. That's just not happening and must book 2 days ahead and can't miss appointment
- Have funding for transportation, but it can't cross county lines
- Jobs with sufficient pay and affordable benefits
- Housing-see above
- GA forth worst uninsured in U.S. for insurance. Large gap for insurance
- Poor access to care, but more importantly from a SDOH standpoint we have low education, Dalton lowest educated cities in America.

### 5. What are the most important health issues facing various populations including minority populations?

- **Communication and Culture**
  - Communication-language
  - Language and cultural barriers with a large Hispanic population. Disconnected from the health system.
  - Affordable insurance Hispanics-lack of trust with using translators
  - Not reaching out with bilingual communication
  - School systems require communication go out in 2 languages but not the healthcare providers
  - Central Americans who don't speak Spanish well, use children to translate
  - Lack of trust-courts, health system, about 4-5% of the population
  - Trust
- **Healthcare access**
  - Prescriptions are very expensive
  - Lack of affordable healthcare providers
  - Wait until illness can't be treated because they don't have proper insurance
  - Screenings out of reach
  - Undocumented population
  - Deo Clinic sees these patients
  - They're afraid of seeking care and resources
  - Don't qualify for assistance
  - Low-income health services
- **Resources**
  - Affordable food is high carb, high sugar
  - Lack of transportation
    - One car households, creates transportation issues
    - Access, transportation
- **Lack of childcare centers**
  - Need better childcare
  - Think about locations to meet people where they are in their neighborhoods
- **Access**
  - Hot spot under resourced communities, not located near resources

## Focus Groups (cont.)

- Need Spanish speaking providers in convenient locations and not take half a day when they take time off from work
  - Cedar Ridge school district - only resource their school
- Housing
  - Unhoused population can't afford housing, if its even available available
  - Salvation Army provides some housing, vouchers
  - Not good to put families in hotels
- **Mental health**
  - Lack of mental health providers
  - Moving in the right direction to help mentally ill
  - 44k transports for mental health in the state
    - ER is a catch-all
    - Stigma – law enforcement interacting may not be positive
      - Uniforms can trigger
- Hispanic more concentrated in city, not county
- Not many race and ethnicity issues, issues are based on poverty and education.

### 6. What are the most important health issues facing children?

- **Physical Health –**
  - Parents – patterns, don't want to take kids to the doctor because they can't afford the wait times away from work
  - Parents knowing kids need well-visits
- **Mental Health –**
  - Mental health – normalization, isolation, suicides
  - Take youth the mental health first aid
  - So much stigma with mental health issues
  - Mental health access – child and adolescent providers
  - Lack of training for educators-how to deal w/mental health
  - Behavioral issues and behavioral medical management
  - Mental housing - behavioral issues that we haven't seen previously
    - 3rd 4th grade, getting younger
    - Pandemic stress what is normal?
      - Pandemic pushed everyone onto devices and online
      - Virtual has become reality, skewed reality for kids
    - Parents share too much info with kids
      - Worry about housing, food
    - Parents working long hours, kids left alone and not in activities, sports
      - Risky behaviors unsupervised
  - Addictive vape pens, synthetic drug use
- Fear of parents' documentation status
- Lack of affordable childcare

## Focus Groups (cont.)

### 7. What are the most important health issues facing seniors?

- **Transportation**
  - Lack of transportation
  - Transportation
  - Transportation to provide convenience
- **Food**
  - Food insecurity in the elderly population
  - Food, nutritious food-access, cost, education
  - Donations-need complete, healthy meals
  - Don't know where food resources are. Many food sources don't deliver
  - Eating a healthy meal is more expensive
  - Waiting list for Meals on Wheels
  - Some elderly think they should leave food for people who need it more. "Do not take charity". They think about that
- **Healthcare**
  - Cost of medications
  - Prescriptions – paying for medications
  - Trust
  - Need to offer coordination services
  - Trust-saw with COVID and vaccines that they didn't trust that the vaccine was free. Healthcare's complicated
  - All the agencies help people advocate for themselves
  - Help with paperwork
  - Hard to navigate appointments and services
  - In the Hispanic population, the senior population is new
    - Still adapting
    - Don't qualify for support
    - Take care of them at home. Hard to navigate home care
    - Culturally appropriate senior care, e.g, hospice
      - Cultural shock. Hospice = just let them die
- **Housing**
  - Housing is a problem
    - Affordable housing
  - Waiting list for independent living, lots of assisted living
    - Need affordable nursing homes, assisted living
  - Nursing homes that are rehabs. Walnut Creek 16 Apts. more residential
  - Community care program to keep people home, but hard to qualify and find a provider to care for them
    - Need education for the pre-elderly to prepare for retirement
- **Resources**
  - Aging with mental health, facilities won't take them
    - Example of elderly schizophrenic man 6 months in the hospital not getting rehab

## Focus Groups (cont.)

- Take resources out-churches
- Community centers, schools, places they trust
- Don't know about resources. Don't know how to apply for resources
- Knowledge of technology - only have a landline
- Lack of support
- Great support network, could be more diverse culturally
- Same as above-obesity, hypertension
- Getting seniors Durable Medical Equipment (DME). DME companies asking pts to pay for it
  - Don't bill insurances
- **Aging**
  - Driving skills classes
    - Lose mental skills, cognitive issues
  - More weakness, aches and pains
  - Less comprehension
  - Falls
- Gained weight during COVID
- Isolation and getting re socialized
  - Depression, vulnerable from inactivity
- People start planning too late for moving out of their houses

### 8. The community performed a CHNA in 2019 and identified priorities for health improvement, List Priorities

1. Lifestyle – Nutrition and activity
2. Chronic Diseases
  - ◆ Diabetes
  - ◆ Cardiovascular disease and Hypertension
  - ◆ Cancer
3. Mental Health
4. Access to care
  - ◆ Access to providers
  - ◆ Access to free and reduced cost care
5. Substance Use – including tobacco
6. Social Determinants of Health - socioeconomics, housing, family dynamics, food insecurity

### What has changed most related to health status in the last three years?

- **Mental Health**
  - Flip it, put mental health first
  - Grief, isolation
  - Covid exacerbated mental health so it should be #1 or #2
  - Trauma and mental health issues increased
  - Access to mental health care has gotten worse



## Focus Groups (cont.)

- **Social Determinants of Health**

- Social determinants should be first
- Socioeconomic issues should be first. Maslow's hierarchy
- Affordable housing
- 9 deaths from fentanyl so substance use is worse
- Underlying conditions worse during COVID
  - Avoided the doctor's office - skipped screenings
- Kids still got food delivered
  - Proud of the community summer feeding sites. Got food out
  - Bus drivers know their families. Buses were key to getting out food and school supplies
- Health Dept resource sharing with other organizations
  - Testing, vaccine sites
  - If this happened again, we have a blueprint
- All still active
- Substance abuse has gotten worse
- Access to care may have improved slightly

### 9. What environmental or social factors have the biggest impact on community health?

- **Kids**

- Feel society has given up on them don't fit in. It starts as little kids
- Parental control of children, being friend not parent
- Physical activity-now have fees for activities, numerous kids can't get to the activity, but don't have transportation

- **Resources**

- Lack of grocery store access in outlying areas
- Lots of resources available 8-5, and have to leave work to access services
  - Use vacation time
- Larger companies took resources to the community

- **Community**

- We don't know how to be in community with each other
- Some people don't really know what's going on in the community. Post social media, communicate with the kids & kids tell parents
- Live in a 24 hour shift community but don't offer services for a shift community
- Social history-smokers, drug use

### 10. What do you think the barriers will be to improve health in the communities?

- Paperwork – pages and pages to receive help
- Payor issues- find providers that take insurance types, Medicaid, commercial types, not everyone takes all insurances
- Staffing
- Uninsured and not being able to afford care especially specialists

## Focus Groups (cont.)

- Very bike and walking unfriendly community. Can do more with city parks and exercise, open air facilities.

### 11. What community assets support health and wellbeing?

- **Youth**
  - Boys and Girls Club
  - Clubs in schools
- **Public Resources**
  - Parks-city parks sort Mountain Lake getting new hiking trail
  - The Health Departments – provide STD and HIV screening, free screenings, WIC
  - Community center-free to the public
  - Community Center-gym, weights, safe
  - New trails and parks, summer camps
  - Murray County Library
  - Lots of parks a trails
  - Deo Clinic in Dalton III
- **Food Resources**
  - Food boxes-all food pantries open 10 until 2 not offered after-hours. Stagger times when giving out food
  - Food bank
- **Other Assets**
  - Med Bank
  - United Way
  - 4-H
  - Civic orgs
  - Providence Ministries
  - NICU
  - LNA
  - CLIA
  - Hospital – always come out and offer resources
  - Hospital, Hospital ER work great together
  - Social workers
  - There is a resource guide for Murray and Whitfield Counties & a mental health guide. Schools have copies
  - Dalton State College- COVID testing
  - Collaborations
  - Books for babies born at Hamilton
  - Agencies that provide education about health and resources
    - Dalton College
- Spanish speakers all now reflective of the community
- People want to make community better
- Live for it community has started up since the last CHNA, has picked up health advocacy
- Dalton Neighborhood initiative
- The Collaborative a group of local non-profits that try to address these types of needs. Meet to see what needs are being met and which aren't.

## Focus Groups (cont.)

### 12. What, if any, health issues or inequities did the Covid-19 pandemic expose in the community?

- **Vaccines**
  - Skipped vaccines for kids
  - Trust in the vaccine is lacking
  - Free testing and vaccines
  - People would get flu vaccines but not COVID-19 vaccine politicization of a communicable disease
  - Knowledge of Health Dept and could get shots
- **Technology**
  - No virtual platforms. Had to get capable and still seeing patients virtually
  - Most weren't prepared to move to telehealth platform
  - Population doesn't have a laptop or smart phone
    - Need to be better prepared, get smarter systems, train staff
- People neglected their health needs
- PPE vulnerability
- Certainly stressed the healthcare system
- Exposed some weaknesses in city and municipal leadership who did not understand science and did not defer to healthcare professionals for leadership in making policy decisions
- Learned a lot about telehealth, turns out didn't have to spend tons of money. Telehealth has continued.

### 13. If you had a magic wand, what improvement activities should be a priority for the counties to improve health?

- **Transportation**
  - Transportation
  - Public transportation
  - Better transportation system Robust telehealth for providers
  - Provide, reliable, low cost, safe transportation
  - Just basics are costing \$3 for transportation per trip. Need free transportation
  - Run a shuttle bus current system very limited that runs between counties
  - Bus line that goes out to the county current system limited. Flood with friendly, safe, clean, go to the doors to assist people, not just meet them at the curb
- **Education**
  - Adult education options
  - Provide help with paperwork – some people can't read and write
  - Need parenting classes in Murray County
  - More educated community on access to resources
- **Housing**
  - Homeless shelter in Murray County
  - Housing

## Focus Groups (cont.)

- Nursing homes
- Build a low-income community w/in a community so anyone can get housed
- Unhoused population is an issue
  - Standardize services and reduce duplication, coordination
- Bring landlords together and encourage lower rents for tax breaks
- **Physical Healthcare**
  - Created our accountable care organization 5 years ago
  - Focus more attention on infrastructure on primary care and behavioral health
  - Not have let Murray Medical Center leave Hamilton control
  - Engage with industry regarding healthcare access and also environmental and behavioral change advocacy.
  - Focus more on prevention Medicaid like teeth extractions
  - Affordable medication
  - Prenatal care for everyone
  - More accessible health dept
  - Free clinic
  - Free medical clinic w/dental Clinic
  - Multi-specialty clinic for uninsured. ex. Urology, psychiatry
  - More providers
  - Medication management for seniors
  - Developmental pediatrics struggle Medicaid - send to Chattanooga and wait times are very long
  - Developmental Pediatricians that take Medicaid
  - Offer regular health days/fairs with doctors, dentists, free access
  - Multipurpose area-crisis walk-in for mental health patients
  - Both mental and physical
- Mental healthcare
  - Wish there were more mental health services
  - Fix behavioral health, hard to find mental health resources
    - GA Hope Highland Rivers. Can't get patients in
    - Need more behavioral care for patient
      - For both insured and uninsured patients
      - Everyone insured and pharmacy benefits
  - GEEARS County profiles
    - Common thread culturally appropriate healthcare
    - Not all providers are sensitive to Hispanic or Black communities - words used, understanding culture
- **Youth**
  - Childcare



## Focus Groups (cont.)

- Childcare – 24 hours after school care in all schools
  - Affordable Grant 21<sup>st</sup> century schools, 5 year grant
- School, social work, parent involvement coordinator
- Nurse in every elementary
- Get services into household and counsel children to break the cycles so they don't need these services anymore
- **Resources**
  - Food bank in Murray County
  - Resource center in every neighborhood
  - Community center
    - Full service, clinic, counseling, gyms, exercise classes
    - Kitchen, wellness center – teach life skills
  - Senior friendly swimming pool Aqua center - aqua therapy
  - Hamilton does a great job with financial assistance for specialties they have. Some don't accept financial assistance program
- Translate everything
- YouTube channel for all services
- More community-based workers to visit people in their homes
- Huge volunteer base
- Need more communication
  - Large portions of the pop don't know what resources are available
  - Need one spot to communicate. There's not one place people can share and people can go to

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*The section contains a list of community assets and resources that can help improve the health of the community and assist with implementation of the plan accompanies this document. The focus group also identified community resources to improve health, which are listed on page 20 of the Community Health Needs Assessment.*

CLICK [HERE](#) FOR THE UNITED WAY OF NORTHWEST GEORGIA'S LIST OF RESOURCES, UPDATED ANNUALLY.

DIAL 2-1-1 FOR HELP  
706.CAN.HELP

This connects people to resources that address everyday challenges and those that develop during times of crisis. You can also call 706-CAN-HELP to speak to a bilingual Information & Referral Specialist that can connect you to local resources located in Whitfield and Murray Counties. This number is only accessible during our business hours Monday-Thursday from 8:30 am-5:00 pm and Friday from 8:30 am - 4:00 pm. Visit [ourunitedway.org/dial-2-1-1-help](http://ourunitedway.org/dial-2-1-1-help) for more information.

# Access to Health Care

## Hospitals

Hamilton Medical Center  
1200 Memorial Dr.  
Dalton, GA 30720  
(706) 272-6000

AdventHealth Murray  
707 Old Dalton Ellijay Rd.  
Chatsworth, GA 30705  
(706) 695-4564

## Health Department

Murray County Health Department  
709 Old Dalton Ellijay Rd.  
Chatsworth, GA 30705  
(706) 695-4585

Whitfield County Health Department  
800 Professional Blvd  
Dalton, GA 30720  
(706) 279-9600

## Clinics

DEO Clinic  
218 N. Fredrick St  
Dalton, GA 30720  
706-581-2009

C-Worth Family Walk In Clinic  
2976 US-76 B & C  
Chatsworth, GA 30705  
(706) 517-0656

Georgia Mountain Health Services, Inc.  
1008 N 3rd Ave.  
Chatsworth, GA 30705  
(706) 517-2273

Hamilton Convenient Care Dalton  
1012 Burleyson Road  
Dalton GA, 30720  
706.529.3245

Hamilton Convenient Care Varnell  
3957 Cleveland Hwy, Suite B  
Dalton GA, 30721  
Phone: 706.852.2374

Hamilton Physician Group - Murray Campus  
800 G.I. Maddox Pkwy  
Chatsworth, GA 30705  
(706) 695-1992

Sutter Family Practice  
320 West Market St.  
Chatsworth, GA 30705  
(706) 695-0466

## Mental Health

### Counseling Services

Georgia Hope  
1414 Dug Gap Road  
Dalton, GA 30720  
(706) 279-0405

Life Balance Counseling, LLC  
313 N Selvidge St Suite 304  
Dalton, GA 30720  
706-429-4777

Marcia Jaudon Counseling  
113 W Gordon St  
Dalton, GA 30720  
706-452-7056

ProFamily Georgia  
2109 Cleveland Highway  
Dalton, GA 30721  
(706) 259-4961

ThisLife Counseling, LLC  
119 N 6th Ave  
Chatsworth, GA 30705  
706-383-7290

## Behavioral Health

Hamilton Physician Group  
Behavioral Health  
Medical Arts Building  
1109 Burleyson Road, Suite 104  
Dalton, GA 30720  
(706) 281-8490

Highland Rivers Behavioral Health  
900 Shugart Road  
Dalton GA 30720  
(706) 270-5005

The Stevens Clinic  
405 S. Thornton Avenue  
Dalton GA 30720  
(706) 226-1146

St Joseph Clinic  
1102 W Waugh St  
Dalton GA 30720  
706-277-2321

## Healthy Eating/Active Living

### Healthy Eating

Meals on Wheels  
Elderly Meals Program  
P.O. Box 760  
Jasper, GA 30143  
Phone: (706) 695-7050  
Phone: (800) 440-1642  
Fax: (706) 278-2777

Chattanooga Area Food Bank  
Northwest Georgia Branch  
1111 South Hamilton Street  
Dalton, GA 30720  
(706) 508-8591  
Get help at [Chattfoodbank.org](http://Chattfoodbank.org)

## Parks and Outdoor Activities

### Murray County

Carters Lake  
Chieftain Trail  
Cohutta Wilderness Area  
Fort Mountain State Park  
Indian Trace & Spring Lakes  
Lake Conasauga Recreation Area  
North Georgia Speedway  
Southern Highroads Trail

### Whitfield County

Al Rollins Park & Baseball Complex  
Boaddus/Durkan Soccer Complex  
Brookwood Park  
Civitan Park  
Dalton Green  
Dawnville Park  
Dug Gap Park  
Eastbrook Park  
Heritage Point Regional park  
James Brown Park  
Joan Lewis Park  
John Davis Recreation Center  
Lakeshore Park & Tennis Complex  
Mack Gaston Community Center  
Mount Rachel Trail  
Nob North Golf Course  
North Whitfield Park  
Otis Cook Memorial Tree Park  
Pinckneyville Park/Soccer Complex  
Pleasant Grove Park  
Raisin Woods Park  
Riverbend Park  
Tunnel Hill Park  
Valley Point Park  
Varnell Park  
Westside Park

## Socioeconomics

### Basic Needs Assistance

North Georgia Community Action  
420 N Hamilton St.  
Dalton, GA 30720  
(706) 226-7241

Doc-Up  
1007 S Thornton Ave.  
Dalton, GA 30720  
(706) 529-9000

City of Refuge Dalton  
120 E Morris St.  
Dalton, GA 30720  
(706) 226-1301

Dalton's Greater Works  
1001 S Thornton Ave.  
Dalton, GA 30720  
(706) 529-3757

The Salvation Army  
1109 N Thornton Ave.  
Dalton, GA 30720  
(706) 278-3966

Harvest Outreach  
207 E Morris St.  
Dalton, GA 30721  
(706) 226-7995

Division of Family and Children  
Services  
1142 N Thornton Ave.  
Dalton, GA 30720  
(706) 272-2331

United Way of Northwest Georgia  
816 S Thornton Ave.  
Dalton, GA 30720  
(706) 226-4357

Family Promise of Whitfield County  
Incorporated  
1110 Penrose Dr.  
Dalton, GA 30720  
(706) 529-4637

Salvation Army Food Bank  
211 W Fort St.  
Chatsworth, GA 30705  
(706) 695-7605

Helping Hand Food Pantry, Inc.  
713 S 3rd Ave. Hwy. 411  
Chatsworth, GA 30705  
(706) 517-0091

Murray County Community Action  
217 W Market St.  
Chatsworth, GA 30705  
(706) 695-5913

Chatsworth Housing Authority  
1311-19 Old Dalton Ellijay Rd.  
Chatsworth, GA 30705  
(706) 695-3353

Meals on Wheels  
217 East Market St.  
Chatsworth, GA 30705  
(706) 695-7050

Murray County Division of Family &  
Children Services  
830 G.I. Maddox Pkwy.  
Chatsworth, GA 30705  
(706) 695-7315



## **Socioeconomics**

### **Community Service Organizations**

United Way Community Connection  
101 E Market St.  
Chatsworth, GA 30705  
(706) 695-9001

Keep Chatsworth Murray Beautiful  
302 E Market St.  
Chatsworth, GA 30705  
(706) 517-0222

Murray County Saturday Sacks  
111 West Cherokee St.  
Chatsworth GA 30705 US  
(706) 695-3211

Family Frameworks  
P.O. Box 2507  
Dalton, GA, 30722  
(706) 271-7286

Take Heart for Hope  
318 S Hamilton St.  
Dalton, GA 30720  
(706) 980-7725

Compassion House  
901 Chester St.  
Dalton, GA 30721  
(706) 272-2843

Family Support Council  
1529 Waring Rd.  
Dalton, GA 30722  
(706) 272-7919

The Women's Enrichment Center  
109 W Gordon St.  
Dalton, GA 30720  
(706) 278-1050

## **Socioeconomics**

Fellowship of Christian Athletes  
(FCA)  
714 Calhoun St.  
Dalton, GA 30721

(706) 226-5144  
Rotary Club of Dalton  
333 Country Club Way  
Dalton, GA 30721

### **Life Skills/Job Training**

Murray County Development Center  
735 W Chestnut St.  
Chatsworth, GA 30705  
(706) 695-4571

The Employment Department of  
Murray County  
121 N 4th Ave.  
Chatsworth, GA 30705  
(706) 517-1400 ext. 1243

## Substance Use Disorder

MedMark Treatment Centers  
Chatsworth  
1289 G I Maddox Pkwy  
Chatsworth, GA 30705  
(706) 971-3366

Providence Women's Recovery  
711 S Hamilton St  
Dalton, GA 30720  
(706) 519-0404

Innervention  
515 Benjamin Way # 300  
Dalton, GA 30721  
(706) 259-2245

Highland Rivers Health  
900 Shugart Rd  
Dalton, GA 30720  
(706) 270-5005

Carter Hope Center  
506 E Hawthorne St  
Dalton, GA 30721  
(706) 226-7044

Gateway Treatment Centers, LLC  
37 Kiker St  
Ellijay, GA 30540  
(706) 703-2517

Crossroads  
367 Richardson Rd SE  
Calhoun, GA 30701  
(800) 805-6989

Narcotics Anonymous  
Rocky Face, GA 30740  
(706) 279-9974

## Substance Use Disorder

Live Strong Rehab Center Georgia  
205 West Gordon Street  
Dalton, GA 30720  
(762) 251-8578

Restoration Recovery  
1500 Dug Gap Road  
Dalton, GA 30720  
(706) 708-4155

## Chronic Disease Management

### Hospitals

Hamilton Medical Center (Whitfield County, GA)  
1200 Memorial Dr.  
Dalton, GA 30720  
(706) 272-6000

AdventHealth Murray  
707 Old Dalton Ellijay Rd.  
Chatsworth, GA 30705  
(706) 695-4564

### Health Departments

Whitfield County Health Department  
800 Professional Boulevard  
Dalton, GA 30720  
(706) 279-9600

Murray County Health Department  
709 Old Dalton Ellijay Rd.  
Chatsworth, GA 30705  
(706) 695-4585

## Education

Cohutta Elementary School  
254 Wolfe St.  
Cohutta, GA 30710

Beaverdale Elementary School  
1350 Prater Mill Rd. Northeast  
Dalton, GA 30721

Blue Ridge School  
100 Bogle Street  
Dalton, GA 30720

Brookwood School  
501 Central Avenue  
Dalton, GA 30720  
706.278.9202

Tunnel Hill Elementary School  
203 East School St.  
Tunnel Hill, GA 30755

Antioch Elementary School  
1819 Riverbend Rd.  
Dalton, GA 30721

Cedar Ridge Elementary School  
311 Cedar Ridge Rd. SE  
Dalton, GA 30721

Dawnville Elementary School  
1380 Dawnville Rd. NE  
Dalton, GA 30721

Dug Gap Elementary School  
2032 Dug Gap Rd.  
Dalton, GA 30720

Westside Elementary School  
1815 Utility Rd.  
Rocky Face, GA 30740

Varnell Elementary School  
3900 Cleveland Hwy.  
Dalton, GA 30721

New Hope Elementary School  
1175 New Hope Rd. NW  
Dalton, GA 30720

Pleasant Grove Elementary School  
2725 Cleveland Hwy.  
Dalton, GA 30721

Eastside Elementary School  
102 Hill Rd.,  
Dalton, GA 30721

## Schools

Park Creek School  
1500 Hale Bowen Drive  
Dalton, GA 30721

Roan School  
1116 Roan Street  
Dalton, GA 30721

Valley Point Elementary School  
3798 South Dixie Rd.  
Dalton, GA 30721

Westwood School  
708 Trammell Street  
Dalton, GA 30720

Christian Heritage School  
1600 Martin Luther King Jr Blvd.  
Dalton, GA 30721

Dogwood Christian Academy  
5296 Dogwood Valley Rd.  
Tunnel Hill, GA 30755

Learning Tree Elementary School  
300 S Tibbs Rd.  
Dalton, GA 30720

Cedar Valley Christian Academy  
2744 Cleveland Hwy  
Dalton, GA 30721

## Schools

Hammond Creek Middle School  
330 Pleasant Grove Drive NE  
Dalton, GA 30721

North Whitfield Middle School  
3264 Cleveland Hwy.  
Dalton, GA 30721

New Hope Middle School  
1111 New Hope Rd.  
Dalton, GA 3072

Valley Point Middle School  
3796 South Dixie Rd.  
Dalton, GA 30721

Westside Middle School  
580 LaFayette Rd  
Rocky Face, GA 30740

Eastbrook Middle School  
700 Hill Rd.  
Dalton, GA 30721

Dalton Junior High School  
1250 Cross Plains Trail  
Dalton, GA 30720

Coahulla Creek High School  
3361 Crow Rd. NE  
Dalton, GA 30721

The Dalton Academy  
1250 Cross Plains Trail  
Dalton, GA 30720

Dalton High School  
1500 Manly St  
Dalton, GA 30720

Northwest Whitfield High School  
1651 Tunnel Hill Varnell Rd.  
Tunnel Hill, GA 30755

Southeast Whitfield High School  
1954 Riverbend Rd.  
Dalton, GA 30721

Dalton State College  
650 College Dr.  
Dalton, GA 30720

Northwest Georgia College & Career  
Academy  
2300 Maddox Chapel Rd.  
Dalton, GA 30721



## Schools

Chatsworth Elementary School  
500 Green Rd.  
Chatsworth, GA 30705

Bagley Middle School  
4600 Hwy. 225 N  
Chatsworth, GA 30705

Coker Elementary School  
1733 Leonard Bridge Rd.  
Chatsworth, GA 30705

Gladden Middle School  
700 Old Dalton Ellijay Rd.  
Chatsworth, GA 30705

Eton Elementary School  
829 Hwy. 286  
Chatsworth, GA 30705

Murray County High School  
1001 Green Rd.  
Chatsworth, GA 30705

Northwest Elementary School  
110 McEntire Circle  
Chatsworth, GA 30705

North Murray High School  
2568 Mt. Carmel Church Rd.  
Chatsworth, GA 30705

Spring Place  
2795 Leonard Bridge Rd.  
Chatsworth, GA 30705

Pleasant Valley Innovative School  
273 Harris St.  
Eton, GA 30724

Woodlawn Elementary School  
4580 Hwy. 225 N  
Chatsworth, GA 30705

## Sources

### Mental Health

<https://www.hamiltonhealth.com/>

<https://www.adventhealth.com/hospital/adventhealth-murray>

<https://www.nghd.org/nghd-locations-listing/item/chatsworth-clinic>

<https://www.nghd.org/nghd-locations-listing/item/dalton-clinic>

<https://www.murraycountyga.org/357/Behavioral-Health-Development-Disabiliti>

<https://dbhdd.georgia.gov/locations/whitfield-treatment-services>

### Access to Care

<https://www.hamiltonhealth.com/>

<https://www.adventhealth.com/hospital/adventhealth-murray>

### Healthy Eating/Active Living

<https://www.hamiltonhealth.com/>

<https://www.adventhealth.com/hospital/adventhealth-murray>

### Socioeconomics

<https://www.murraycountyga.org/>

<https://www.whitfieldcountyga.com/>

### Substance Use Disorder

<https://medmark.com/medmark-treatment-centers-chatsworth/>

<https://www.myinnervention.com/>

<https://highlanddrivers.org/>

<https://www.hamiltonhealth.com/>

<https://www.adventhealth.com/hospital/adventhealth-murray>

### Chronic Disease Management

<https://www.hamiltonhealth.com/>

<https://www.adventhealth.com/hospital/adventhealth-murray>

### Schools

<https://www.murray.k12.ga.us/>

<https://www.wcsga.net/>

To update or add information, complete the form below

Name of Organization:

Contact Name:

Phone #:

Fax #:

Email:

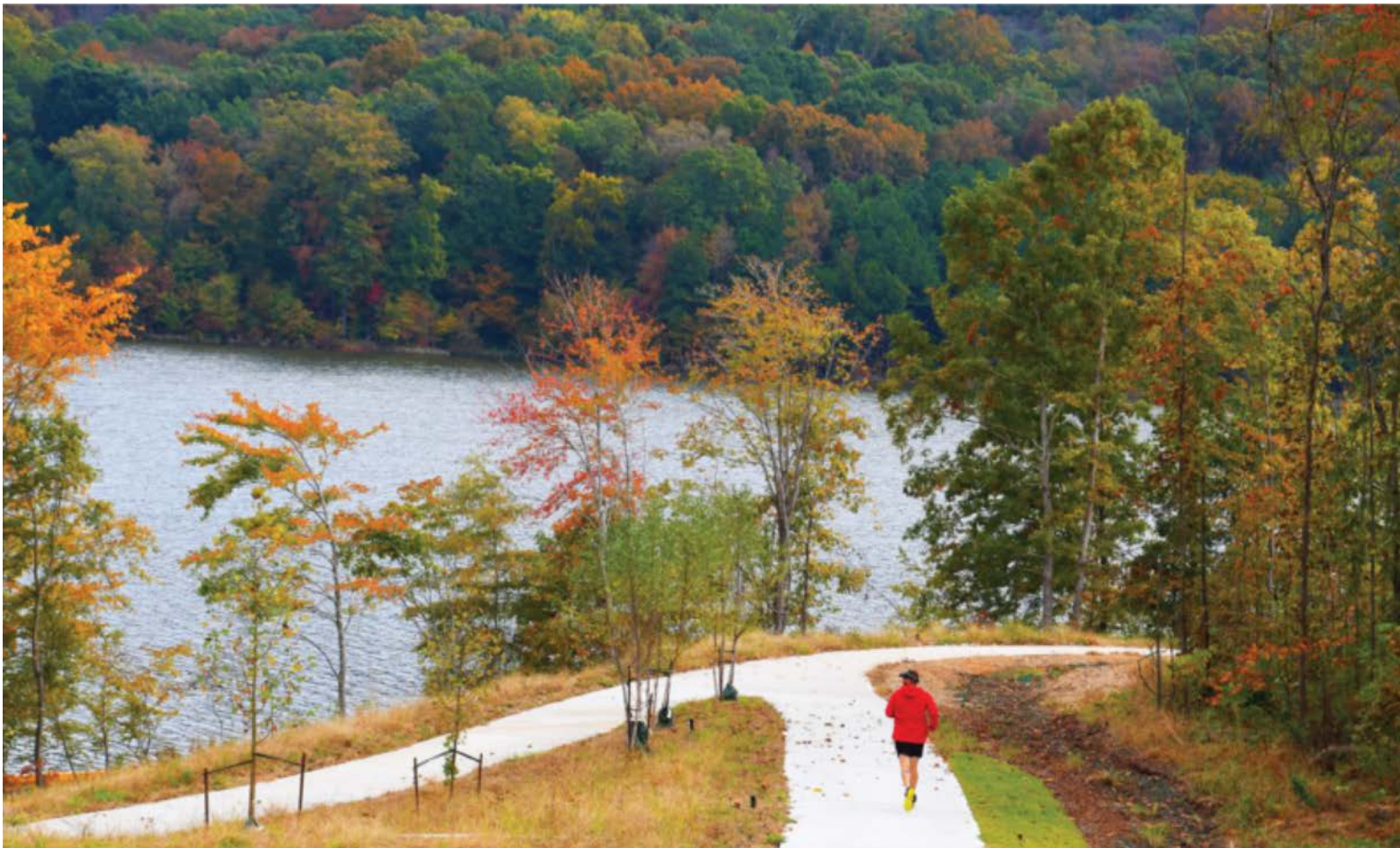
Web page:

Mailing Address:

List services:

Please describe your organization's purpose, services, etc.

Submit updated information to:  
Hamilton Health Care System Marketing Department



## Community Health Needs Assessment for Murray and Whitfield Counties

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*Completed in partnership with:*

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