



2025-2028

Community Health Needs Assessment

Bradley and Polk Counties, TN



Bradley Medical Center
Vitruvian Health

Paper copies of this document may be obtained at Bradley Medical Center 2305 Chambliss Avenue, Cleveland, TN 37311 or by phone 423.559.6000 or via the hospital website at <https://vitruvianhealth.com/about/chna-implementation-strategy/>

TABLE OF CONTENTS

Perspective / Overview	4
About Bradley Medical Center	4
Creating a Culture of Health in the Community	5
2025 Community Health Needs Assessment	5
Collaborators	5
Making the CHNA Widely Available to the Public	6
Board Approval	6
Key Findings	6
Significant Health Priorities	6
Community Input and Collaboration	6
Methods and Timeline	6
Participants by Those Representing the Broad Interests of the Community	7
Participants	7
Input of the Medically Underserved, Low-Income, and Minority Populations	8
Input of Those with Expertise in Public Health	8
Input on the prior CHNA Report and implementation plan (N/A)	8
Process and Methods Used	8
Community Selected for Assessment	9
CHNA Study Area – 2025	9
Data and Other Information Used in the Assessment	9
Information Gaps	10
Description of the Communities Served	11
Demographics Indicators	12
Socioeconomic Indicators	21
Focus Groups Summary	22
Community Survey Summary	24
Health Status Data and Comparisons	25
Health Status Data	27
Comparisons of Health Status	27
Health Outcomes (Length of Life and Quality of Life)	28
Community Conditions	31
Mapping Analyses	34
Summary of Primary and Secondary Data – Most Significant Health Needs	



TABLE OF CONTENTS

Results of the CHNA:	35
Prioritized Health Needs	35
Prioritization Criteria	36
Most Significant Community Health Needs – Prioritized	36
Community Health Summit Brainstorming	36
Impact of 2022 CHNA and Implementation Plan	37
Appendices	38
1. Focus Group Summary	39
2. Community Survey Results	46
3. Health Status Data Trended	61
4. Community Asset Inventory	74



PERSPECTIVE / OVERVIEW

About Bradley Medical Center

BradleyMedicalCenter (BMC), an affiliate of **Vitruvian Health**, is a not-for-profit hospital committed to delivering quality, innovative health care to the Cleveland community and surrounding areas. Our mission is simple yet powerful: to provide exceptional medical services with compassion, integrity, and excellence—every person, every time.

With 351 licensed beds across our main acute care hospital and Westside Campus, and over 20 access points in Cleveland and surrounding areas that include primary care, walk-in clinics, heart & vascular, orthopedics, infectious disease, outpatient therapy, wound center, behavioral health services, and neurology. BMC offers a comprehensive range of services through an experienced team of physicians, nurses, and caregivers. From preventive care and diagnostics to advanced treatment and rehabilitation, we are here to meet the diverse health needs of our community.

Excellence in Care & Accreditation

BMC is proud to be accredited by **The Joint Commission**, a reflection of our unwavering commitment to patient safety and quality outcomes. We are also recognized as:

- An **Accredited Chest Pain Center** by the *American College of Cardiology*
- An **Acute Stroke Ready Hospital** accredited by *The Joint Commission*
- Home to an **Orthopedic Joint Center** honored with The Joint Commission's **Gold Seal of Approval** and **Certificates of Distinction** for our *Total Knee and Total Hip Orthopedic Programs*
- **AACVPR** accredited Cardiac Rehab Program

These achievements highlight our dedication to clinical excellence, advanced technology, and continuous improvement.

Committed to Community Wellness

Beyond the walls of our hospital, BMC is an active partner in promoting community-wide health and wellness. Through outreach programs, educational initiatives, and preventive care services, we work to help our neighbors live healthier lives.

At Bradley Medical Center, you are more than just a patient—you are part of our family. We are honored to be your trusted partner in health.



Bradley Medical Center
Vitruvian Health

Creating a Culture of Health in the Community



Action Cycle Source: University of Wisconsin and 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 Bradley and Polk Counties, Tennessee. The Action Cycle shows how to create healthy communities. The measures later in the document assist in understanding what makes a healthy community.

2025 Community Health Needs Assessment

Collaborators

Bradley Medical Center, as the sponsor of the assessment, engaged national leaders in community health needs assessments to assist in the project. StrategyHealth, a healthcare consultancy based out of Nashville, Tennessee, provided analysis of community health data, facilitated the focus groups, 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.

Making the CHNA Widely Available to the Public Starting on 9/4/2025, this report is made widely available to the community via Bradley Medical Center's website <https://vitruvianhealth.com/about/chna-implementation-strategy/> or at the hospital 2305 Chambliss Avenue NW, Cleveland, TN 37311 or by phone 423.559.6000.

Board Approval

- The Bradley Medical Center, board of directors approved this assessment on 9/3/2025.

KEY FINDINGS

Significant Health Priorities

Based on secondary data, community surveys, and focus groups, the summit participants prioritized the following significant health needs to be the focus of the work of the community over the next three years. There is a complete summary of findings with prioritization criteria on page 36.

- Safe, affordable housing
- Jobs providing a living wage
- Language barriers
- Access to mental health care
- Access to affordable healthcare and insurance
- Access to quality, affordable childcare
- Transportation

Based on the health priorities above, Bradley Medical Center will focus on the three main issues that align with healthcare and support our mission: (1) language barriers, (2) access to mental health services, and (3) access to affordable healthcare and insurance.

COMMUNITY INPUT AND COLLABORATION

Methods and Timeline

In February 2025, Bradley Medical Center began a Community Health Needs Assessment for Bradley and Polk Counties and sought input from persons who represent the broad interests of the community using several methods:

- Information gathering, using secondary demographic, socioeconomic, and public health sources, occurred in April through May 2025.
- Forty-six community members and stakeholders participated in focus groups for their perspectives on community health needs and issues on May 29, 2025.
- One hundred and ninety-three community members completed an online survey from May 16 to June 20, 2025.
- A Community Health Summit was conducted on June 25, 2025, with thirty-three community stakeholders. The audience consisted of healthcare providers, employers, schools, not-for-profit organizations, government, the faith community, and other community members.



Participants by Those Representing the Broad Interests of the Community

Sixty-six individuals from forty-seven community organizations and community members collaborated to implement a comprehensive CHNA process focused on identifying and defining significant health needs, issues, and concerns of Bradley and Polk Counties. The three-month process centered on gathering and analyzing data, as well as receiving input from people who represented the broad interests of the community, to provide direction for the community and hospital to create a plan to improve the health of the communities.

Participants

Organization	Population Represented	Involvement	Focus
County Accent Care Home Health	Young Black males	All	Groups, Summit
Benton City Police Department	Low income Children/youth	All	Focus Groups
Bradley Cleveland Community Services Agency	All	All	Focus Groups, Summit
Bradley Cleveland Public Education Foundation	Children/youth	All	Summit
Bradley County EMS	All	All	Focus Groups
Bradley County Schools	Seniors	All	Summit
Bradley County Sheriff's Office	All	All	Focus Groups
Bradley Health Department	Hispanic community	All	Summit
Bradley Healthcare & Rehabilitation	Children/ Youth	All	Focus Groups
Bradley Medical Center	All	All	Summit
Broad St. United Methodist Church/Unity Center	All	All	Focus Groups
CASA	All	All	Focus Groups
City of Cleveland	Children/ Youth	All	Focus Groups
City of Cleveland Council	All	All	Focus Groups
City of Copperhill	Businesses	All	Focus Groups, Summit
City of Ducktown	For those in mental health crisis	All	Focus Groups, Summit
Cleveland City Schools	All	All	Focus Groups
Cleveland Fire Department	All	All	Summit
Cleveland/Bradley Chamber of Commerce	Youth Low-income, medically underserved	All	Focus Groups
Copper Basin Crisis Center	Students	All	Focus Groups, Summit
I.W.C. Church	Seniors	All	Summit
Junior Achievement	All	All	Focus Groups
Karis Community Health		All	Focus Groups
Lee University			
LifeCare Centers			
Mainstreet			

Medical Society	Providers	Focus Groups
Medical Society/Project Access	All/uninsured	Summit
New Hope Pregnancy Care Center	Women	Summit
Ocoee Regional Health Corporation	Low-income, TennCare, uninsured	Focus Groups, Summit
People Helping People	Low-income	Focus Groups, Summit
Polk County Chamber of Commerce	Businesses	Focus Groups, Summit
Polk County Executive	All	Focus Groups
Polk County Government	All	Focus Groups
Retired Physician	All/Hispanic community	Summit
Ronald McDonald House	Parents	Focus Groups, Summit
SE TN Project Access	Low-income, uninsured	Focus Groups, Summit
Signature Healthcare of Cleveland	All/seniors	Focus Groups, Summit
Tennessee Home Health	All	Focus Groups
The Caring Place	Low income	Focus Groups, Summit
The Salvation Army	Low income	Focus Groups
TN Home Health	All	Summit
United Way	All	Focus Groups, Summit
United Way of Ocoee Region	All	Focus Groups, Summit
UT Extension Polk	All	Focus Groups, Summit
YMCA	All	Focus Groups, Summit

In many cases, several representatives from each organization participated.

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

Input of medically underserved, low-income and minority populations was received through the focus groups, community survey, and the community health summit. Agencies representing these population groups were intentionally invited to the focus groups and summit.

Input of Those with Expertise in Public Health

Both the Bradley and Polk County Health Departments participated in the CHNA focus groups and summit where the significant health needs were prioritized.

Input on the Most Recently Conducted CHNA and Most Recently Adopted Implementation Strategy

Bradley Medical Center was for-profit until acquired by Vitruvian Health in August, 2024 and did not have a previous community health needs assessment.

PROCESS AND METHODS USED

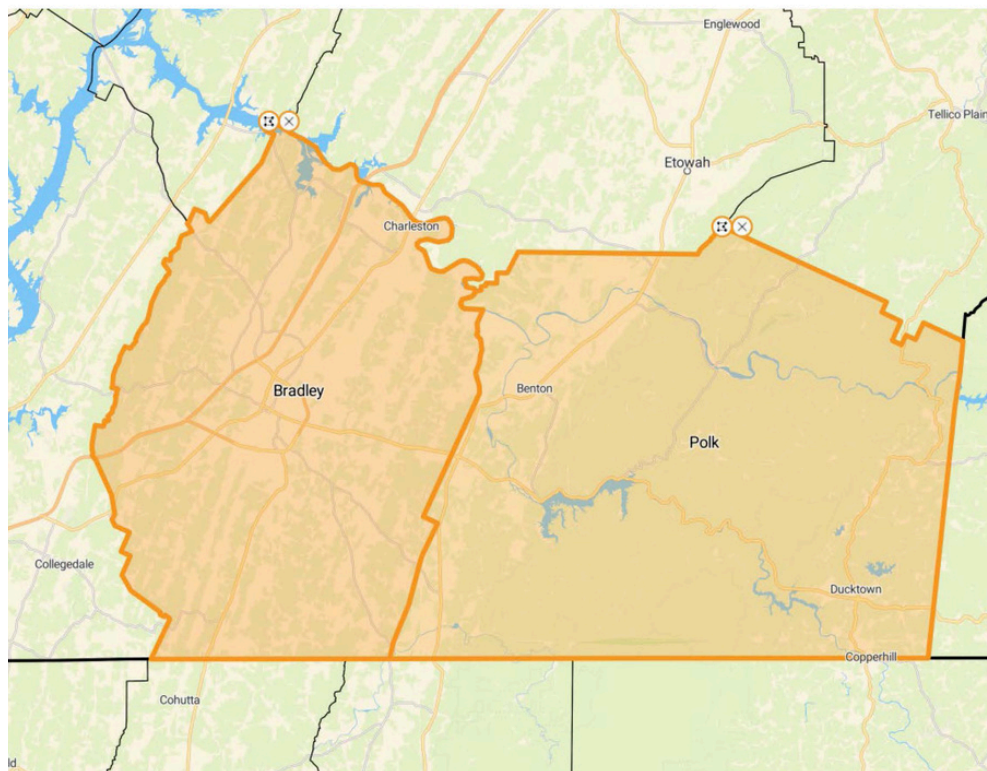
Community Selected for Assessment

Bradley and Polk Counties was the primary focus of the CHNA due to the service area of Bradley Medical Center. Used as the study area, Bradley and Polk Counties provided 86% of January 1, 2024, through December 31, 2024, inpatient discharges. The community includes

medically underserved, low-income, and minority populations who live in the geographic areas from which Bradley Medical Center draws their patients.

All patients were used to determine the service area without regard to insurance coverage or eligibility for financial assistance under Bradley Medical Center's Financial Assistance Policy.

CHNA Study Area – 2025



Data and Other Information Used in the Assessment

Primary methods included:

- Focus groups with community members and stakeholders
- Community survey
- Community Health Summit

Secondary methods included:

- Public health data – death statistics, County Health Rankings, cancer incidence
- Demographics and socioeconomic – population, poverty, uninsured, unemployment

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.



Bradley Medical Center
Vitruvian Health



Photo credit: Bradley Medical Center

DESCRIPTION OF THE COMMUNITIES SERVED



Bradley Medical Center
Vitruvian Health

Demographics Indicators

The following tables and graphs summarize the demographics of Bradley and Polk Counties compared to Tennessee and the U.S.

	Bradley Co.	Polk Co.	TN	USA
Population 2024	112,577	18,031	7,204,409	338,440,954
Population 2029	116,001	18,357	7,465,737	344,873,411
% Population Change 2024-2029	3.0%	1.8%	3.6%	1.9%
Percent of Population below 18	21.0%	18.1%	21.3%	21.0%
Percent of Population 18-64	60.0%	58.3%	60.4%	60.8%
Percent of Population 65+	19.0%	23.5%	18.3%	18.1%
Racial and Ethnic Make-up				
Non-Hispanic White	79.6%	92.5%	70.0%	56.3%
Non-Hispanic Black	4.8%	0.4%	15.5%	12.1%
Non-Hispanic Asian	0.2%	0.4%	2.1%	6.3%
Native American/Alaska Native	1.1%	0.2%	0.2%	0.7%
Pacific Islander	0.1%	0.1%	0.1%	0.2%
Two or More Races	5.1%	4.3%	4.1%	4.3%
Other Race	0.3%	0.1%	0.3%	0.5%
Hispanic Origin	8.6%	2.0%	7.6%	19.6%

Source: Esri



Bradley Medical Center
Vitruvian Health

Socioeconomic Indicators

	Bradley Co.	Polk Co.	TN	USA
Median ¹ Age 2024	40	47	40.3	39.1
Median Household Income 2024	\$68,962	\$59,389	\$69,015	\$75,149
Percent with Incomes Below the Federal Poverty Guideline	15.0%	15.0%	14.0%	11.5%
Percent of Asset Limited, Income Constrained, Employed (ALICE) HH	31%	29%	30%	29%
Percentage speaking a language other than English	8.7%	2.7%	7.8%	21.7%
% of Income for Mortgage	25.5%	17.3%	28.5%	25.6%
Population Receiving SNAP Benefits 2022	11.4%	12.8%	9.7%	12.5%
Percent Unemployed – 2024	4.8%	4.6%	3.5%	3.5%
Percent Uninsured	11.2%	12.9%	11.1%	11%
Percent with a Disability <age 65	12.1%	13.3%	10.7%	8.9%
% with a Bachelor's degree or higher by age 25	24.6%	14.7%	30.4%	35.0%

Source: Esri, Census Bureau, United Way

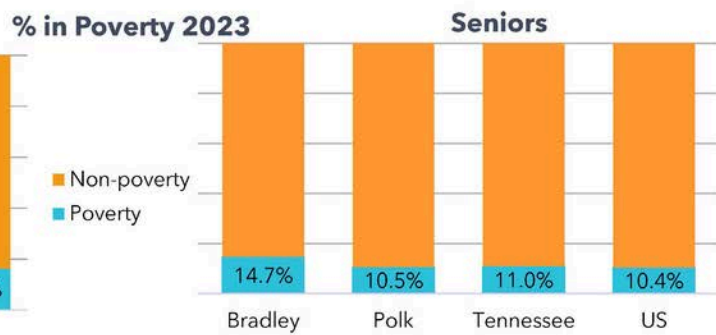
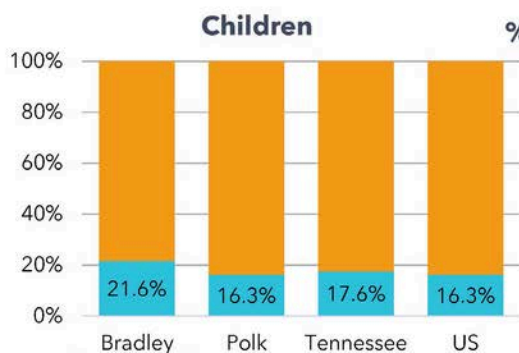
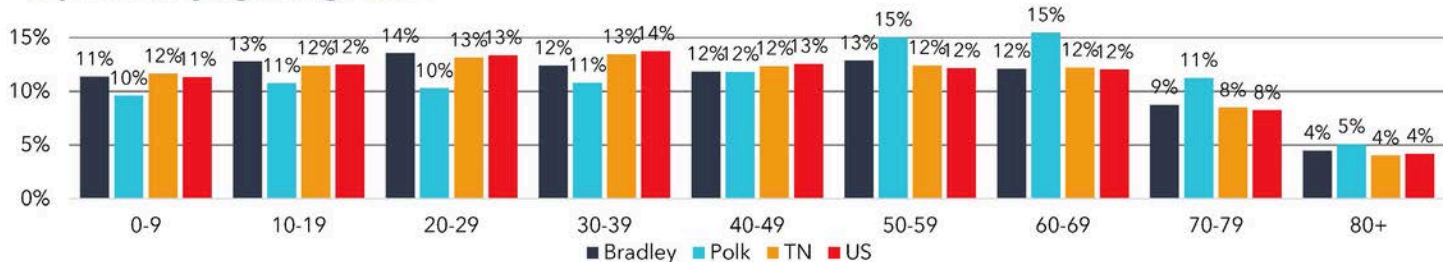
¹ The median is the value at the midpoint of a frequency. There is an equal probability

- Bradley County's population in 2024 was 112,577 and Polk's population in 2024 was 18,031. Polk has significantly less population than Bradley and is a larger County in square miles with 435 square miles with 40 people per square mile. Bradley County is 330 square miles with 301 people per square mile.
- The population of Bradley County is projected to increase 3.0% from 2024 to 2029, and Polk County is projected to increase 1.8% from 2024-2029. Tennessee is projected to increase 3.6%. The U.S. is projected to increase 1.9%.
- Bradley County had the same median age as TN (40.0) and slightly higher than the U.S. (39.1). Polk County had a higher median age (47) than Bradley County, Tennessee or the U.S. In Bradley County the percentage of the population 65 and over was 19.0%, higher than TN and the U.S. population 65 and over at 18.3% and 18.1% respectively. Polk County's population 65 and over was 23.5% higher than Bradley County's. Bradley County's percentage of the population below 18 at 21.0% was slightly lower than TN at 21.3% and the same at the U.S. Polk County's percentage below 18 was lower at 18.1%.
- Bradley County median household income at \$68,967 was lower than TN (\$69,015) and the U.S. (\$75,149). Polk County's median household income was lower than Bradley at \$59,389 and below TN and the U.S.

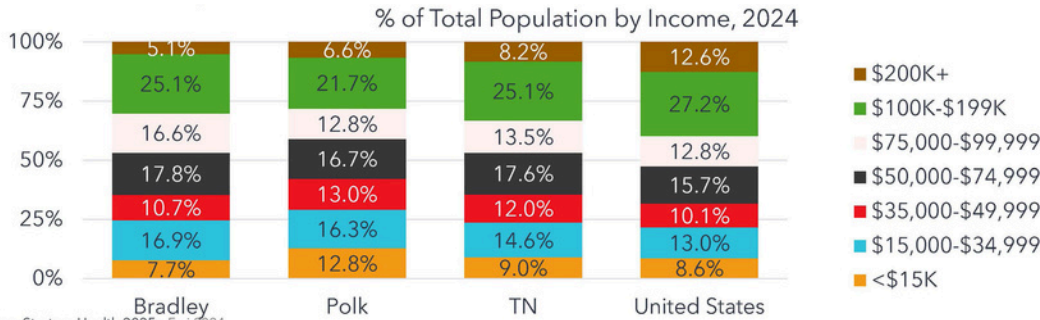
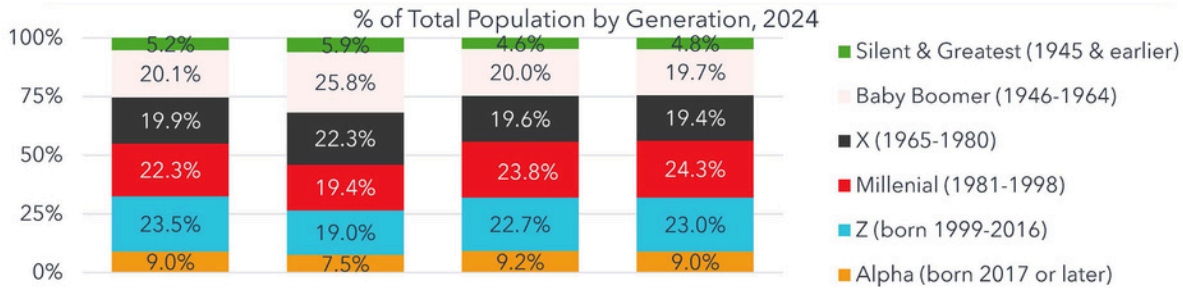


- The rates of poverty in Bradley and Polk Counties were 15.0% which was higher than TN (14.0%) and the U.S. (11.5%). The percent of asset limited, income constrained, and employed (ALICE) households in Bradley County was 31%, which was higher than TN at 30% and the U.S. at 29%. Polk County's percentage of ALICE households was 29% the same as the U.S.
- When the percentage in poverty and the ALICE households are combined, 46% of Bradley County and 44% of Polk County are low income households and below. The household income distribution of Bradley County was 30.2% higher income (over \$100,000), 45.2% middle income, and 24.6% lower income (under \$35,000). The household income distribution of Polk County was 28.3% higher income (over \$100,000), 42.6% middle income, and 29.1% lower income (under \$35,000).
- The racial and ethnic make-up of Bradley County was 79.6% Non-Hispanic White, 4.8% Non-Hispanic Black, 1.1% Native American/Alaska Native, 8.6% Hispanic origin, 5.1% more than one race, .5% other. The racial and ethnic make-up of Polk County was 92.5% Non-Hispanic White, 0.4% Non-Hispanic Black, 0.4% Asian, 2.0% Hispanic origin, 4.3% more than one race, .3% other.
- Bradley County's 2024 unemployment was 4.8% compared to 3.5% for Tennessee and 3.5% for the U.S. Polk County's 2024 unemployment was 4.6%.
- 11.4% of Bradley County received SNAP benefits compared to 9.7% of Tennessee and 12.5% for the U.S. in 2022. Polk County had 12.8% receiving SNAP benefits.

Population by Age Range 2024



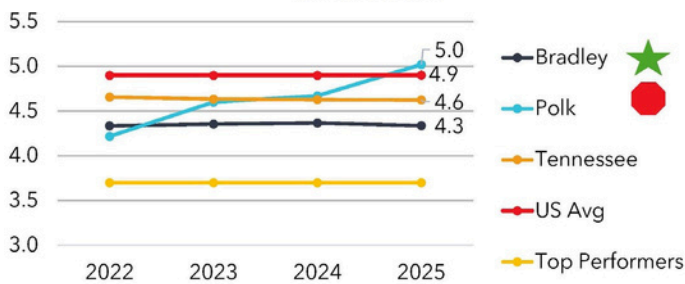
Source: Esri, ACS 2023 1-year estimates



Source: StrategyHealth 2025; Esri 2024

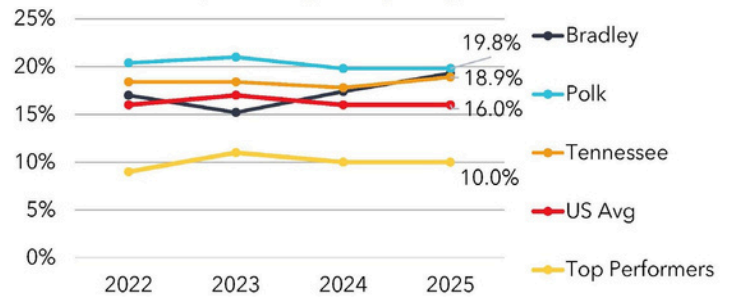
Income inequality

(ratio of HH income at the 80th percentile to income at the 20th percentile)
Lower is better



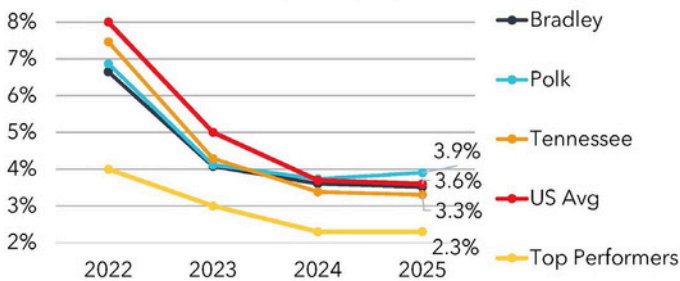
Children in Poverty

(% under age 18 in poverty)



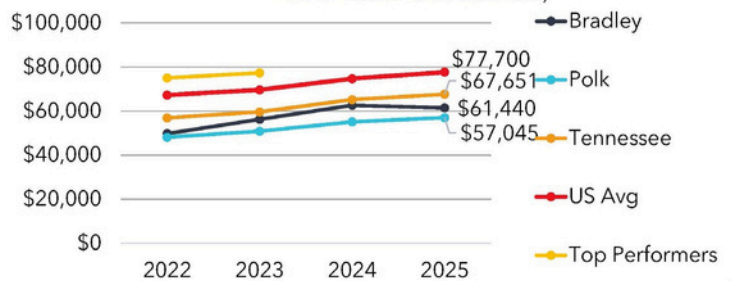
Unemployment

(% of population ages 16 and older unemployed but seeking work.)
Lower is better



Median HH income

(The income where half of households in a county earn more and half of households earn less)



Living wage

(The hourly wage needed to cover basic household expenses plus all relevant taxes for a household of one adult and two children)

	\$/hr.	If full time yearly wage
Bradley Co.	\$40.33	\$83,826
Polk Co.	\$38.23	\$79,518
Tennessee	\$47.86	\$99,549

Source: Living wage – Living Wage Institute, Inc. 2025

Source: Income inequality – American Community Survey, 2019-2023

Source: Children in poverty and median household income - Small Area Income and Poverty Estimates; American

Community Survey, five-year estimates, 2023 & 2019-2023

Source: Unemployment – Bureau of Labor Statistics, 2023



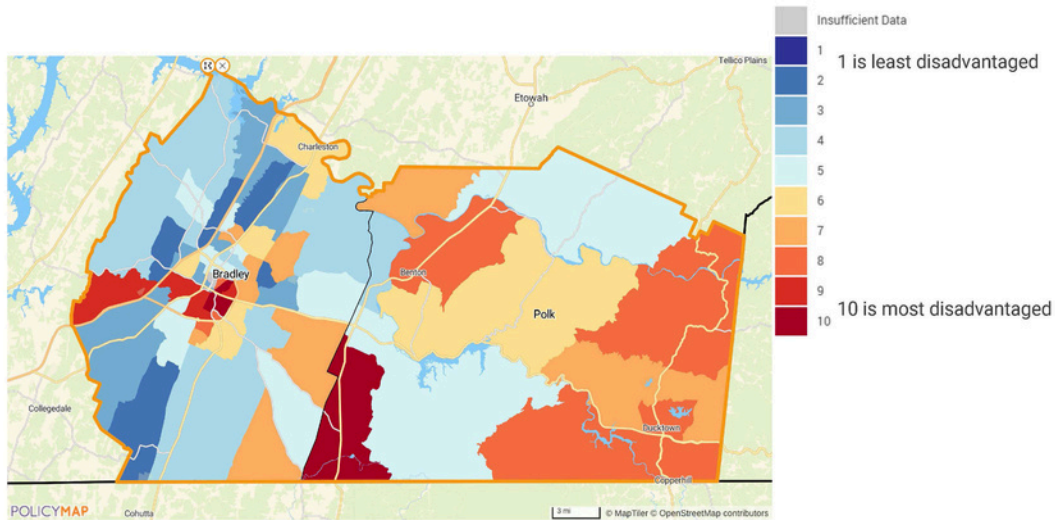
Bradley Medical Center
Vitruvian Health

Age Deprivation Index (by block group)

The area deprivation index is based on socioeconomic disadvantage in the areas of income, education, employment and housing quality. The block groups in the red are the most disadvantaged and would be a priority location for health improvement activities. Cleveland and southwest Polk County would be good places to begin efforts as they are the most disadvantaged.

Ranks Census block groups based on socioeconomic disadvantage in the areas of

- Income
- Education
- Employment
- Housing quality



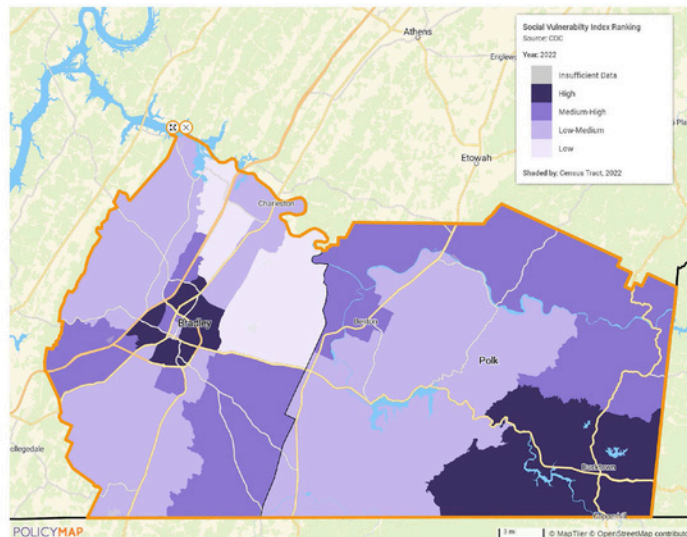
Source: StrategyHealth 2025; PolicyMap, University of Wisconsin, 2020

Source: StrategyHealth 2025; PolicyMap, University of Wisconsin, 2020

Social Vulnerability Index (by census tract)

Social vulnerability refers to the demographic and socioeconomic factors (such as poverty, lack of access to transportation, and crowded housing) that adversely affect communities that encounter hazards and other community-level stressors. These stressors can include natural or human-caused disasters (such as tornadoes or chemical spills) or disease outbreaks (such as COVID-19). The current CDC/ATSDR Social Vulnerability Index uses 16 U.S. Census variables from the 5-year American Community Survey (ACS) to identify communities that may need support before, during, or after disasters. These variables are grouped into four themes that cover four major areas of social vulnerability and then combined into a single measure of overall social vulnerability.

Social Vulnerability encompasses demographic and socioeconomic factors—such as poverty, limited access to transportation, and crowded housing—that make certain communities more susceptible to hazards and stressors



Source: StrategyHealth 2025; PolicyMap, CDC, 2022



Bradley Medical Center
Vitruvian Health



What the maps above demonstrate are the differences in disadvantaged and advantaged communities and those who are socially vulnerable and those who are not socially vulnerable within the counties. Although much of the public health data included in this report is at the county level, there are definite differences inside the county. The areas in and around Cleveland are more disadvantaged, more socially vulnerable, lower insured, with lower median household income than other parts of the county. It would be logical to conclude the health status of the population is lower than the other segments of the county. There is one census tract in Polk County that was most vulnerable in southeast Polk County.

Business Profile

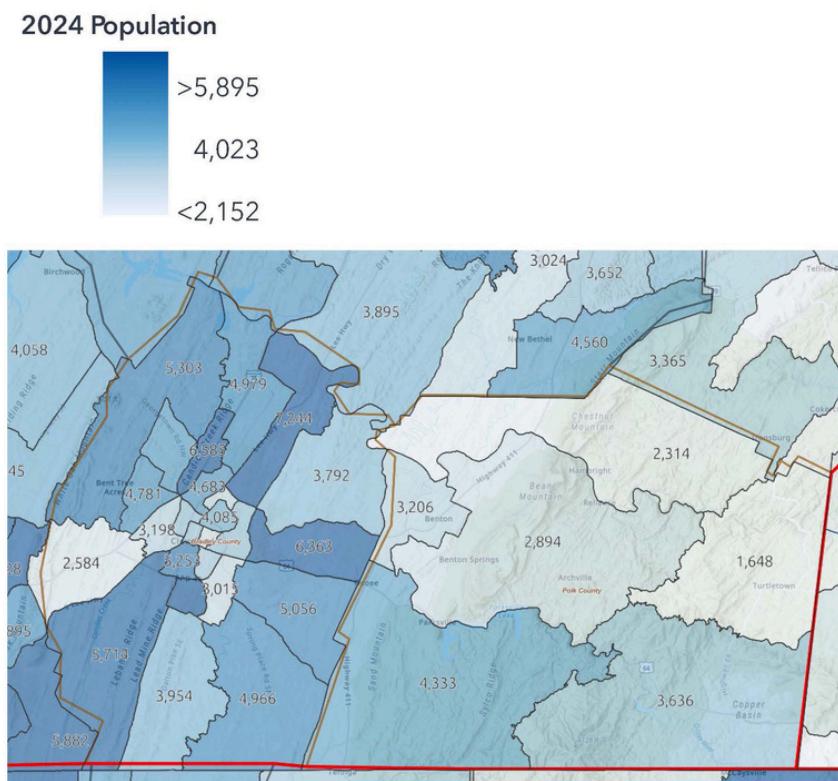
59% percent of employees in Bradley County and 57% Polk Counties were employed in:

- Manufacturing (20% both)
- Retail trade (12%, 9%)
- Health Care & Social Assistance (11%, 15%)
- Education (10%, 7%)
- Accommodation & food services (6% both)

Source: ACS, 2023

Retail and food service jobs offer health insurance at a lower rate than healthcare, education, and manufacturing jobs.

2024 POPULATION BY CENSUS TRACT

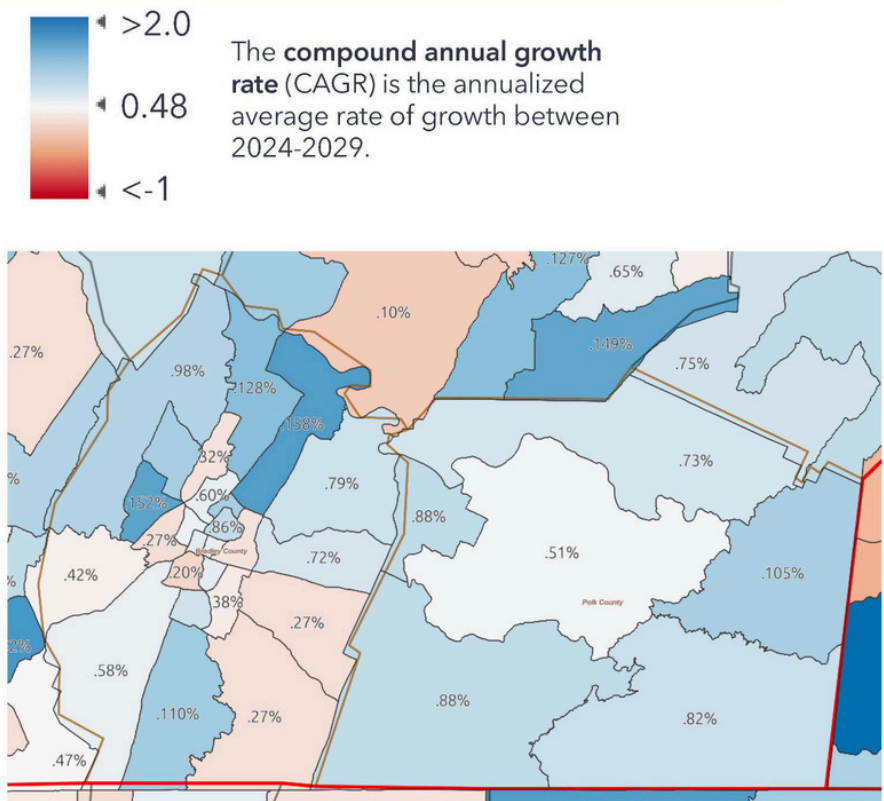


Source: Esri

Source: Esri

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. This can be seen by looking at the census tracts in and around Cleveland in Bradley County which are smaller in size and highly populated compared to the larger census tracts in the outlying areas with similar population numbers.

Population Change 2024-2029



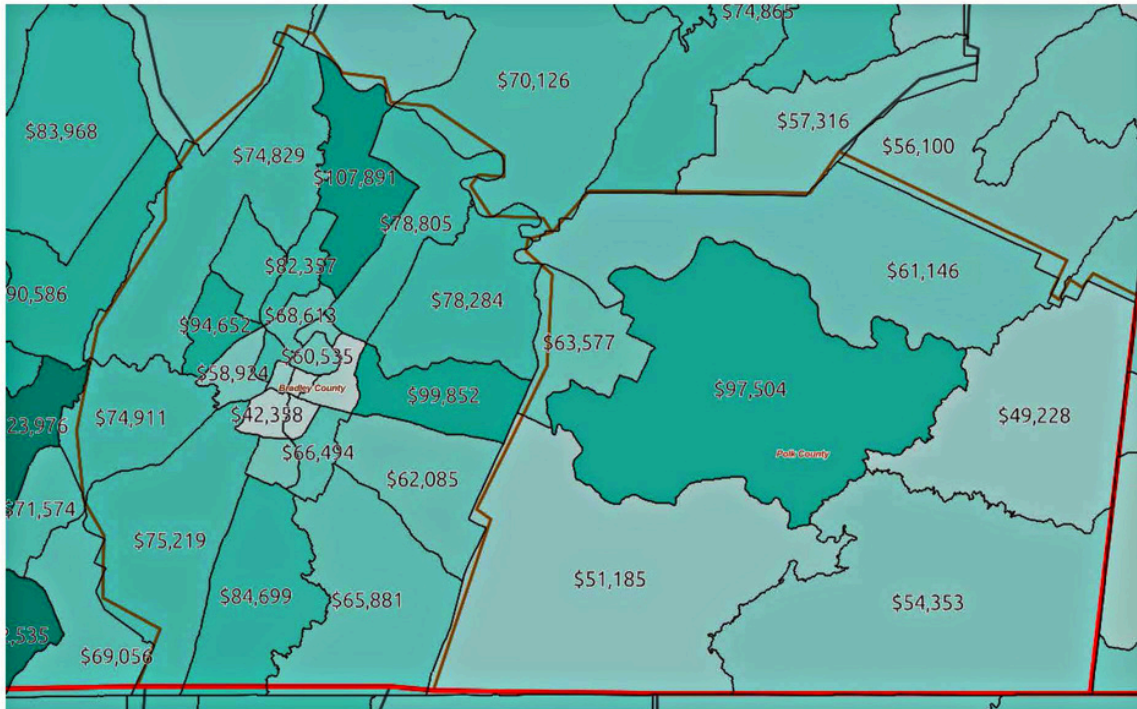
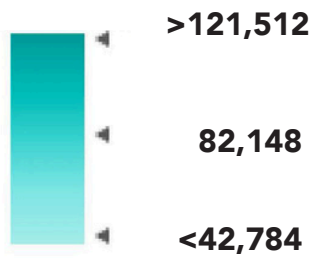
Source: Esri

Source: Esri

Both counties are projected to increase in population. Even looking at projected population change by census tract shows the darker blue areas which are projected to grow the most and the pink areas are projected to grow the least.

2024 Median Household Income

2024 Median Household Income

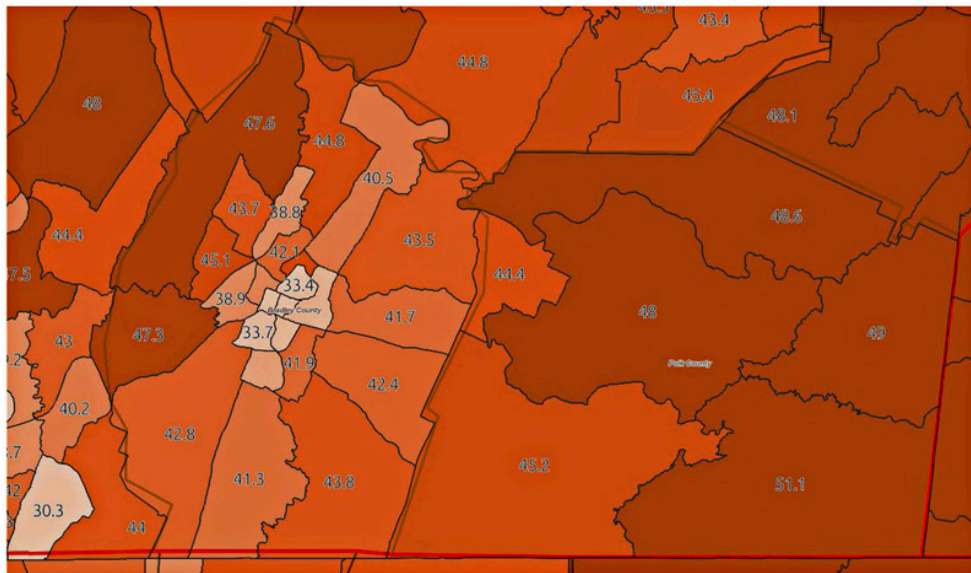
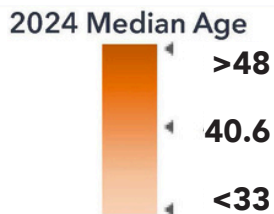


Source: Esri

Looking at age and income by census tract is helpful to demonstrate all areas of a county are not the same and will therefore have differing health needs. Looking at median household income by census tract gives insight into health status. The lower income areas may have compromised health status compared to the higher income tracts. There is one census tract north of Cleveland with a median household income of \$108,000 higher median household incomes and may have different needs than the tracts in and around Cleveland making \$42,000 median household income. The tract in central Polk County had higher income (\$98,000) than all the other census tracts in Polk County.



2024 Median Age



Source: Esri

Health needs may be very different in the dark orange census tracts with higher median ages than the tracts in Cleveland with median ages in the 30s. Polk County has very high median ages, the southeast tract was the oldest with a median age of 51.

FOCUS GROUP SUMMARY

Community stakeholders representing the broad interests of the community as well as those representing low income, medically underserved, and minority populations participated in focus groups on May 29, 2025, for their input into the community's health. Community participation in focus groups represented a broad range of interests and backgrounds. Below is a summary of the focus groups.

“Make having a physician, a dentist, and a therapist normalize d.”

The participants defined health as physical, mental, financial and spiritual health and wellbeing as well as quality of life, mind, body and overall access to resources. They believe health status is a spectrum with most being more unhealthy and the divide is between the haves and have nots and ability to address their issues.

Significant health issues listed from focus groups included:

- Access to providers
- Access to care – providers, distance to hospitals (Polk), dental care, paramedics
- Access to insurance which prevents access to care, prevention, primary care
- Transportation
- Mental health resources
- Housing- Quality, homeless
- Substance use disorder

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

- Improve access to care – be able to go to any provider and insurance to pay, provide mobile doctors to rural areas, more social workers, more specialists, hold health fairs with support of churches
- Improve culturally appropriate care – help minorities enter the healthcare professions
- Increase access to mental health resources
- Increase access to substance use disorder resources
- Improve transportation
- Increase safe, affordable housing – more resources for the homeless, build affordable housing
- Better awareness of resources – create a comprehensive resource guide with a description of the services provided in an app that can be on a phone
- Increase access to fruits and vegetables – build a grocery store in Ducktown, teach cooking
- Increase childcare – especially for shift work

Others

- Create a trauma informed community
- Better, safer roads
- Broadband and cell coverage county-wide
- Eliminate fear so people can seek healthcare

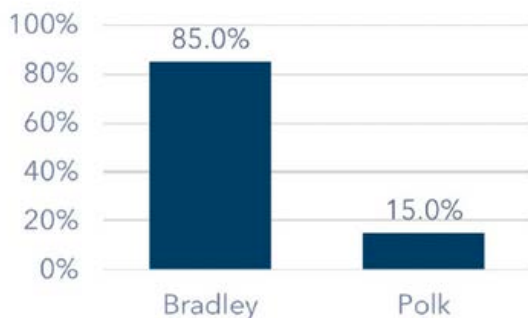


Bradley Medical Center
Vitruvian Health

COMMUNITY SURVEY SUMMARY

One hundred and ninety-three people from both Bradley and Polk Counties responded to the online survey. There are limitations with online surveys, particularly reaching those without an Internet connection. Surveying began on May 16 and concluded on June 20, 2025. The completed surveys yield an error rate of +/-6.9%.

A complete summary is available in appendix 3. The survey composition followed the population proportions.



The community strengths were:

- Dental health
- Most would be comfortable getting mental health
- 93% of respondents do not smoke tobacco or use smokeless tobacco and 91% do not use e-cigarette or vape.
- Most are satisfied with their job
- Most households have enough money to pay for basic needs
- The community is a good place to raise children
- Most have reliable transportation
- Most have close friends, family or supports they can depend on
- Most feel safe in the community

The weaknesses or opportunities were:

- Physical activity – 44% do not exercise regularly.
- Amount of sleep
- Nutrition
- Respondents were less aware of mental health resources available and how to access mental health resources
- 57% know someone who experienced substance use disorder or addiction. 23% of the time treatment was not available.
- 6% live 11 or more miles from a grocery store.
- 42% of respondents spend 30% or more of HH income on their rent or mortgage
- Many believe buying fruits and vegetables is not affordable
- 30% do not believe there are opportunities for people like them to gather in the community
- 41% do not believe



The most significant health needs are:

- Substance use
- Safe, affordable housing
- Jobs providing a living wage
- Homelessness
- Healthy weight
- Access to quality mental health services
- Access to affordable health insurance
- Access to affordable healthcare

The most significant health needs for children are:

- Healthy diet Social media
- overuse Physical activity
- Affordable, quality childcare
- Responsible involved parents
- Healthy weight Meals in
- school
-

The healthcare, health education, or public health services or programs respondents would like to see in the community are:

- Healthcare resources for the uninsured or poor
- Affordable healthcare
- Affordable insurance
- Mental health services
- Senior services/elderly services
- Diet/nutrition education
- Exercise resources/fitness center
- Preventive services
- Increased access to primary care

The most needed specialists in the counties were:

- Obstetrics/gynecology
- Endocrinology
- Psychiatry
- Family Medicine
- Otolaryngology
- Primary care nurse practitioners/physician assistants
- Cardiology
- Emergency Medicine
- Neurology





Photo credit: Bradley Medical Center

HEALTH STATUS DATA AND COMPARISONS



Bradley Medical Center
Vitruvian Health

HEALTH STATUS DATA AND COMPARISONS

Health Status Data

The 2025 CountyHealthRankings study performed by the Robert Wood Johnson Foundation and the University of Wisconsin2, analyzes community conditions such as health infrastructure, physical environment and social and economic factors and how they contribute to health outcomes or population health and well-being measured by length and quality of life. To become the healthiest community in TN and eventually the nation, Bradley and Polk Counties must close several community condition gaps.

County Health Rankings suggested the areas to explore for improvement in Bradley (B) and Polk (P) Counties were:

- Uninsured (B,P)
- High school completion (B,P)
- Population to primary care physicians (P)

The strengths were:

- Food environment index (P)
- Preventable hospital stays (P)
- Social associations (P)
- Access to exercise opportunities (B)
- Some college (B)
- Income inequality (B)

When analyzing the health status data, county results were compared to TN, the U.S., and the top 10% of counties in the U.S. (the 90th percentile) (where available). For additional perspective, TN was ranked the 44th healthiest state out of the 50 states. (Source: 2024 America's Health Rankings; lower is better) TN challenges were:

- High premature death rate
- High prevalence of multiple chronic conditions
- High occupational fatality rate

The strengths were:

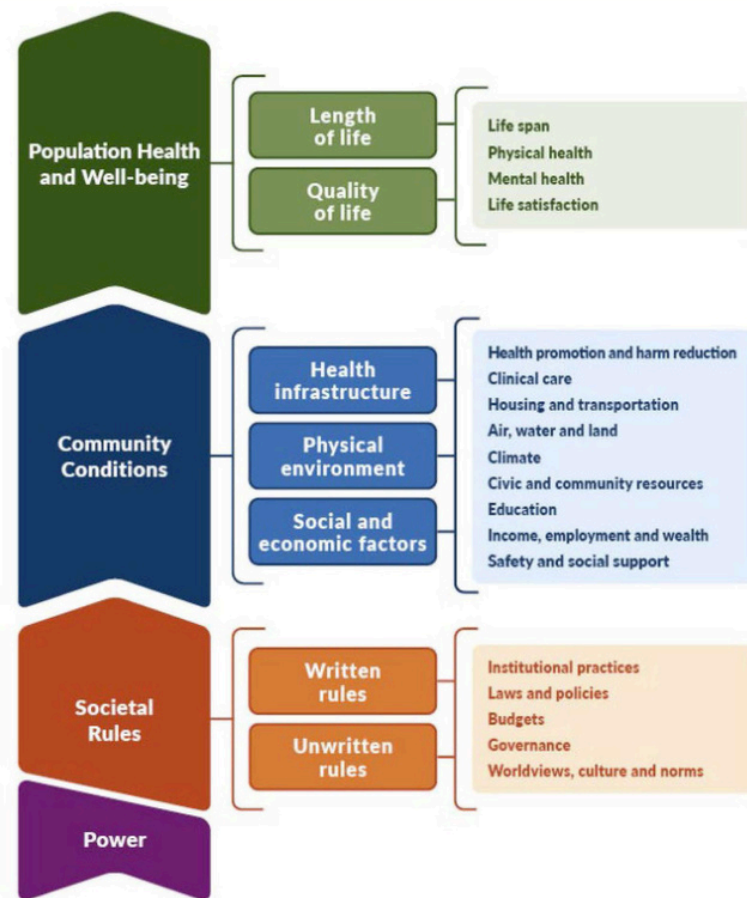
- Low prevalence of excessive drinking
- High number of primary care providers per 100,000
- Low average number of health-based drinking water violations



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 data below, such as causes of death, demographics, socioeconomics, and primary research. If a measure was better than TN, it was identified as a strength, and where an indicator was worse than TN, it was indicated as an opportunity for improvement. To prevent strengths from becoming opportunities for improvement, it’s important to continually focus on them.

² 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 measure the health of Tennessee’s counties every year since 2003.

Although not all of the health status data was derived from County Health Rankings, the data is organized using the following model focusing on community conditions such as health infrastructure, physical environment, and social and economic factors and their contribution to population health and well-being which is measured by length and quality of life.



University of Wisconsin Population Health Institute Model of Health © 2025

Comparisons of Health Status

The following tables compare Bradley and Polk Counties to TN and the U.S. for health outcomes and community conditions. The trend column indicates whether the trend is increasing or decreasing, green indicates improvement, red indicates decline. If the trend cell is empty, there is no change over the last four years or the metric is a point in time. Trended graphs are available in Appendix 5.



Health Outcomes (Length of Life and Quality of Life)

Health Outcomes are a combination of length of life and quality of life measures. Health outcomes tell us how long people live on average within a community and how much physical and mental health people experience in a community while they are alive.





Indicators	Trend	Bradley	Polk	TN	U.S.	Description
Length of Life						
Premature death		10,765	14,384	11,636	8,400	Years of potential life lost before age 75 per 100,000 population (age-adjusted). 2020-2022
Life expectancy		73.7	70.7	73.5	77.1	Average number of years people are expected to live. 2020-2022
Infant mortality		3.7	NA	6.8	6.0	Number of infant deaths (within 1 year) per 1,000 live births. 2016-2022
Child mortality		40.3	68.3	65.7	50.0	Number of deaths among residents under age 20 per 100,000 population. 2019-2022
Quality of Life						
Physical Health						
Poor or fair health		19.7%	21.6%	19.2%	17%	Percentage of adults reporting fair or poor health (age-adjusted). 2022
Poor physical health days		4.7	5.3	4.7	12%	Average number of physically unhealthy days reported in past 30 days (age-adjusted). 2022
Frequent physical distress		13.7%	15.7%	14.6%		Percentage of adults reporting 14 or more days of poor physical health per month (age-adjusted). 2022
Low birth weight babies		8.1%	9.1%	8%	10%	Percentage of live births with low birth weight (< 2,500 grams or 5lbs 8oz) 2017-2023
Diabetes prevalence		11.5%	12.2%	13.0%		Percentage of adults aged 20 and above with diagnosed diabetes (age-adjusted). 2022
Adult obesity		39.2%	37.6%	39.1%	34%	Percentage of the adult population (age 18 and older) that report a body mass index (BMI) greater than or equal to 30 kg/m ² (age-adjusted). 2022
HIV prevalence		141.3	154.4	324.2	387	Number of people aged 13 years and older living with a diagnosis of human immunodeficiency virus (HIV) infection per 100,000 population. 2022
Cancer incidence		437.9	448.3	457.3	444.4	Incidence rates (cases per 100,000 population per year) age-adjusted. 2017-2021
Sexually transmitted infections		320.0	145.6	538.1	495.0	Number of newly diagnosed chlamydia cases per 100,000 population. 2022
Mental Health						
Poor mental health days		6.4	6.7	6.3	5.1	Average number of mentally unhealthy days reported in past 30 days (age-adjusted). 2022
Frequent mental distress		20.4%	22.2%	21.3%	16%	Percentage of adults reporting 14 or more days of poor mental health per month (age-adjusted). 2022

Community Conditions

Community conditions include the social and economic factors, physical environment and health infrastructure in which people are born, live, learn, work, play, worship and age. Community conditions are also referred to as the social determinants of health. (County Health Rankings, 2025)

Indicators	Trend	Bradley	Polk	TN	U.S.	Description
Health Infrastructure						
Substance Misuse						
Excessive drinking		17.6%	18.0%	18.1%	19%	Percentage of adults reporting binge or heavy drinking (age-adjusted). 2022
Adult smoking		17.8%	22.8%	19.2%	13%	Percentage of adults who are current smokers (age-adjusted). 2022
Alcohol impaired driving deaths		28.1%	36.0%	24.6%	26%	Percentage of driving deaths with alcohol involvement. 2018-2022
Drug overdose deaths		39.4	22.9	51	31.0	Number of drug poisoning deaths per 100,000 population. 2020-2022
Healthy Eating/Active Living						
Physical inactivity		24.6%	28.9%	26.5%	23%	Percentage of adults age 18 and over reporting no leisure-time physical activity (age-adjusted). 2022
Access to exercise opportunities		78.4%	65.6%	67.9%	84%	Percentage of population with adequate access to locations for physical activity. 2024, 2022 & 2020
Food environment index		6.8	7.8	6.4	7.4	Index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best). 2019 & 2022
Food insecurity		15.5%	15.9%	14%	14%	Percentage of population who lack adequate access to food. 2022
Limited access to healthy foods		12.4%	1.9%	8.9%	6%	Percentage of population who are low-income and do not live close to a grocery store. 2019
Insufficient sleep		38.1%	40.3%	40%	37%	Percentage of adults who report fewer than 7 hours of sleep on average (age-adjusted). 2022
Access to Care						
Primary care physicians		2,079	2,963	1,437	1,330	Ratio of population to primary care physicians. 2021
Dentists		2,087	2,977	1,779	1,360	Ratio of population to dentists. 2022
Mental health providers		660	3,607	500	300	Ratio of population to mental health providers. 2024
Other primary care providers		685	949	542	710	Ratio of population to primary care providers other than physicians. 2024
Uninsured		11.2%	12.9%	11.1%	10%	Percentage of population under age 65 without health insurance. 2022
Uninsured children		5.5%	6.5%	5.3%	5%	Percentage of children under age 19 without health insurance. 2022
Uninsured adults		13.3%	15.0%	13.2%	11%	Percentage of adults under age 65 without health insurance. 2022



Prevention						
Mammography screening		40.0%	37.0%	44%	44%	Percentage of female Medicare enrollees ages 65-74 who received an annual mammography screening. 2022
Flu vaccines		44%	41%	49%	48%	Percentage of fee-for-service (FFS) Medicare enrollees who had an annual flu vaccination. 2022
Preventable hospital stays		2,985	2,344	2,828	2,666	Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees. 2022
COVID vaccines		43.2%	42.3%	56.4%	70%	Percentage of fully vaccinated recipients. May 2023
Teen births		22.4	32.7	23.1	16	Number of births per 1,000 female population ages 15-19. 2017-2023
Physical Environment						
Drinking water violations		No	No			Indicator of the presence of health-related drinking water violations. 'Yes' indicates the presence of a violation, 'No' indicates no violation. 2023
Air pollution particulate matter		7.9	7.0	7.0	7.3	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5). 2020
Broadband access		87.9%	83.9%	87.4%	90%	Percentage of households with broadband internet connection. 2019-2023
Childcare centers		8.9	7.3	9.0	7	Number of child care centers per 1,000 population under 5 years old. 2010-2022
Long commute-driving alone		29.9%	51.4%	36.4%	37%	Among workers who commute in their car alone, the percentage that commute more than 30 minutes. 2019-2023
Access to parks		23%	59%	26%	51%	Percentage of the population living within a half mile of a park. 2024 & 2020
Library access		<1	2	1	2	Library visits per person living within the library service area per year. 2022
Housing						
Severe housing cost burden		12.6%	9.4%	12.3%	15%	Percentage of households that spend 50% or more of their household income on housing. 2019-2023
Severe housing problems		12.9%	11.5%	12.3%	17%	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities. 2017-2021
Home ownership		67.5%	84.1%	67%	65%	Percentage of owner-occupied housing units. 2019-2023
Social & Economic Factors						
Economic Stability						
Median HH income		\$68,962	\$59,389	\$69,015	\$75,149	The income where half of households earn more, and half of households earn less. 2024
Unemployment		4.8%	4.6%	3.5%	3.6%	Percentage of population ages 16 and older unemployed but seeking work. 2024
Poverty		15.0%	15.0%	14.0%	11.5%	Percentage of population living below the federal poverty line. 2023
ALICE HH		31%	29%	30%	29%	Percentage of households who are asset limited, income constrained, employed. 2022
Children in poverty		21.6%	16.3%	17.6%	16.3%	Percentage of people under age 18 in poverty. 2023 & 2019-2023

Seniors in poverty		14.7%	10.5%	11.0%	10.4%	Percentage of people 65 and over in poverty. 2023
Income inequality		4.3	5.0	4.6	4.9	Ratio of household income at the 80th percentile to income at the 20th percentile. 2019-2023 (lower is better)
Living wage		\$40.33	\$38.23	\$47.86		The hourly wage needed to cover basic household expenses plus all relevant taxes for a household of one adult and two children. 2024
Childcare cost burden		27%	22%	22%	28%	Childcare costs for a household with 2 children as a percent of median household income. 2023, 2024
Residential segregation – black/white		47.5	NA	67.0	63.0	Index of dissimilarity where higher values indicate greater residential segregation between Black and White county residents. 2019-2023
Educational Attainment						
School funding adequacy		\$621	\$1,016	\$44	\$1,411	The average gap in dollars between actual and required spending per pupil among public school districts. Required spending is an estimate of dollars needed to achieve U.S. average test scores in each district. 2022
3 rd grade math scores		2.9	3.2	3.0	3.0	Average grade level performance for 3rd graders on math standardized tests. 2019
3 rd grade reading level		3.1	3.0	3.0	3.1	Average grade level performance for 3rd graders on English Language Arts standardized tests. 2019
High school completion		88.4%	85.7%	89.6%	89%	Percentage of adults ages 25 and over with a high school diploma or equivalent. 2019-2023
Some college		61.1%	50.8%	63.4%	68%	Percentage of adults ages 25-44 with some post-secondary education. 2019-2023
Family & Social Engagement						
Children in single-parent HH		24.7%	26.2%	27.3%	25%	Percentage of children that live in a household headed by a single parent. 2019-2023
Social associations		14.0	14.6	11.0	9.1	Number of membership associations per 10,000 population. 2022
Lack of social & emotional support		29%	28%	28%	25%	Percentage of adults reporting that they sometimes, rarely, or never get the social and emotional support they need. 2022
Voter turnout		57.1%	61.7%	60.1%	67.9%	Percentage of citizen population aged 18 or older who voted in the 2020 U.S. Presidential election. 2020 & 2016-2020
Census participation		68.1%	43.6%		65.2%	Percentage of all households that self-responded to the 2020 census (by internet, paper questionnaire or telephone). 2020
Community Safety						
Homicide rate		4.5	10.0	9.6	7.0	Number of deaths due to homicide per 100,000 population. 2016-2022
Firearm fatalities		14.5	25.5	20.3	13.0	Number of deaths due to firearms per 100,000 population. 2018-2022
Motor vehicle crash deaths		12.5	27.6	17.2	12.0	Number of motor vehicle crash deaths per 100,000 population. 2016-2022
Injury deaths		91.4	110.2	115.5	84.0	Number of deaths due to injury per 100,000 population. 2018-2022

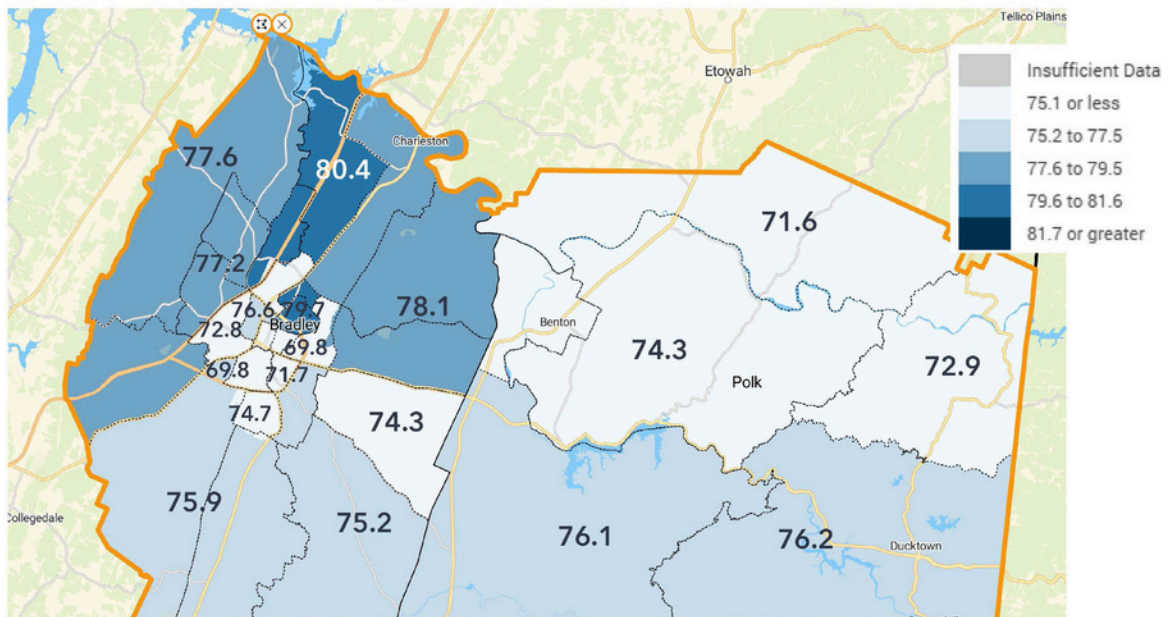


Mapping Analyses

The following maps show the significant differences in populations by census tract within the county. Much of the demographic and health status data is available by county and it is beneficial to see differences by geographic location to enact local solutions.

Life expectancy was different in several census tracts within the counties. The darker the color the longer life expectancy. The census tract north of Cleveland and one just to the north of Cleveland had a longer life expectancy (80.4 and 79.7) than the census tracts in most of Bradley County in the low to mid 70s. Southern Polk County can expect to live 76.1 and 76.2, but the northern tracts are in the low 70s. Where you live may affect your chances of living a long, healthy life. Different neighborhoods may have different access to stable housing, quality schools, good jobs, and affordable healthcare. Medical history is important, but much of health begins at home. ([Robert Wood Johnson Foundation](#))

Life Expectancy at Birth

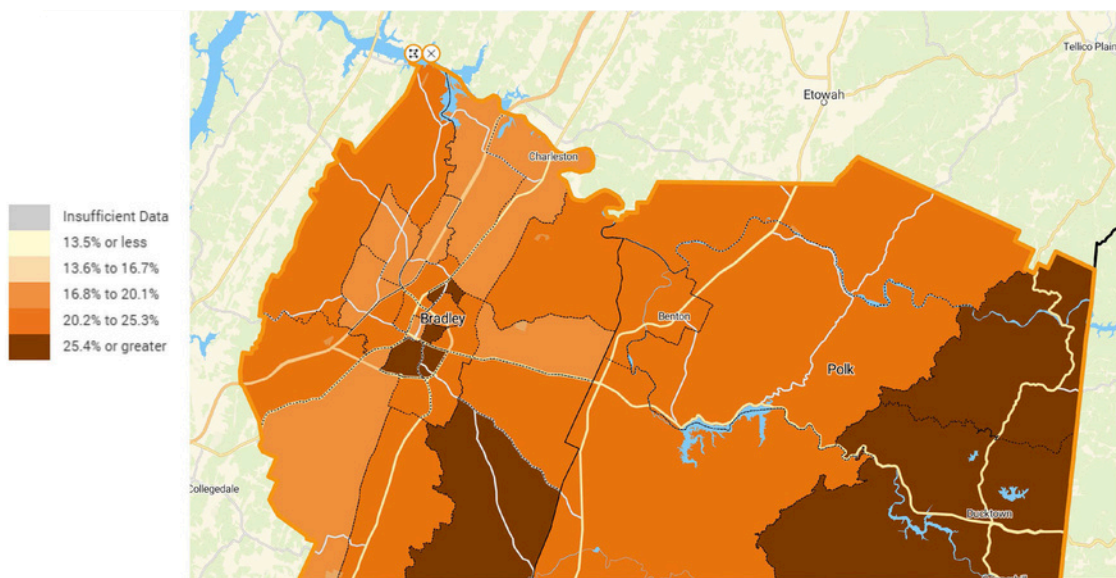


Source: CDC, Census Bureau 2010-2015



Percentage in Fair or Poor Health (by census tract)

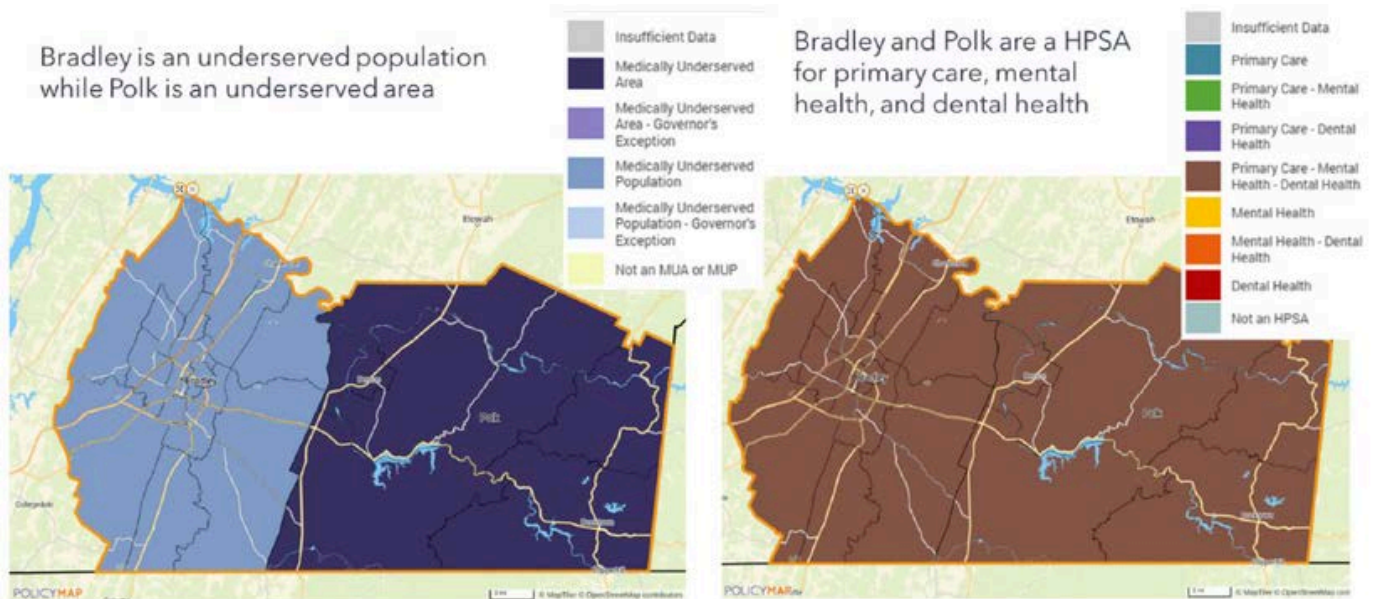
The darker the color the larger the percentage of adults self-reporting poor or fair health. Census tracts in and to the south of Cleveland had the lower health status. The eastern tracts in Polk County had the larger percentages of fair or poor health.



Source: CDC, Places, 2022

Medically Underserved Area and Health Professional Shortage Area

Bradley County is an underserved population, and Polk is an underserved area according to the Health Resources and Services Administration (HRSA). Bradley and Polk are both primary care, mental health, and dental health professional shortage areas.



Summary of Primary and Secondary Data – Most Significant Health Needs

The chart below summarizes all the primary and secondary data revealing the significant health needs in the community. These needs were used to create the list the health summit participants used to prioritize the most significant health needs.

United Way Priorities

- Access to quality childcare
- Access to healthcare
- Mental health & substance abuse
- Domestic violence
- Transportation
- Aging Population
- Affordable housing

Surveys

- Substance misuse
- Safe, affordable housing
- Jobs providing a living wage
- Unhoused
- Healthy eating/active living
- Healthy weight
- Access to mental health
- Access to affordable health insurance
- Access to affordable healthcare
- Affordable quality childcare
- Social media overuse

Secondary Data

- High population to primary care physicians (Polk)
- High school completion (both)
- Uninsured (both)

Focus Groups

- Access to providers
- Lack of insurance
- Substance use
- Mental health
- Dental care
- Transportation
- Internet access
- Healthy eating/food insecurity, food deserts
- Homelessness
- High cost of care and insurance
- Access to medications
- Health literacy
- Safe affordable housing
- Developmental disorders





Photo credit: Bradley Medical Center

RESULTS OF THE CHNA: PRIORITIZED HEALTH NEEDS



Bradley Medical Center
Vitruvian Health

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.

Magnitude	How big is the problem? How many individuals does the problem affect, either actually or potentially?
Seriousness of the Consequences	What would happen if the issue were not made a priority?
Equity	Does this affect one group more than others?
Feasibility	Is the problem preventable? How much change can be made? What is the community's capacity to address it?

Most Significant Community Health Needs – Prioritized

Based on the secondary data, community surveys, and community focus groups using the criteria above, community stakeholders selected the following significant health needs in the counties. They voted using Mentimeter, a phone app for voting, selecting three priorities. The issues with the most votes are listed below with the number of votes received.

1. Safe, affordable housing
2. Jobs providing a living wage
3. Language barriers
4. Access to mental health care
5. Access to affordable healthcare and insurance
6. Access to quality, affordable childcare
7. Transportation

Based on the health priorities above, Bradley Medical Center will focus on the three main issues that align with healthcare and support our mission: (1) language barriers, (2) access to mental health services, and (3) access to affordable healthcare and insurance.

Community Health Summit Brainstorming

Once the stakeholders prioritized the most significant health issues, the five table groups discussed what might be done to improve the top health issues. The feedback from the brainstorming will be instrumental in developing the CHNA implementation plan to address the health needs identified.

Impact of 2022 CHNA and Implementation Plan

Bradley Medical Center was for-profit until August 1, 2024 and did not conduct a community health needs assessment prior to 2025.



Bradley Medical Center
Vitruvian Health



Photo credit: Bradley Medical Center

APPENDICES

1. Focus Group Summary
2. Community Survey Results
3. Health Status Trended Data
4. Community Asset Inventory

1. FOCUS GROUP SUMMARY

Community stakeholders representing the broad interests of the community as well as those representing low income, medically underserved, and minority populations participated in focus groups on May 28, 2025, for their input into the community's health. Below is a summary of the focus groups.

1. How do you define health?

- Quality of life
- Mental and physical wellbeing
- Being able to complete activities of daily living
- Resources available to maintain health
- Absence or management of disease
- Physical, mental, financial, and spiritual wellbeing
- Body and mind care
- Overall access to resources
- SDoH quality of life

2. For the purposes of this CHNA, the community is Bradley and Polk Counties, generally, how would you describe the community's health?

- Spectrum – some very healthy and some not. The percentage healthy is smaller than the percentage of not healthy.
- Moderate
- Big divide between the haves and have nots and ability to address their issues

3. What are the biggest health needs, concerns or issues for the community today?

a. Access to affordable care

- Access to providers
- No walk-in clinic
- Nearest hospital to east Polk is 20-30 minutes Murphy
- Karis Medical serves uninsured, Dental through Smiles 62+
- Not enough emergency response resources; lack of paramedics
- Dental care
- People use 911 for primary care
- Using the emergency department for primary care
- Lack of primary care providers for the uninsured or Medicaid and diseases progress to later stages before they get care



- Even if you have insurance, healthcare is very difficult to navigate
- If people don't have a PCP don't get to see specialists
- Some can't afford to travel to get care, put it off, then have a heart attack and air lifted with a huge bill
- Ambulance cost is very high

b. Access to insurance

- Uninsured can't get preventive screenings; even with insurance can't get prevention
- Medicaid eligibility is harder in Tennessee, so some move to Georgia to qualify for Medicaid
- TennCare and private insurance companies not paying for care across state lines is a big issue
- Access to medication with and without insurance
- Dental care for the uninsured – Karis dental waitlist is 13 weeks. Dental care is the 3rd health issue in the Caring Place needs analysis
- Growing number of uninsured and will grow with proposed federal budget cuts
- Medical debt is the number one cause of bankruptcy in Tennessee
- Insurance processes are moving targets for the state and federal governments

c. Transportation

- Transportation especially for the East Side
- Lack of transportation to get to appointments
- SETHRA fully staffed and underutilized resource. People don't know about them

d. Mental health

- Mental health providers lacking
- Mental health resources
- Prescription access to mental health drugs
- Mental health services for front line front responders and social workers. Help those helping others. Keep from burning out.
- Some get insurance on the Market Place, and it is easier to get mental health care if you're uninsured; also they find that no provider takes their insurance

e. Substance use disorder

- Substance abuse services lacking
- Drug use
- Opioid crisis – getting addicted to prescribed painkillers

f. Poverty and lack of resources

- Some won't go to a provider because they're going to tell them to do something they can't afford to do
- Fair amount of homelessness
- Homelessness – living in cars, hotels, shelter, couch surfing high schoolers; healthcare access for homeless
- Lack of water and electricity in some homes
- Low tax base, low resources
- People not feeling they can deal with health because they're worried about housing and food



g. Cancer

- Disproportionately high rates of cancer due to previous environmental issues
- Cancer – those who worked in the mines; cancer progresses because it wasn't found early

h. Others

- Unincorporated areas are so rural, they're lucky to have a gas station - UTC mobile MOC moving into the community - Internet access - Food desert relying on the Dollar General in Benton - Uneducated about health in general, missing in society in general. Men especially not getting screened and going to wellness appointments - People moving into the area and don't understand the needs - Lifeforce for the city of Ducktown - Allergies - Housing - Bariatric transportation

4. What are the most important health issues facing various populations?

a. Low-income populations, medically underserved?

- Drug use
- Living in substandard conditions
- Affordable housing, landlords
- Can't even find a place to live that is habitable
- Lack of resources and lack of ability to plan
- Health via policing; can't get to court and end up back in the system
- Poverty breeds poverty – cyclical issues, 5th or 6th generation poverty cycle

b. Minority populations:

- Same as everyone else
- Very small Hispanic population, African American and Mixed-race population facing all the issues just mentioned and
- Hispanic population won't seek any help
- Latino population works hard to support their family and may not have documentation, can't buy insurance, no social security number. They won't visit the hospital or a doctor because they don't have documents.
- Hispanic population don't call 911 unless someone is actively dying, language, fear, how to pay, ICE; they wait until the last possible minute
- Kids with Hispanic background born in the U.S. are losing their TennCare. Don't know why.
- Tension is increasing in the Hispanic population with depression and helping them cope with the current environment.
- Mistrust
- Lack insurance
- Would be helpful to see providers who look like them, black and Hispanic. It would build trust



c. Children/youth:

- Lack of access to food. Lots of food programs in the county – United Way, Y, Boys and Girls Club, distribute back packs
- Mental health – schools have counselors in the schools dealing with parents on drugs
- Neglect
- Kids not getting good nutrition even with resources due to busy lives and eating fast food
- Coordinated school health reported the following issues: cholesterol, blood pressure, diabetes and obesity in children
- Lack of physical activity
- Don't have any pediatricians
- Lost some vital resources like community pool
- *Kids' parents are on drugs and no access to mental health for the kids*
- *Schools identify mental health issues in kids, but there's no time to get mental health care*
- *Dental care*
- *Kids displaying autism or behavior disorder need a diagnosis to get help. There is a 3-5 year waiting list to get diagnosed.*
- *20% non English speaking population in schools and 28 languages spoken in Cleveland County schools.*
- *Mental health issues seen early in elementary students*
- *Elderly grandparents taking care of kids*
- *When law enforcement is called to a home and only the child speaks English, this causes trauma for the child.*
- *8- and 9-year-olds vaping, gateway drug marketed to kids and so easy to switch to something else*
- *Not enough resources for kids*
- *Kids are a good metric for the health of the community; kids are the best opportunity to be proactive to improve health*

d. Seniors:

- Largest population, lots of retirees with good incomes
- Retired people want access to healthcare
- Some have second homes in Copper Hill, but residents of another state
- Providing resources for the rest of the family; example five people living in the household and living off of the senior's check
- Raising grandchildren
- Isolated – nowhere to gather which leads to deteriorated mental health
- Loneliness
- Medicare doesn't pay enough for medications even with Part D; seniors can't pay for their medications
- Seniors need educated on insurance options
- *Homeless seniors who live on someone's couch. Can't get appropriate care.*
- *The income limit was raised for qualification for Medicaid so seniors lost their dual coverage.*



- Seniors can't afford healthcare with Medicare alone, the copay or the medicines.
- Seniors are choosing to keep their electricity on or taking their medications
- Can't get primary care providers and long specialist wait times and chronic diseases are exacerbated
- Transportation
- Don't have family to rely on
- BCCS has spent over \$1M in seven months on senior assistance with utilities and it is hard to be out of funds.
- More people are dying of Alzheimer's than breast cancer
- Dementia
- Caregiver resources

5. a. When people in your community think about chronic diseases or cancer, what kinds of concerns or support needs come up?

- Transportation
- Education
- No oncologists; have to go to Cleveland
- Medical management
- Paying for treatment
- Some might seem non-compliant but they're deciding to pay for medications or electricity

b. Who do they turn to for help or information

- Social media – ask questions about issues that need medical attention
- See Go Fund Me daily to pay for healthcare.

6. What environmental factors have the biggest impact on community health?

- Industry in the past poisoned the water, air. The county looked like Mars. Now doing some reclamation. Still concerns about the water.
- Dumping waste in Polk County – smells, pollutes the water
- Copper Hill is an island; have to go to Cleveland or Benton. They're cut off with bio hazards
- A lot of wells and those with problems with wells and can't afford to fix them
- Old water infrastructure in the cities Copper hill and Benton. If a waterline busts, commerce ceases
- Lack of regulation in the city hadn't been enforced

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

- Don't have large employers, just small employers like Crystal Geysers with 90 employees
- Seasonal tourist employment
- Lack of knowledge of local resources



8. What community assets support health and wellbeing?

- Have people that care
- Caris provides care for those below 200% of the poverty level and are uninsured.
- Health Department – hiring an Alzheimer’s coordinator
- United Way has a resource line 800-8008 to help people find local resources
- Interagency group
- Health Council – We have an opportunity to get all agencies on board
- Handle with Care program where first responders notify the school of kids who are having a rough time.

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

- We need to be able to go wherever needed and insurance pay
- Reopen Copper Basin Medical Center
- Get more higher paying jobs and industry
- Get a mobile doctors office for rural areas
- Broadband and cell coverage countywide
- Build a grocery store in Ducktown for best access
- Teach people to cook
- Affordability of fresh fruits and vegetables; healthy food costs more; bad food is cheaper
- Affordable housing options could grow the population
- Better, safer roads, 64
- Large County mostly natural forest, 60% right through the middle of the county creates a barrier, different demographics and even temperatures are different
- More resources for homeless population, don’t have a warming shelter, no resources
- Mental health resources
- Substance abuse resources
- Opioid addiction selling drugs to pay the light bill or feed their children
- Countywide stray animal problem, biting people, attacks; no shelter or animal control
- There are challenges and lots of resources. First responders need more trained social workers. Need a community paramedic program. EMS gets more training and education to provide in-home care very beneficial, fewer ED visits, 911 calls, and hospital readmissions. Connects people to resources.
- Need a comprehensive resource guide in paper and online to help connect people to resources.
- Hold a health fair all agencies working together to help people
- Work together to eliminate fear for people to seek healthcare
- Create a trauma informed community
- Support minority communities to grow their own medical professionals, teachers, fire fighters, law enforcement, etc. Support their education.
- Start with leaders to ensure all are working and talking together and get resources
- Go into all communities with many health fairs with the support of local churches
- All resources available for everyone

- Build capacity in resources to be able to serve more people
- Stable, affordable housing
- Transportation
- Childcare – manufacturing and shift work, so need after hours child care
- Add more specialists in town so don't have to travel to Chattanooga and Knoxville.
- Build a medical mall like Erlanger with all healthcare specialists available to communicate with each other.
- Don't compete with existing resources work together
- Individualized case management to help navigate resources
- Pilot program in Chattanooga that pairs social work interns with fire department

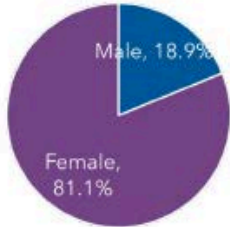


2. COMMUNITY SURVEY RESULTS

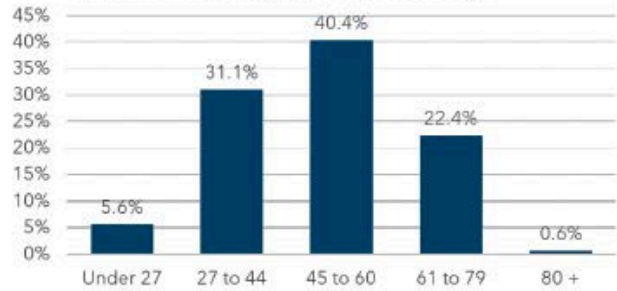
Below are the results of the survey.

Survey Demographics

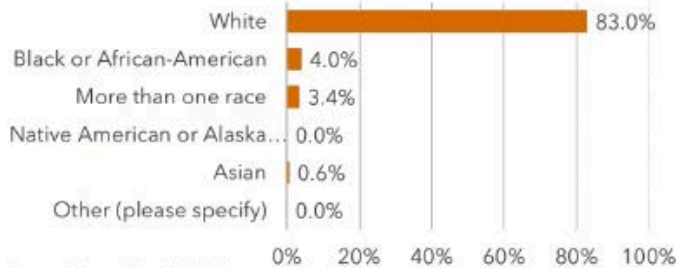
What is your gender?



Which of the following ranges includes your age?



How would you best describe yourself?



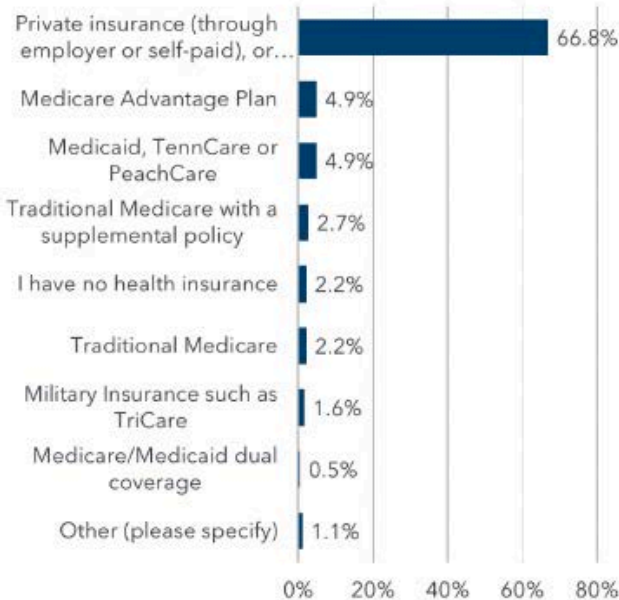
Are you of Hispanic/Latino/Spanish origin?



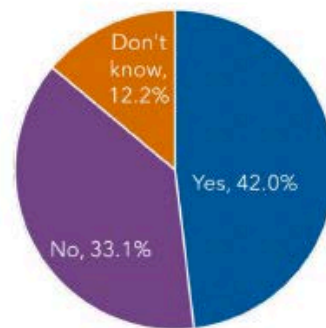
Source: StrategyHealth 2025;

11

Which of the following best describes your health insurance situation?



Do you have a high-deductible health plan?



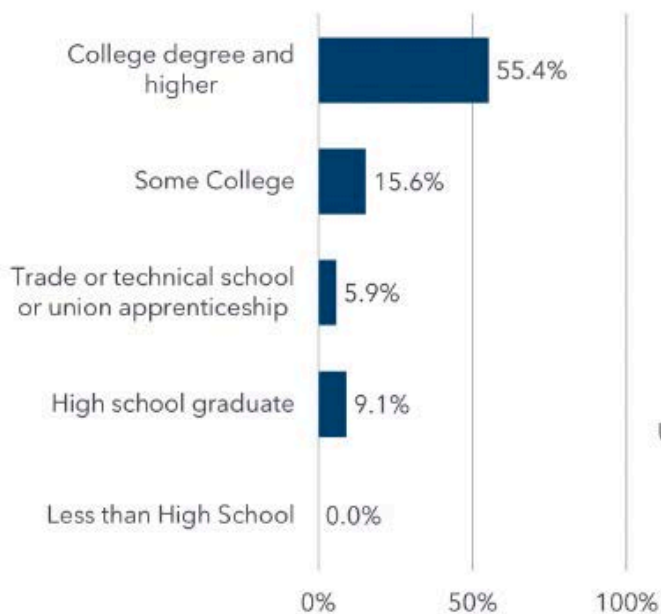
Source: StrategyHealth 2025;

12



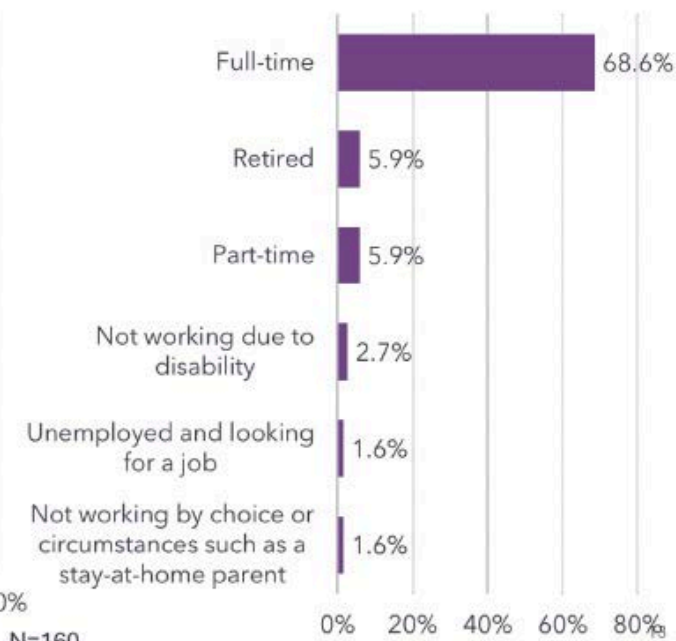
Bradley Medical Center
Vitruvian Health

Q43. What formal education have you completed?



Source: StrategyHealth 2025;

Q44. What is your current employment status?



N=160

Q 45. Which of the following includes your annual household income?

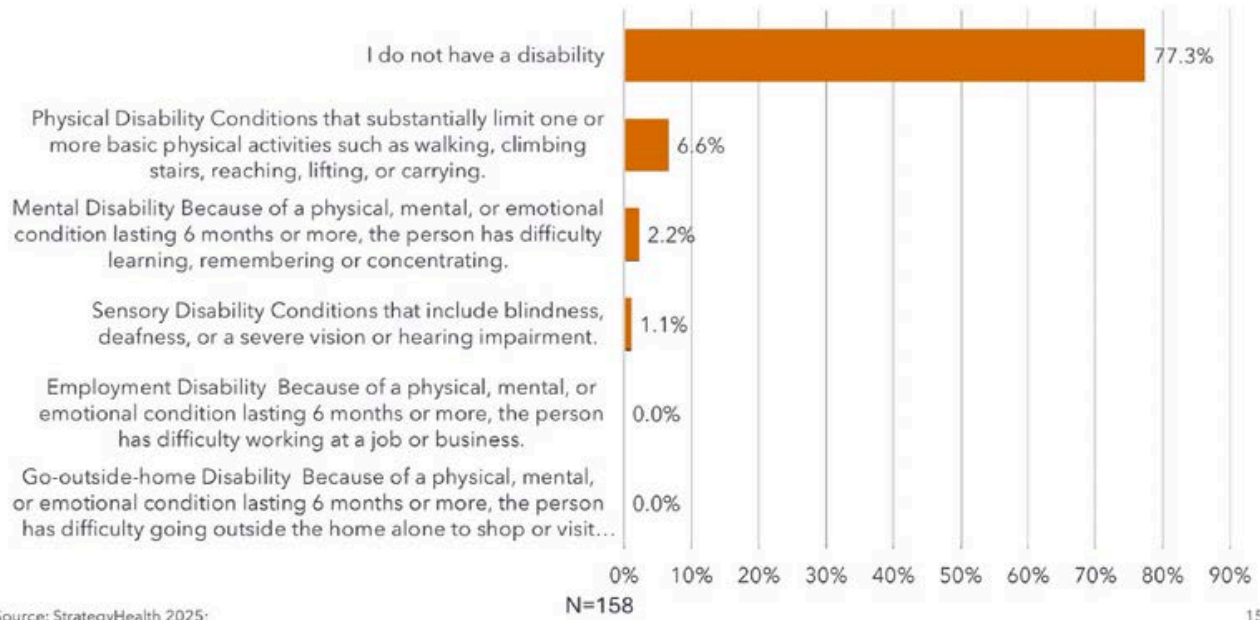


Source: StrategyHealth 2025;

N=156

14

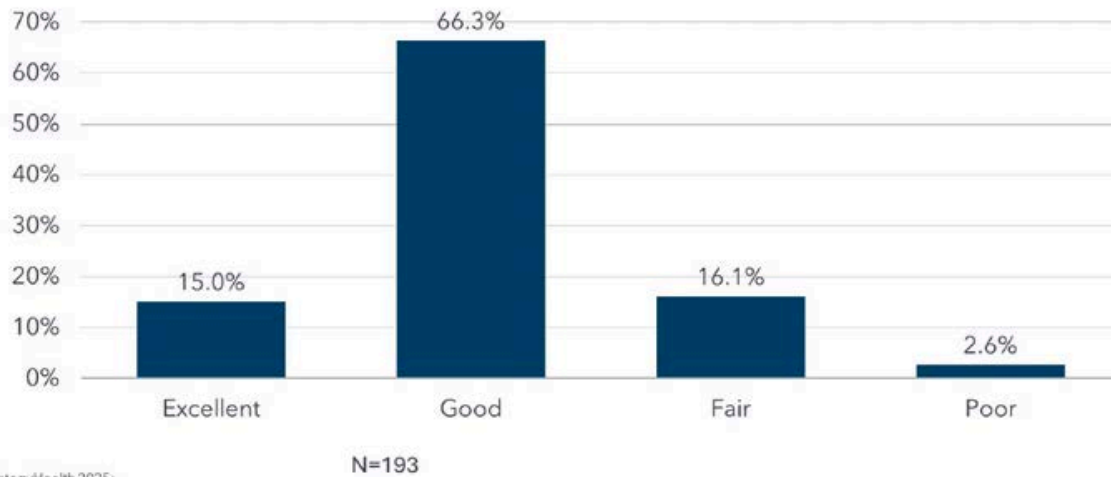
Q 48. What is your disability status?



15

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

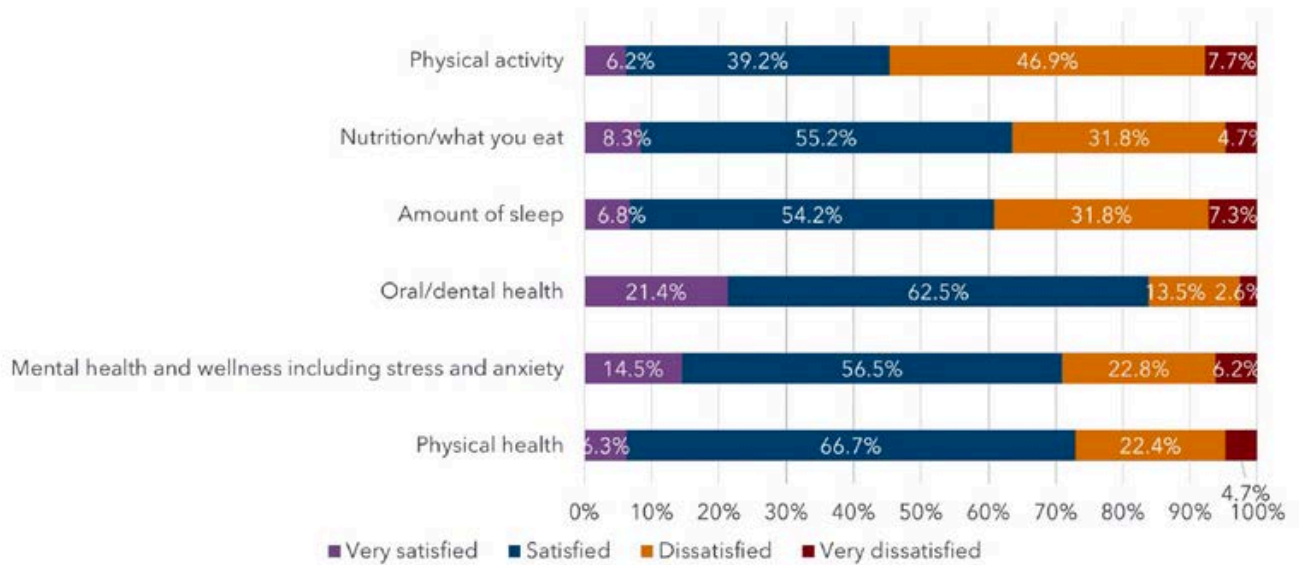
18.7% are in fair or poor health.



16



Q3. Generally, how satisfied are you with your...

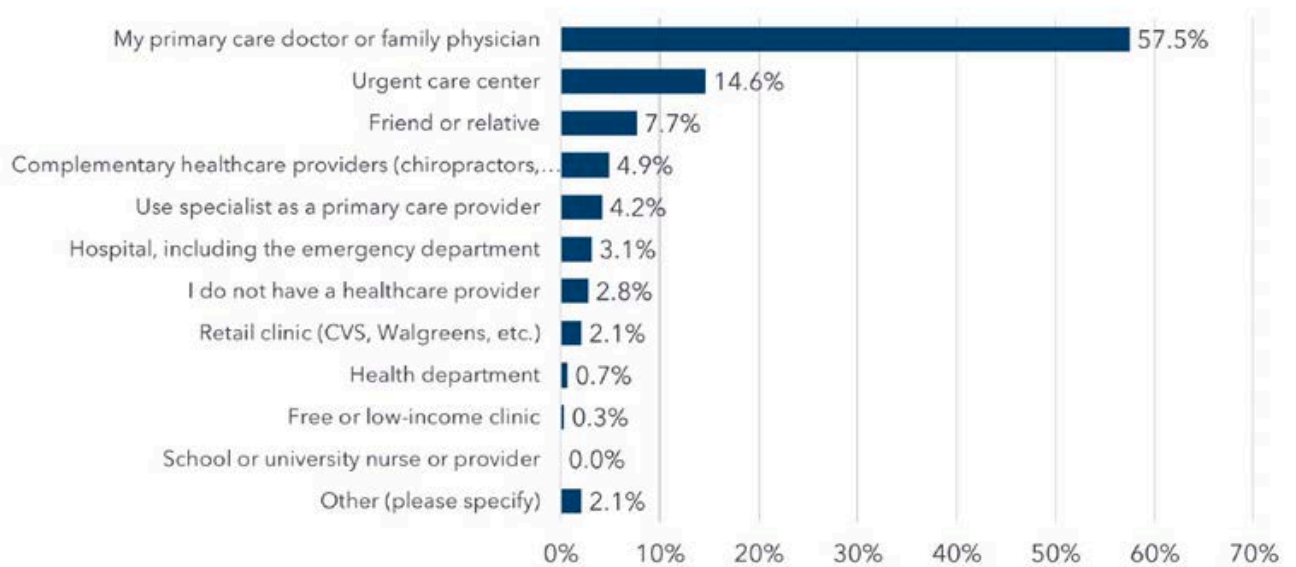


Source: StrategyHealth 2025;

N=194

17

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)

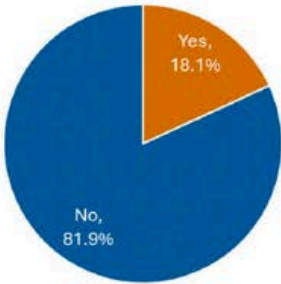


Source: StrategyHealth 2025;

N=287

18

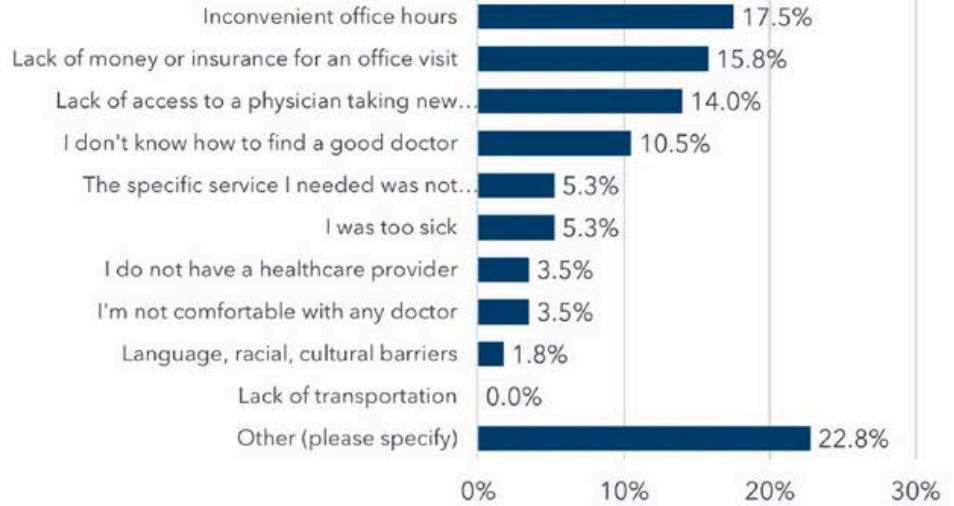
Q5. Was there a time in the past 12 months you needed to see a doctor for your physical health or an injury but could not?



N=193, 158 no, 35 yes

Source: StrategyHealth 2025;

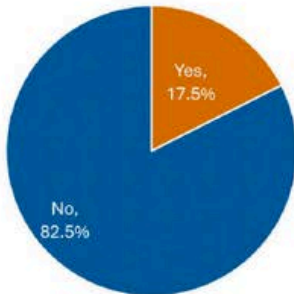
Q6. If your answer was yes, what are some of the reasons why you could not see a doctor? (select all that apply)



N=57

19

Q7. Was there a time in the past 12 months you needed medications but could not obtain them?

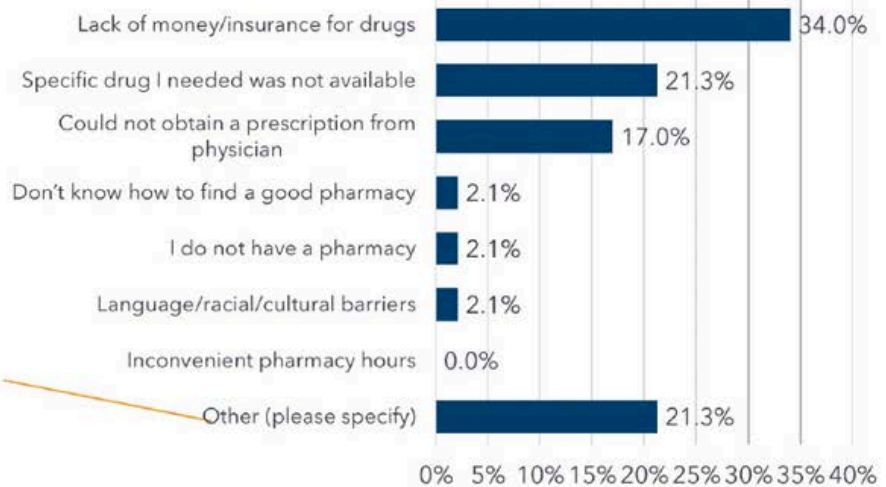


All 10 "other" were a form of "insurance would not cover the drug"

N=194, 160 no, 34 yes

Source: StrategyHealth 2025;

Q8. If your answer was yes, what are some of the reasons why you could not get medications? (select all that apply)



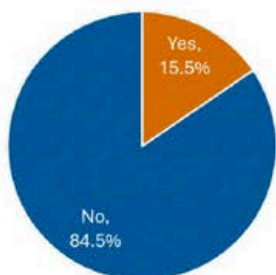
N=47

21



Bradley Medical Center
Vitruvian Health

Q9. Was there a time in the past 12 months you needed to see a mental health professional but could not?



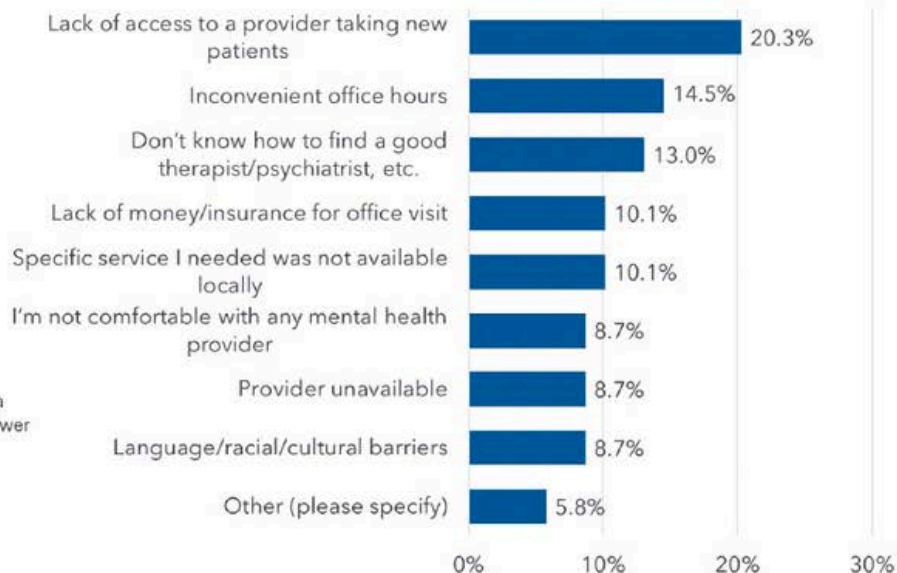
Other

- Called the suicide hotline, but that was just a bunch of questions that I did not want to answer at the time. Needed to talk to a human.
- Doc stopped seeing as many patients
- Female doctor not available
- Too much anxiety to attend

N=194, 164 no, 30 yes

Source: StrategyHealth 2025;

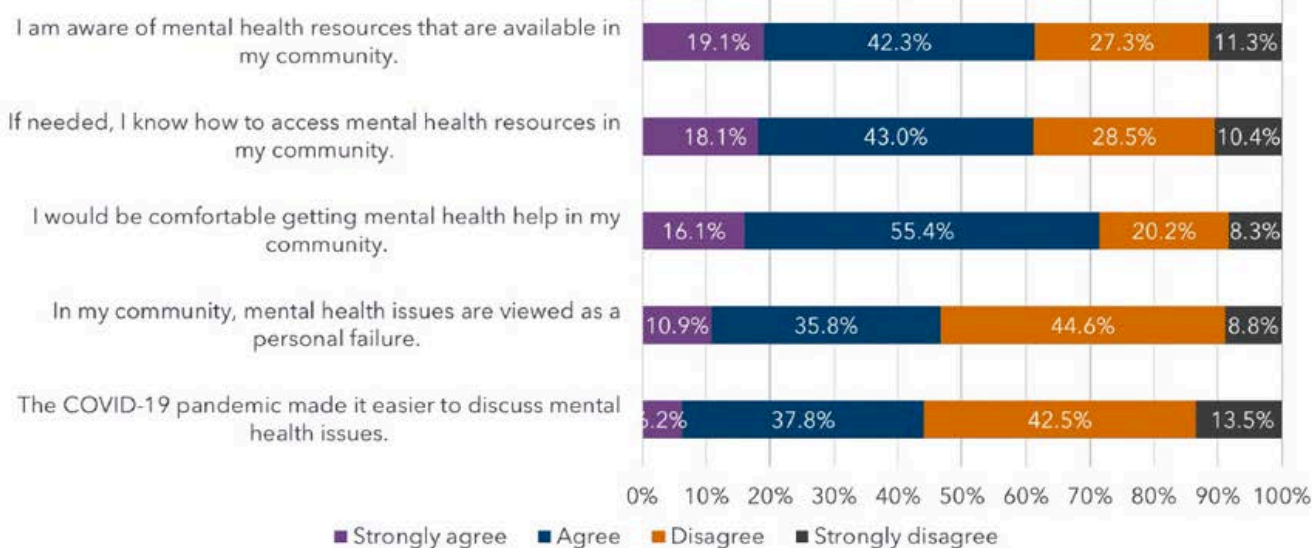
Q10. If your answer was yes, what are some of the reasons why you could not see a mental health professional? (select all that apply)



N=69

22

Q11. Please tell us to what level you agree or disagree with the following statements.

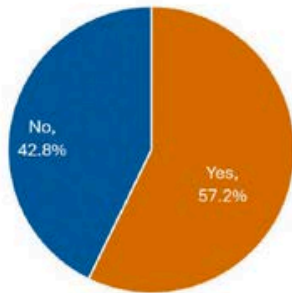


N=193

Source: StrategyHealth 2025;

23

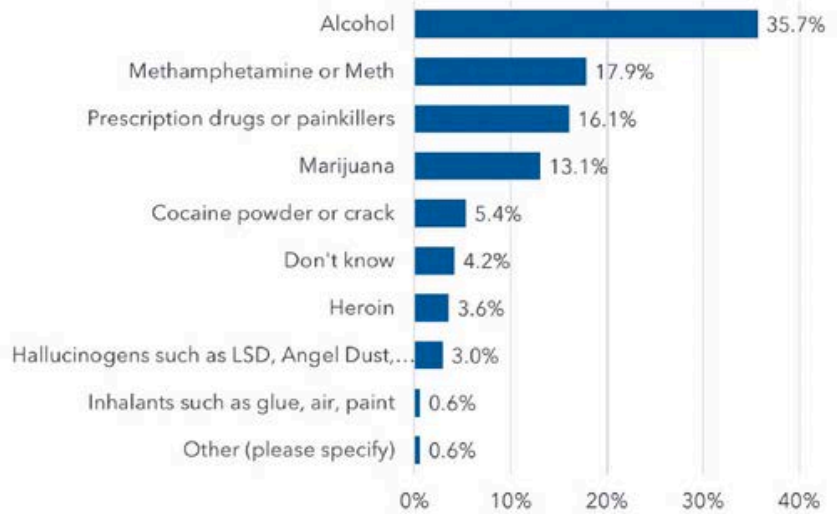
Q12. Have you, a relative, or close friend experienced substance use disorder or addiction?



N=194, 83 no, 111 yes

Source: StrategyHealth 2025;

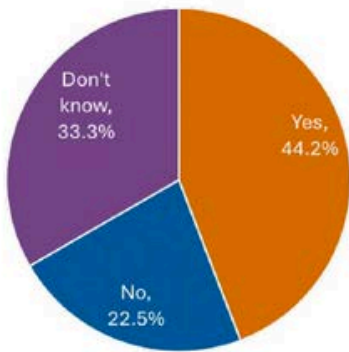
Q13. If yes, what substance(s) was involved?



N=245

24

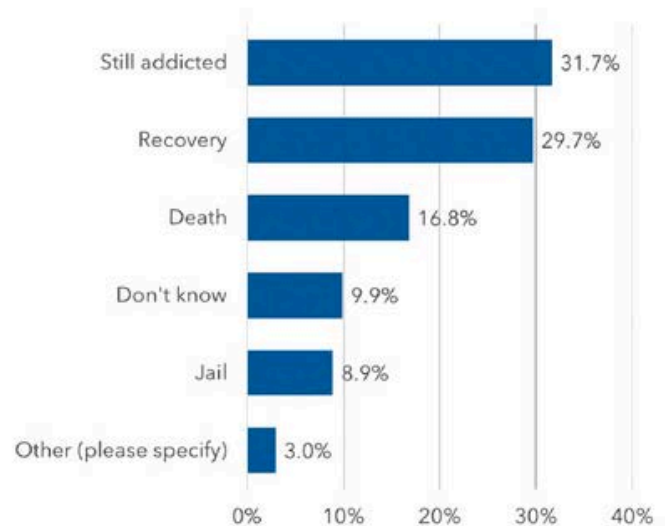
Q14. If yes, was addiction treatment available?



N=120

Source: StrategyHealth 2025;

Q15. What was the result of the addiction?



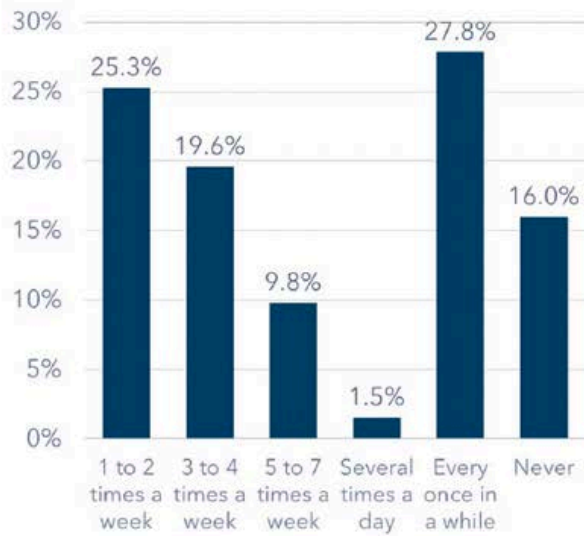
N=101

25



Bradley Medical Center
Vitruvian Health

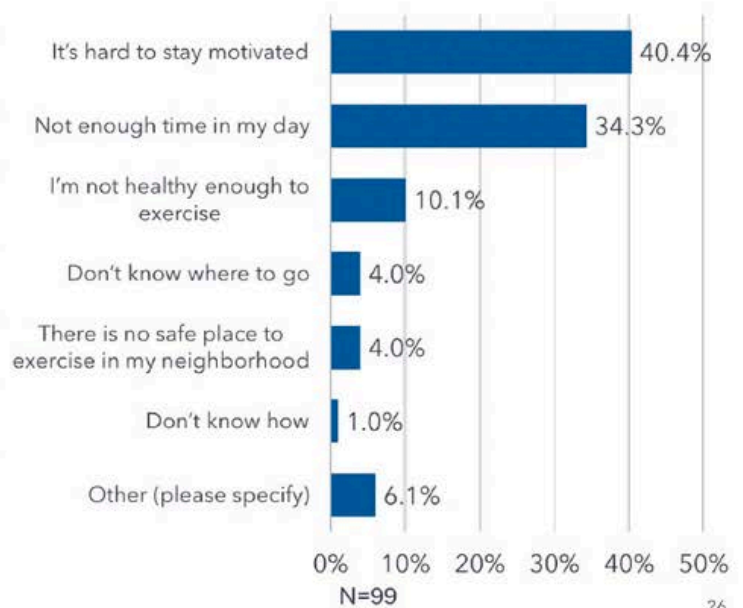
Q16. how often did you participate in any physical activities or exercise such as fitness walking, running, weightlifting, team sports, yoga, etc.?



N=194

Source: StrategyHealth 2025;

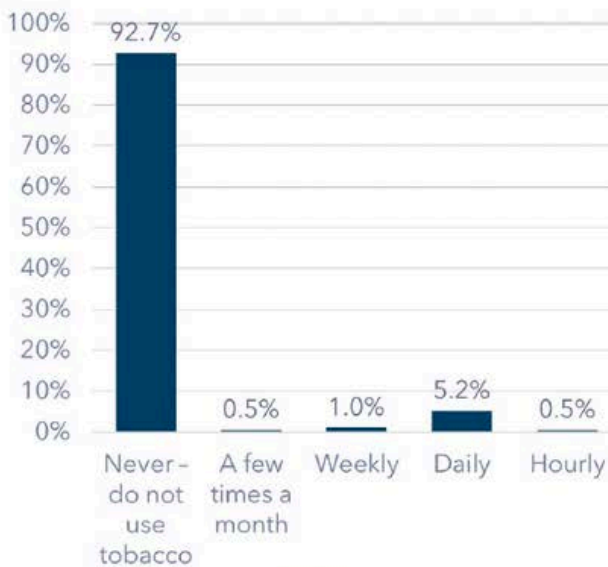
Q17. If you responded, never, what are the reasons you have not participated in any exercise during the past month? (select all that apply)



N=99

26

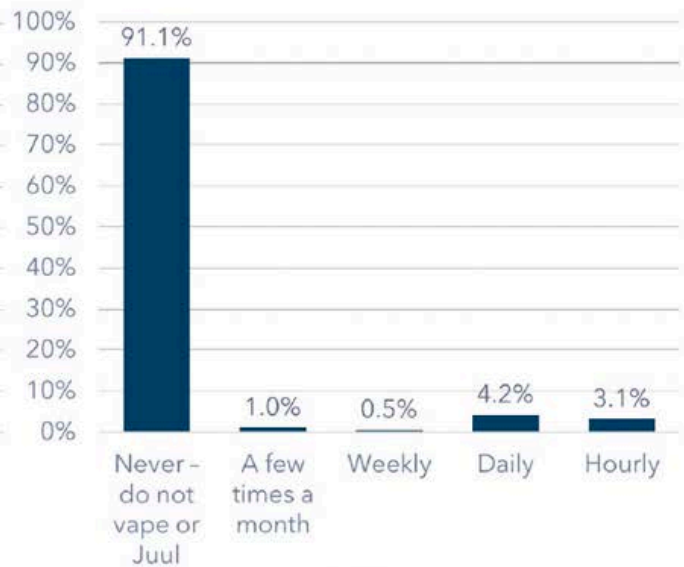
Q18. How often do you smoke cigarettes or use smokeless tobacco?



N=193

Source: StrategyHealth 2025;

Q19. How often do you use e-cigarettes or vape?



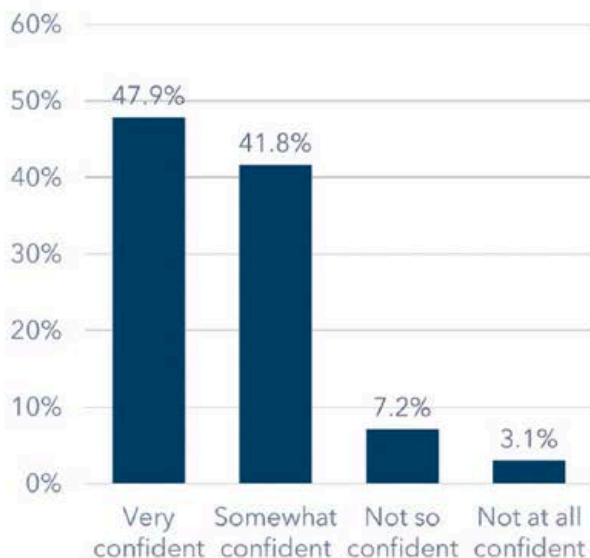
N=192

27



Bradley Medical Center
Vitruvian Health

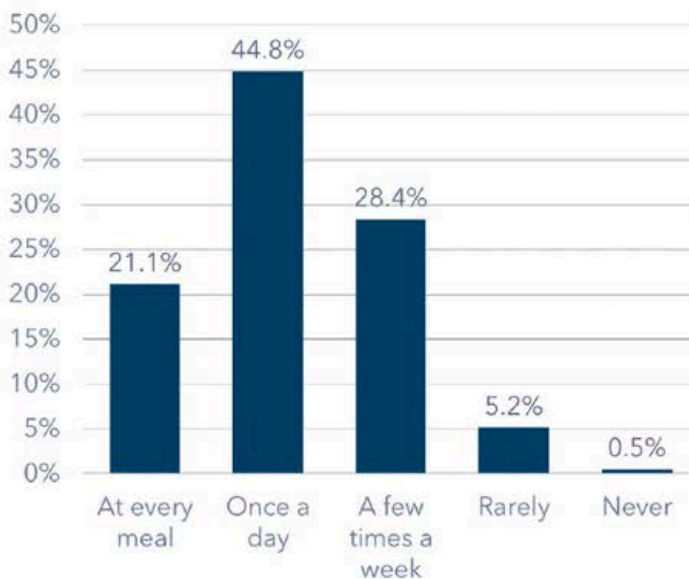
Q20. How confident are you in your understanding of what a nutritious, healthy diet looks like?



N=194

Source: StrategyHealth 2025;

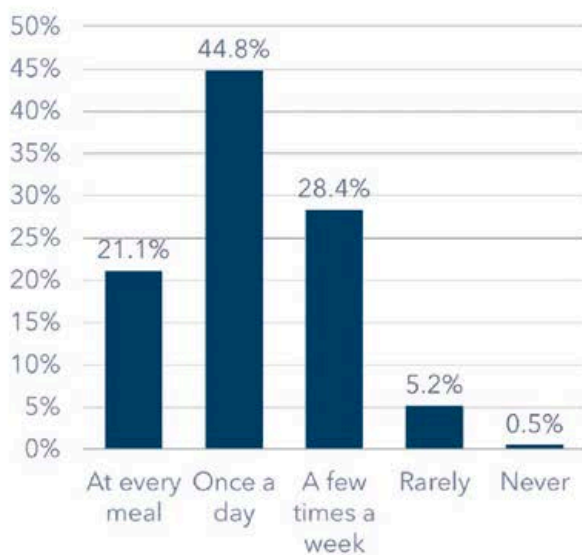
Q21. How often do you include fruits and vegetables in your meals each day?



N=194

28

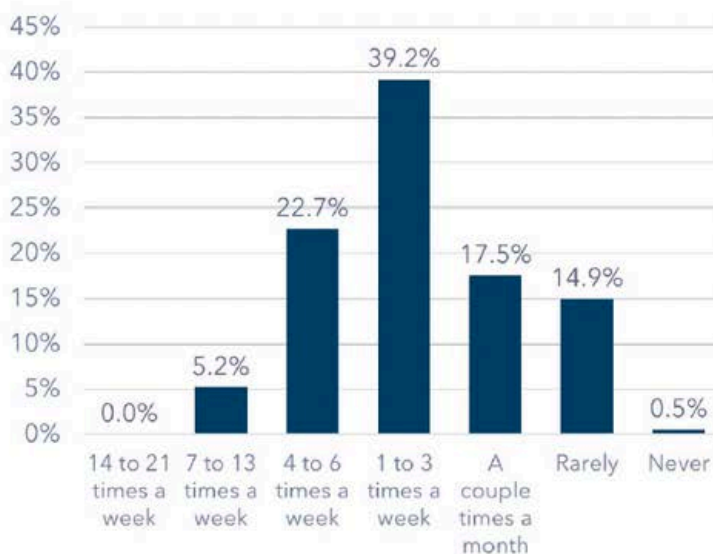
Q22. How often do you or another family member cook dinner at home?



N=194

Source: StrategyHealth 2025;

Q23. How many times a week do you eat fast food?



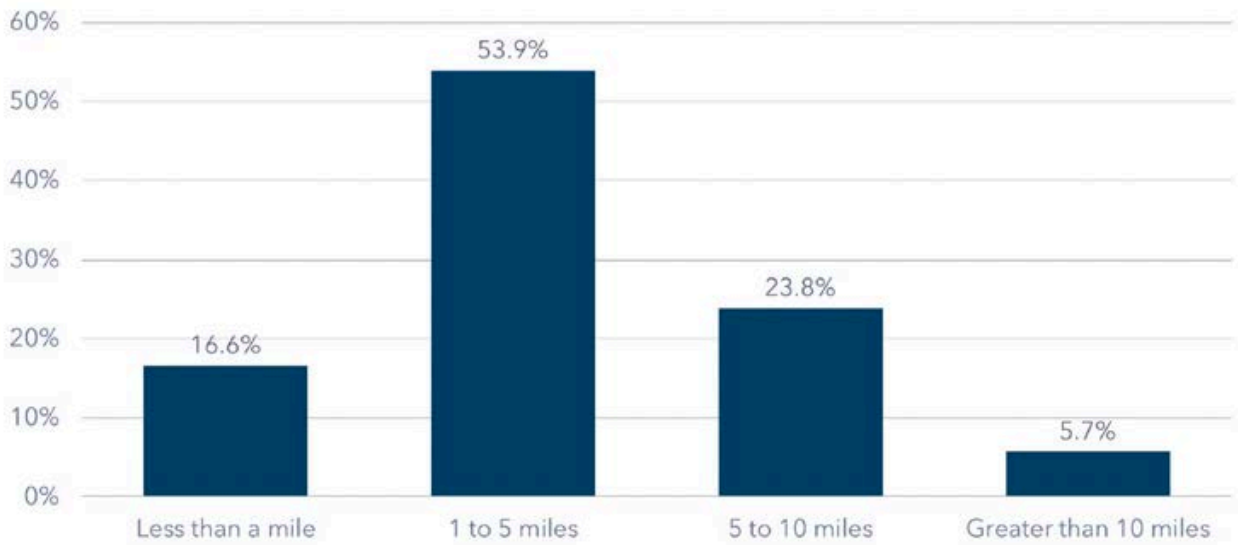
N=194

29



Bradley Medical Center
Vitruvian Health

Q24. How close in distance is the nearest grocery store that offers fresh fruits and vegetables?

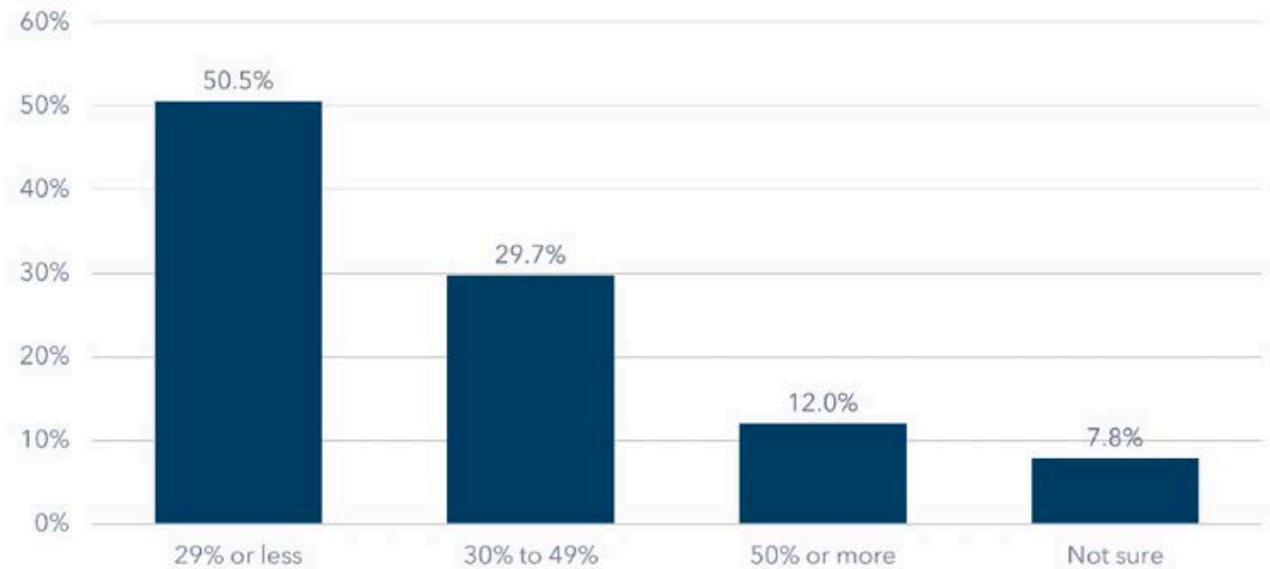


Source: StrategyHealth 2025;

N=193

30

Q25. Approximately what percentage of your total household monthly income would you say you spend on your rent or mortgage payment?

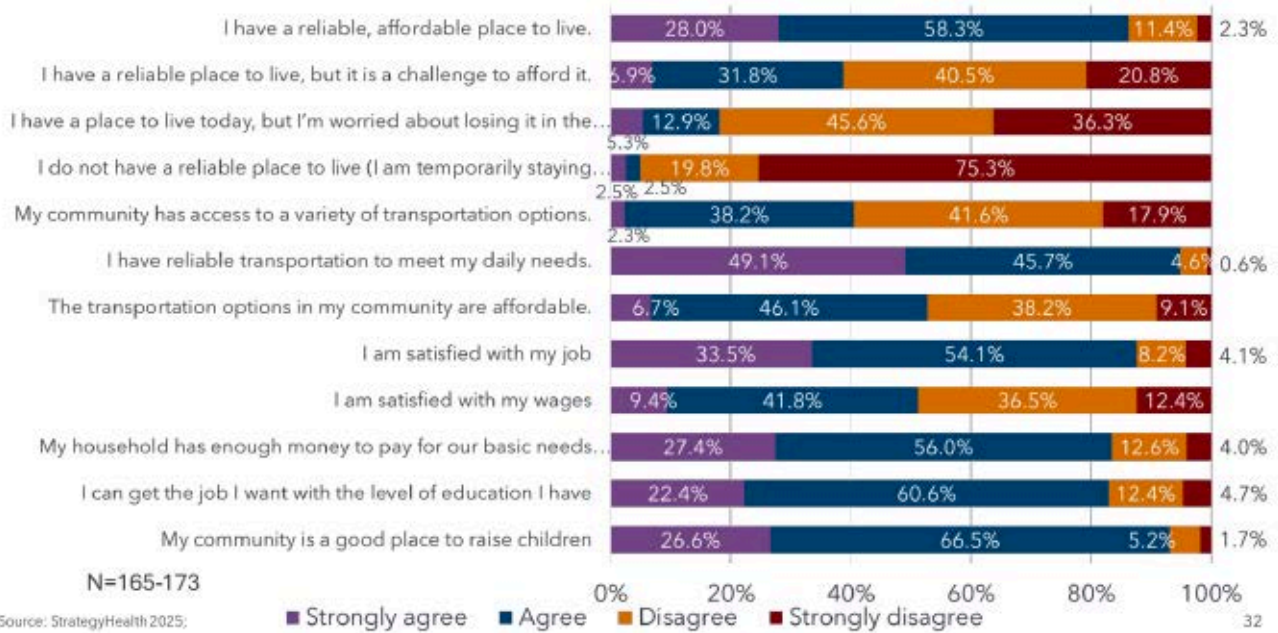


Source: StrategyHealth 2025;

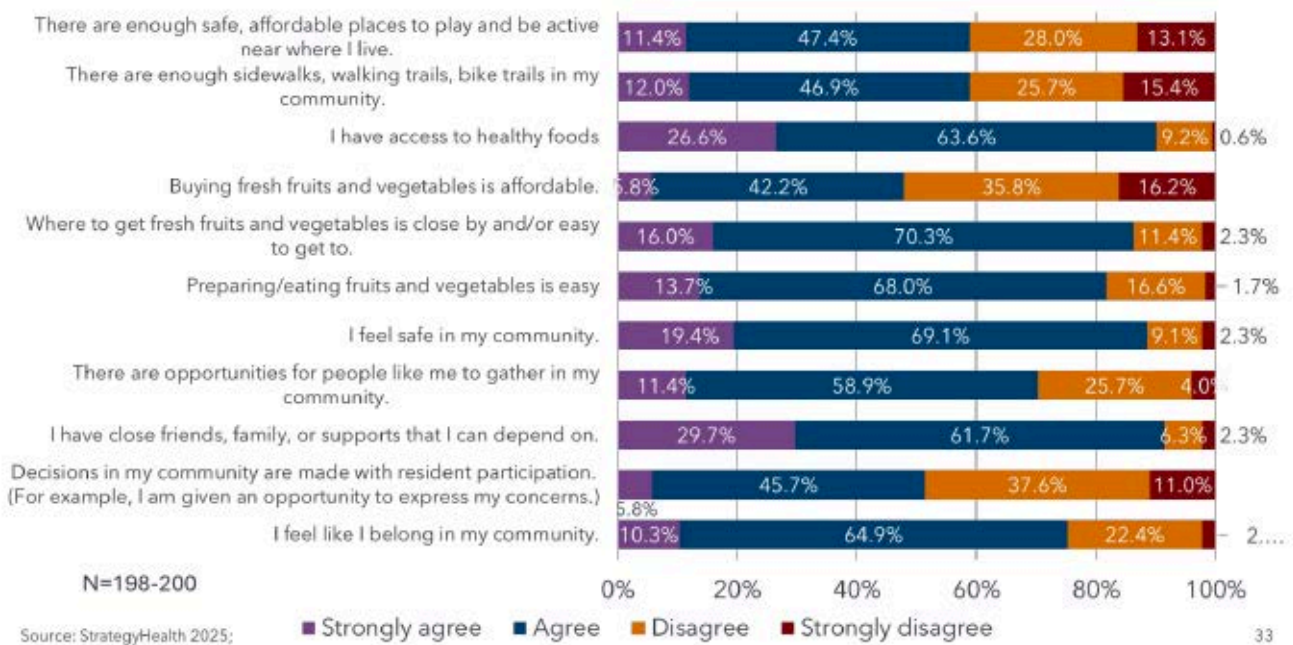
N=192

31

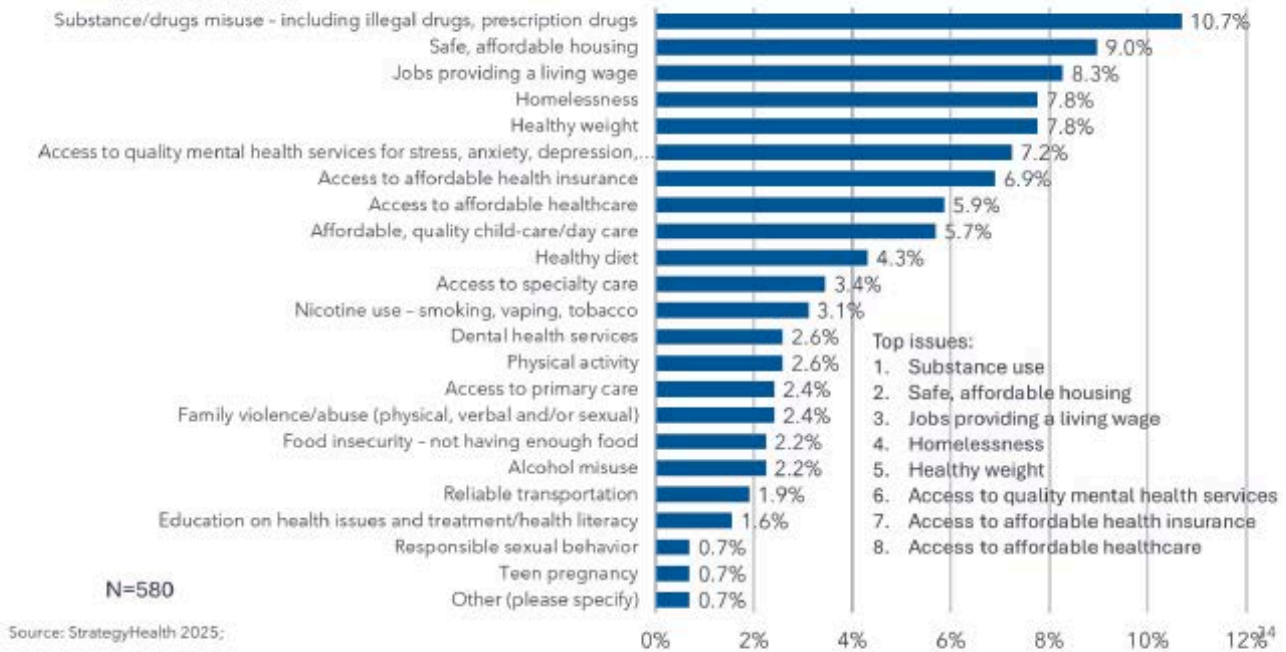
Q26. Please tell us how much you agree or disagree with the following statements.



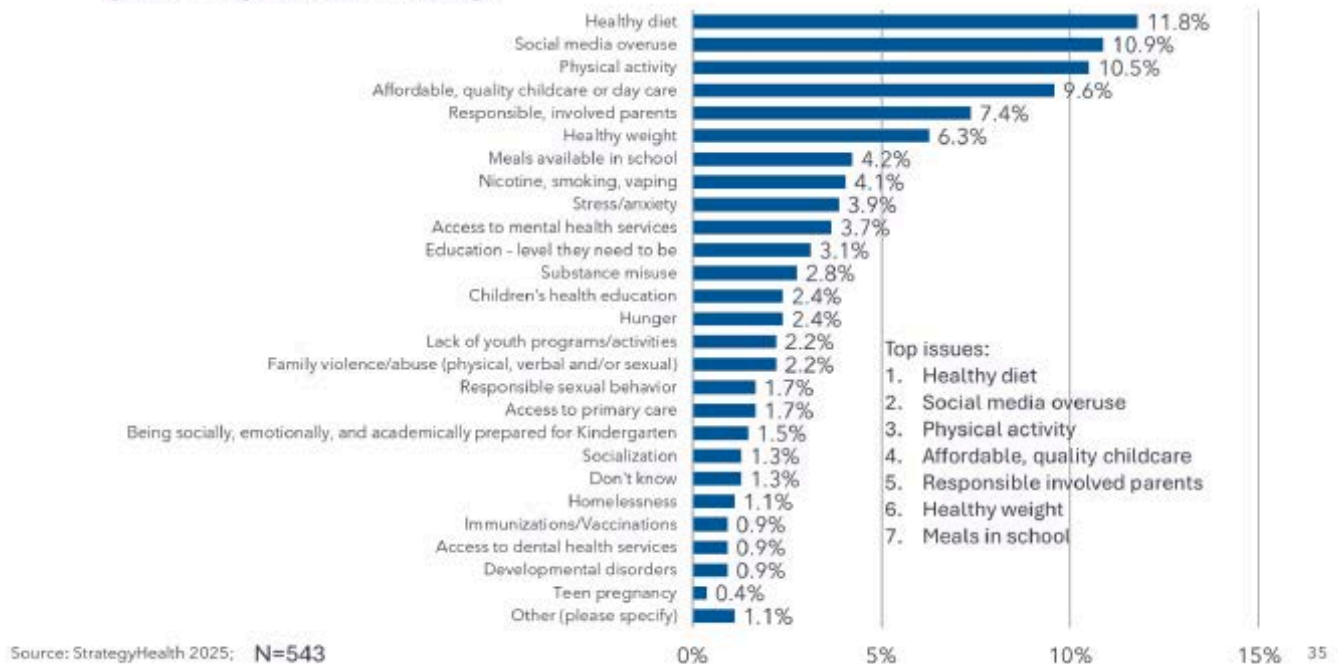
Q26. Please tell us how much you agree or disagree with the following statements.



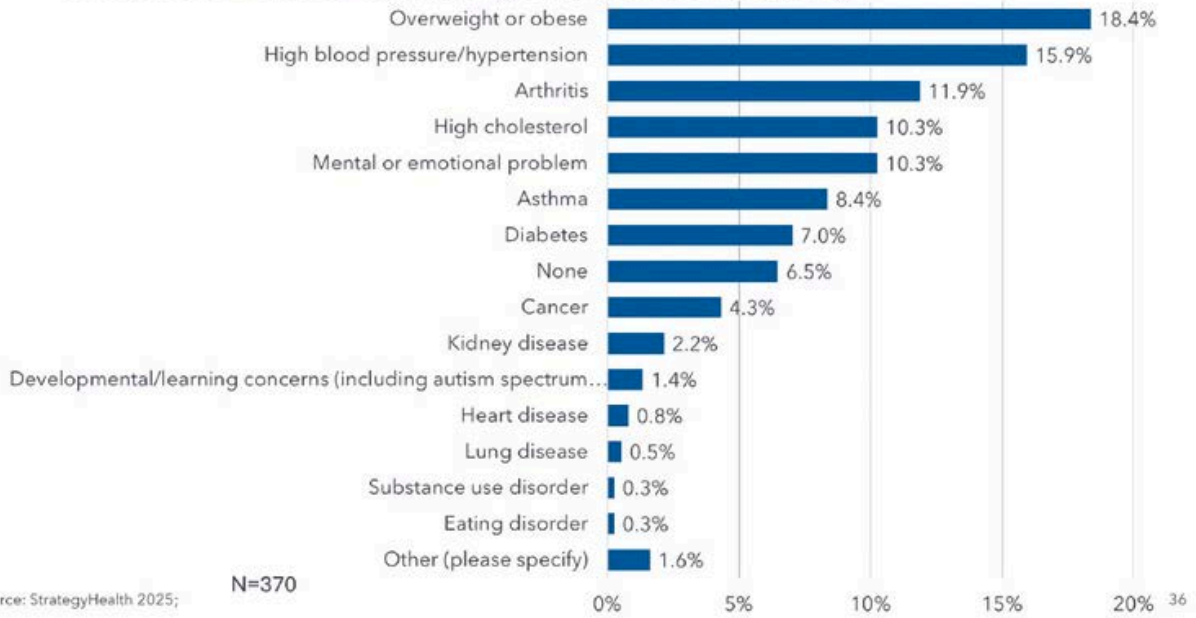
Q27. In your opinion, what are the top 3 most significant health issues in the counties?



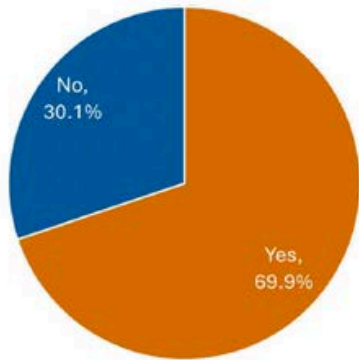
Q28. In your opinion, what are the top 3 health concerns for children and youth in your community?



Q29. Have you ever been told by a doctor you have any of these conditions, diseases or challenges? (select all that apply)

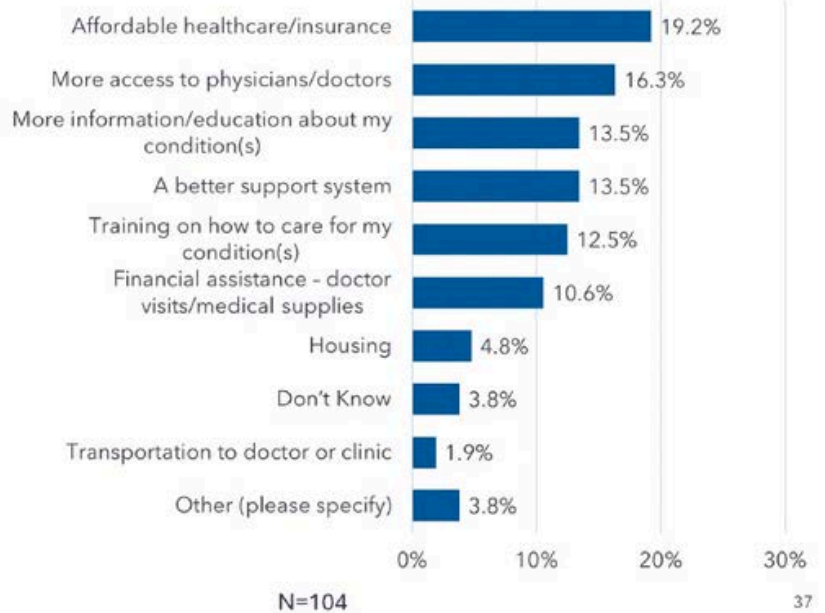


Q30. For any response, other than none, do you feel you have all you need to manage your health condition(s)?

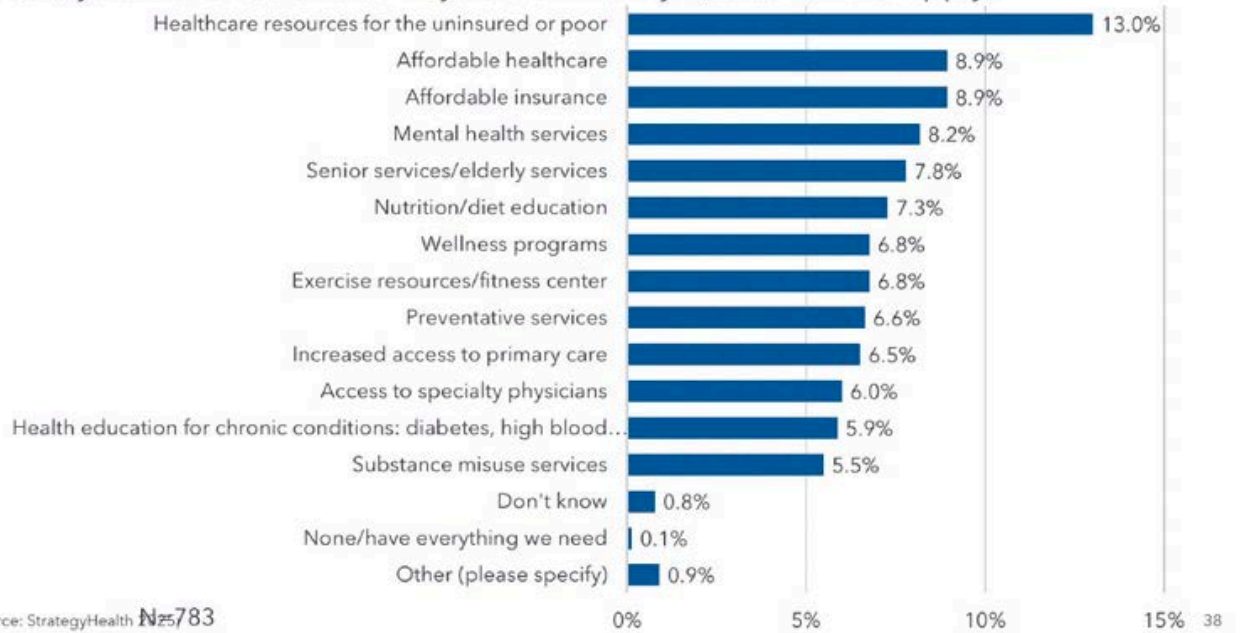


Source: StrategyHealth 2025;

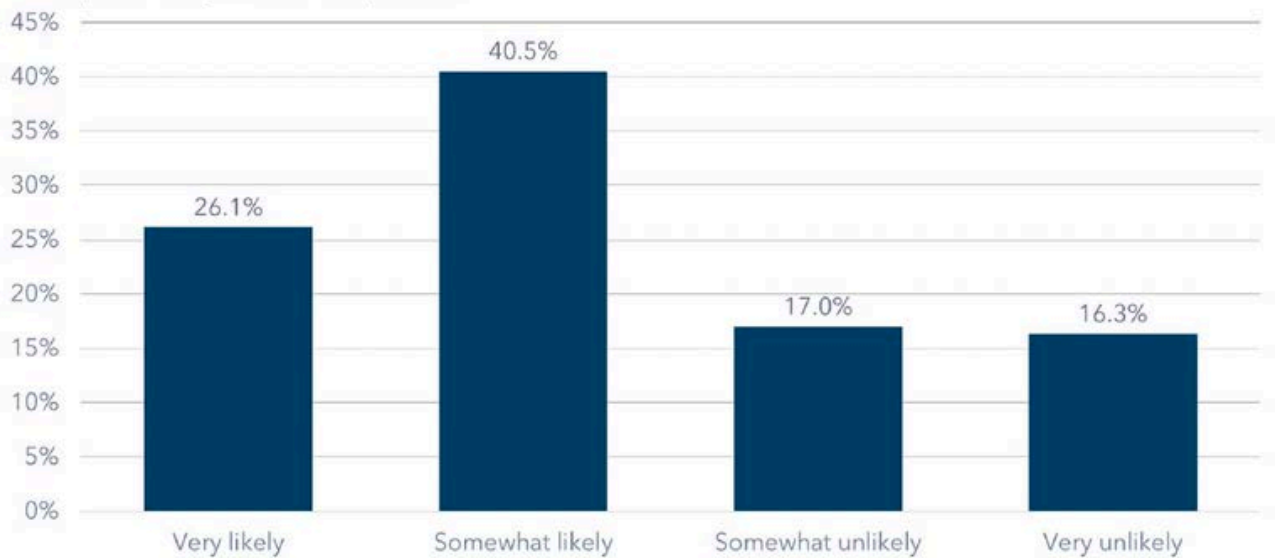
Q31. If no, what do you need in order to manage your health condition(s)?



Q32. What healthcare, health education, or public health services or programs would you like to see offered in your community? (select all that apply)



Q33. How likely are you to utilize virtual physician care such as through a computer or your smart phone?



Source: StrategyHealth 2025;

N=153

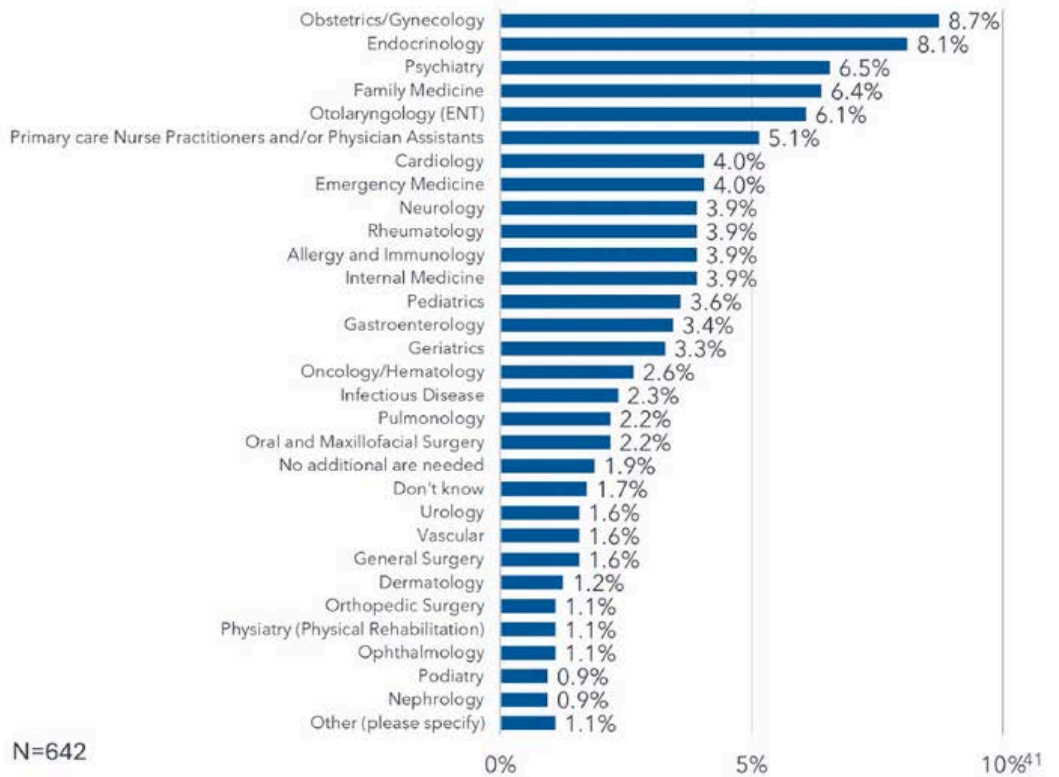
39

Q34. In your opinion, what types of medical specialists, if any, are most needed in your county?

1. OB/gyn
2. Endocrinology
3. Psychiatry
4. Family Medicine
5. ENT
6. APPs
7. Cardiology

Source: StrategyHealth 2025;

N=642



3. HEALTH STATUS DATA TRENDED

Comparisons of Health Status

In most of the following graphs, Bradley County will be light blue, Polk is brown, TN is red, U.S. will be blue and the 90th percentile of counties in the U.S. will be gold. If both Bradley and Polk Counties' scores are worse than Tennessee's, then the title of the graph is red, alternatively if the Counties' metrics are better than Tennessee's then the title of the graph is green. If there is a split, where one county is better and one is worse, then there will be a green star to indicate better and a red stop sign to indicate worse than Tennessee.

Health Outcomes (Length of Life and Quality of Life)

Health Outcomes are a combination of length of life and quality of life measures.

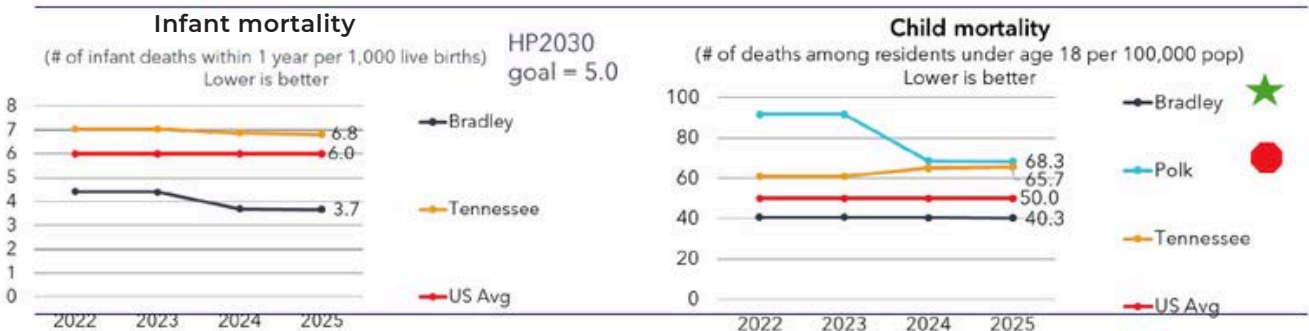
Length of Life

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. Bradley County lost 10,765 and Polk lost 14,384 years of potential life per 100,000 population which was higher than TN and the U.S.

Bradley County residents can expect to live 3.4 years less than the average U.S. resident and Polk County residents can expect to live 6.4 years less.



Source: County Health Rankings; National Center for Health Statistics – Mortality File 2020-2022



Source: CHR; National Center for Health Statistics – Natality & Mortality File 2016-2022
Child Mortality: CHR; National Center for Health Statistics – Mortality files; Census 2019-2022

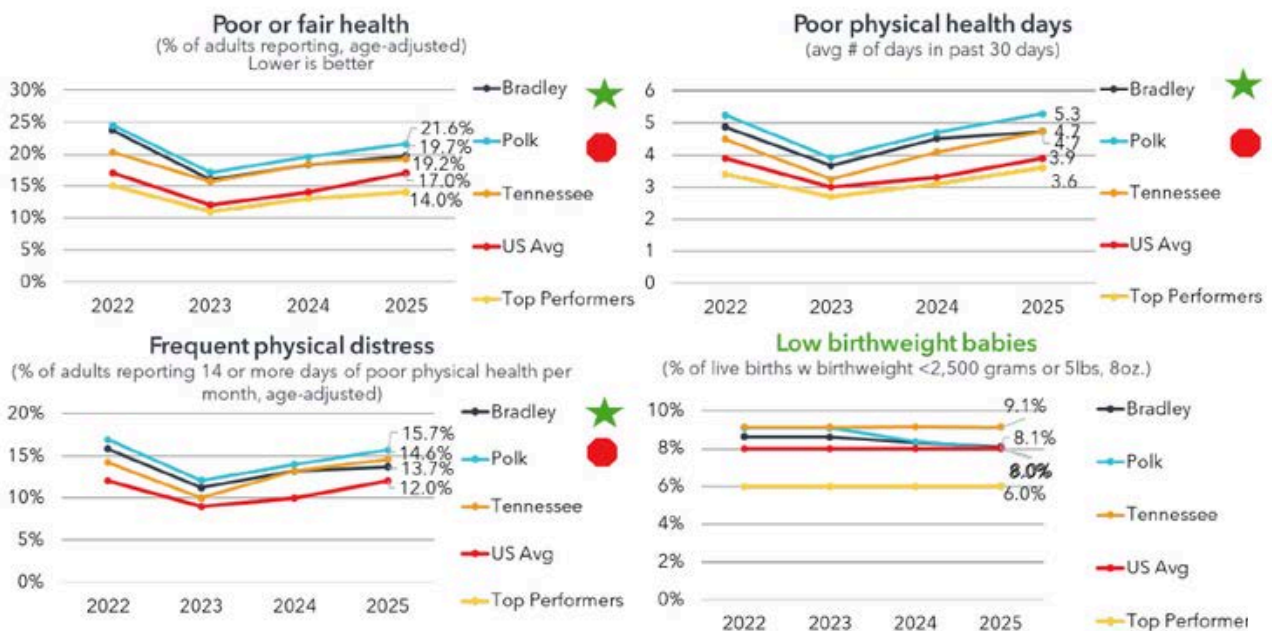
Cause of Death	Bradley Co.	Polk Co.	TN	US
Heart Disease	302.0	401.2	258.7	207.1
Cancer	213.8	292.5	208.7	182.8
Accidents (Unintentional injuries)	74.3	111.4	98.8	67.3
Cerebrovascular Diseases	59.0	61.3	54.0	49.1
Chronic Lower Respiratory Disease	61.2	100.3	60.4	43.8
COVID-19	57.6	75.2	48.0	35.4
Alzheimer's Disease	34.2	Unreliable	39.8	35.0
Diabetes	59.0	83.6	37.2	29.4
Nephritis	17.1	Unreliable	17.5	16.9
Liver Disease	20.3	Unreliable	18.9	16.0
Suicide	12.2	Unreliable	17.8	14.8
Influenza & Pneumonia	18.5	Unreliable	18.4	13.8

Rates in red had death rates higher than TN. The leading causes of death in Bradley and Polk Counties were heart disease, cancer, accidents, chronic lower respiratory disease, then COVID-19.

Source: Wonder CDC.gov (2021-2023) Crude death rates per 100,00 population.

Quality of Life

Physical Health

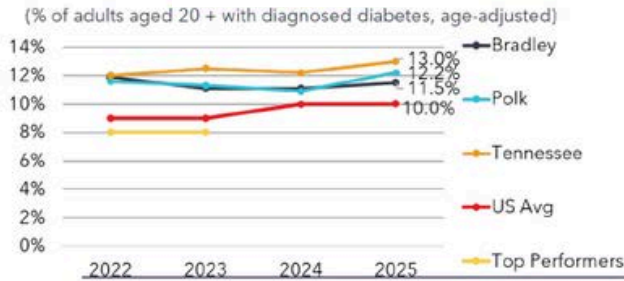


Quality of life was measured by % reporting fair or poor health, the average number of poor physical health days, frequent physical distress, and low birthweight babies.

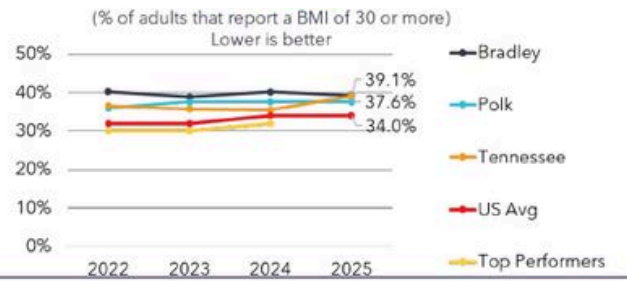
Source: County Health Rankings; Behavioral Risk Factor Surveillance System (BRFSS) 2022

Source: County Health Rankings; National Center for Health Statistics - Natality files (2017-2022)

Diabetes prevalence



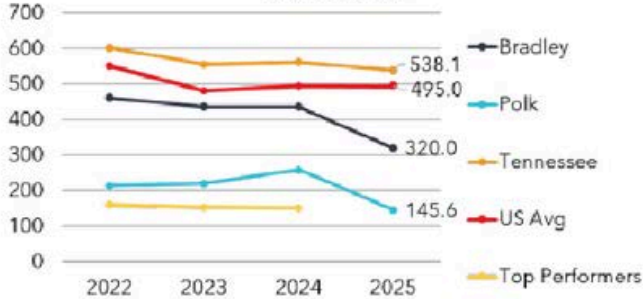
Adult obesity



Source: Diabetes - CHR; CDC, BRFSS, 2022
 Source: Obesity - CHR; CDC, BRFSS, 2022

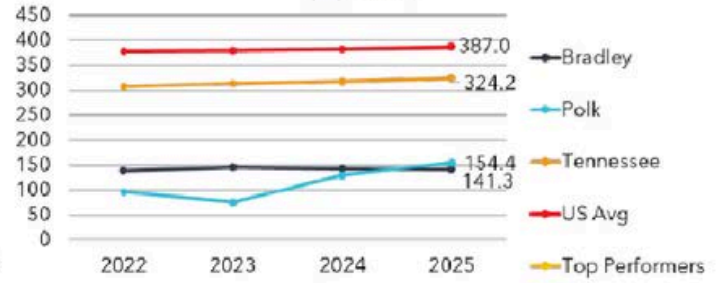
Sexually transmitted infections

(chlamydia rate per 100,000 population)
 Lower is better



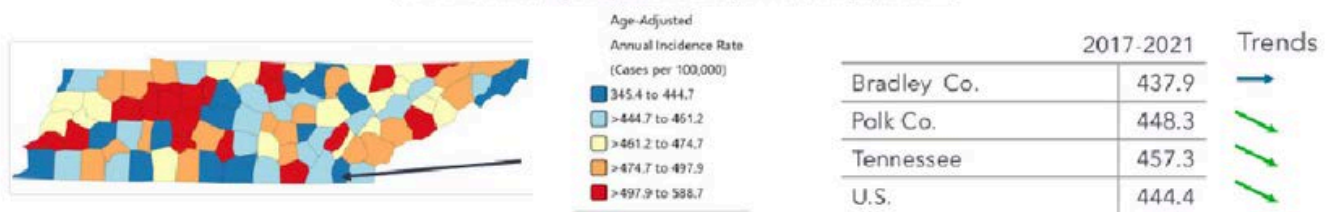
HIV prevalence

(# of people aged 13+ living with a diagnosis of HIV infection per 100,000 population)



Cancer incidence rates

(All cancer sites, age-adjusted cases per 100,000 population)

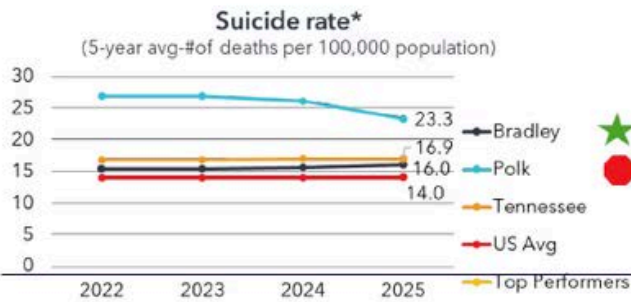
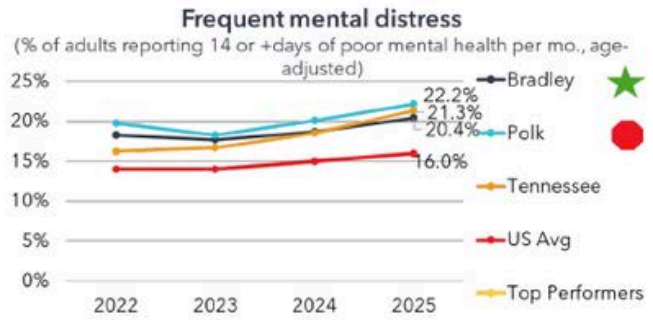
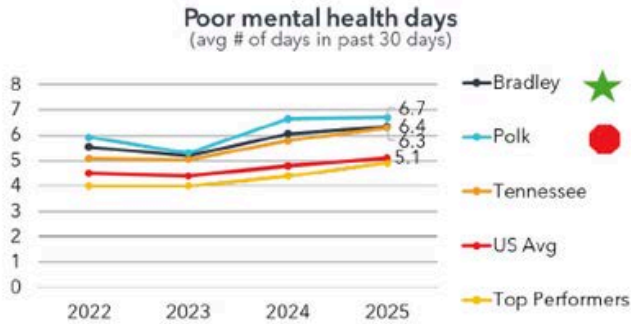


Source: STIs - CHR; National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2022
 HIV Prevalence - CHR; National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2022
 Cancer incidence rates – NIH, CDC State Cancer Profiles, 2017-2021

The cancer rate in Bradley County has been flat, while Polk had been declining.

Mental Health

Quality of life was measured by poor mental health days, frequent mental distress, suicide rate, and feelings of loneliness. Poor mental health days and frequent mental distress were higher than poor physical health days and frequent physical distress.



Feelings of loneliness

(% of adults reporting they always, usually or sometimes feel lonely)

Bradley Co.	36%
Polk Co.	37%
Tennessee	34%
U.S.	33%

Source: Poor mental health days, Frequent mental distress, Feelings of loneliness - County Health Rankings; Behavioral Risk Factor Surveillance System (BRFSS) 2022

Source: Suicide rate - County Health Rankings; National Center for Health Statistics, Mortality files (2018-2022)



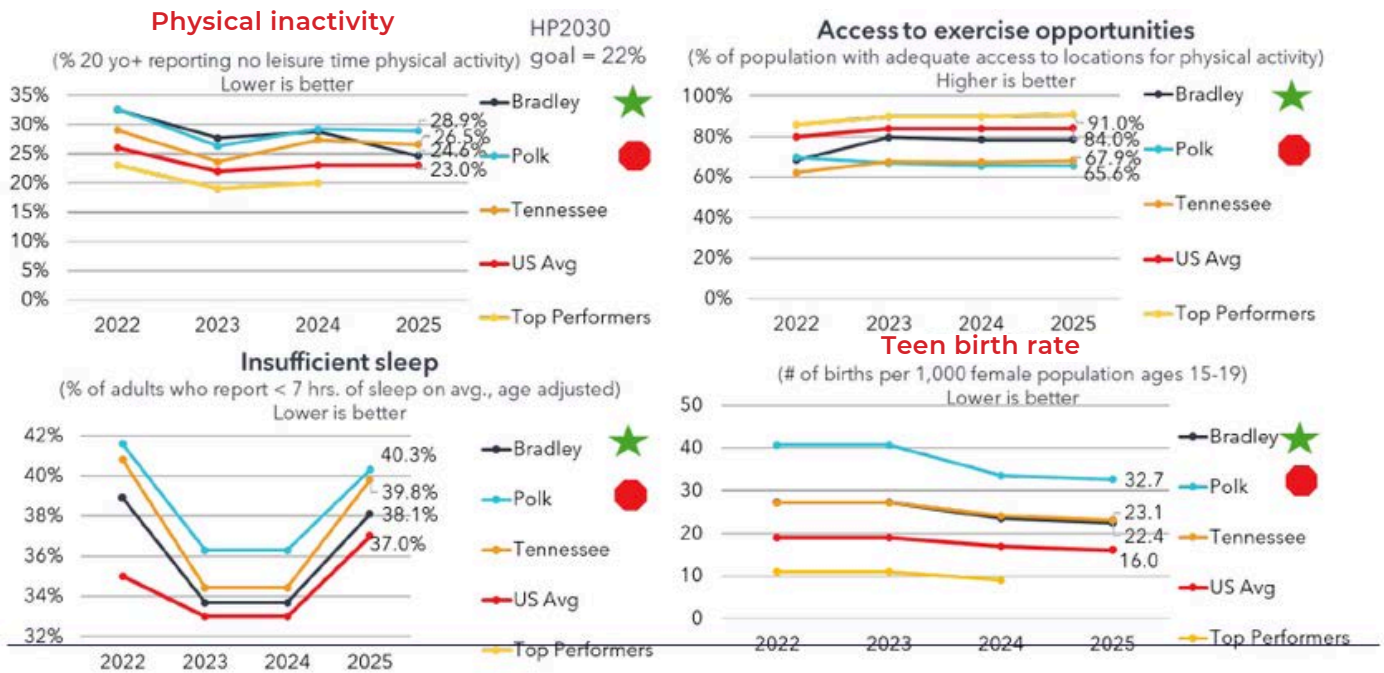
Community Conditions

Community conditions include the social and economic factors, physical environment and health infrastructure in which people are born, live, learn, work, play, worship and age. Community conditions are also referred to as the social determinants of health. (CHR, 2025)

Health Infrastructure

Health infrastructure is comprised of prevention, healthy eating, and active living, substance misuse, and clinical care.

Healthy Living



Source: Physical Inactivity – CHR, Behavioral Risk Factor Surveillance System, 2022

Source: Access to exercise opportunities – CHR, ArcGIS Business Analyst, YMCA, & US Census Tigerline Files, 2024, 2021 and 2020. 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)

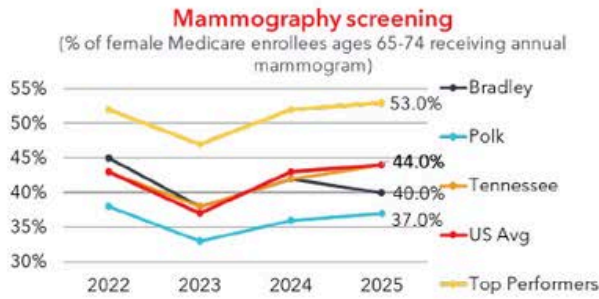
Source: Insufficient sleep – CHR, Behavioral Risk Factor Surveillance System (BRFSS), 2022

Source: Teen birth rate – CHR, National Center for Health Statistics-Nativity Files; Census Population, 2017-2023



Bradley Medical Center
 Vitruvian Health

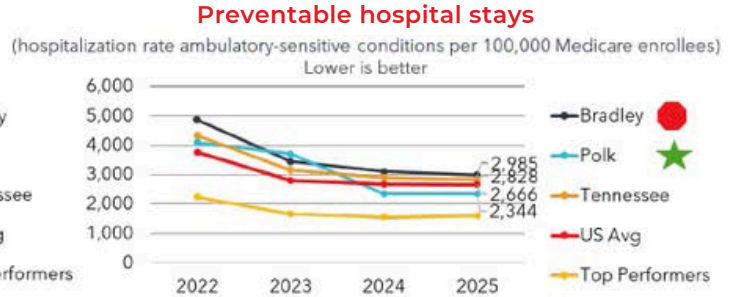
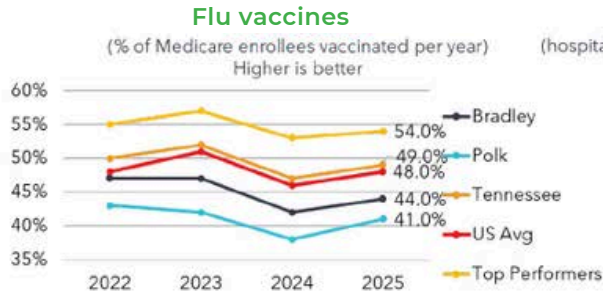
Prevention



COVID vaccines

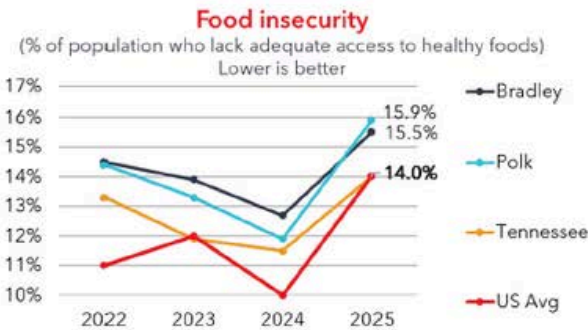
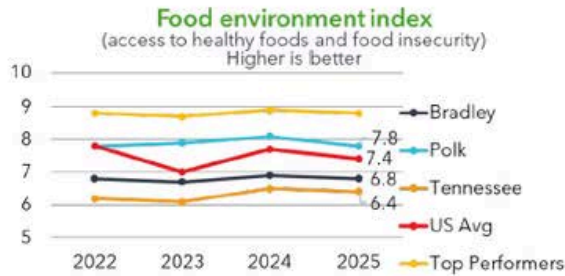
(% of 2 doses of vaccine)
Higher is better

Bradley Co.	Polk Co	TN	U.S.
43.2%	42.4%	56.4%	70%



Source: Preventable hospital stays, mammography screening, flu vaccinations – CHR, CMS Mapping Medicare Disparities Tool, 2022
Source: COVID-19 Vaccinations – CDC May 2023

Access to Healthy Foods



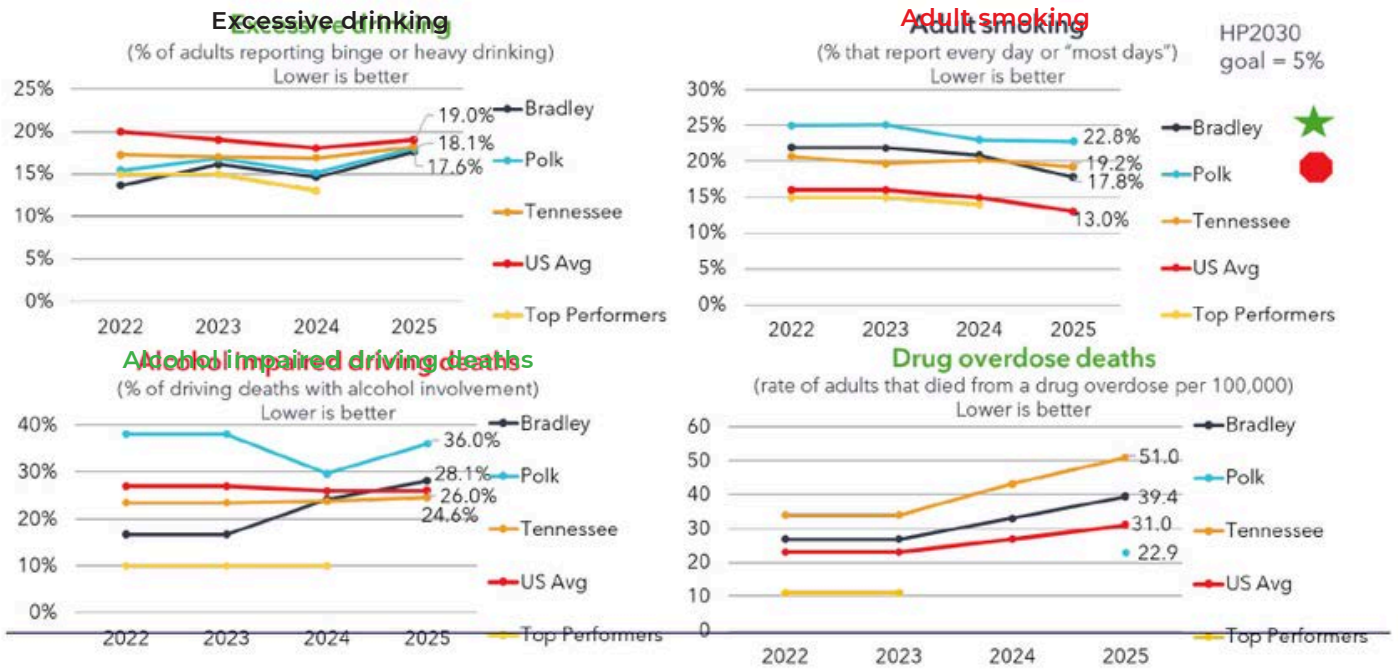
Limited access to healthy foods
(% of pop who are low-income and do not live close to a grocery store)
Lower is better

	2015	2019
Bradley	12%	12%
Polk	0%	2%
Tennessee	8%	9%
U.S.	6%	6%

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.

Source: Food environment: CHR; USDA Food Environment Atlas, Map the Meal Gap from Feeding America, 2019 & 2022
Source: Food insecurity – Map the Meal Gap, 2022
Source: Limited access to healthy foods – USDA Food Environment Atlas, 2019

Substance Use



Source: Excessive drinking - CHR; Behavioral Risk Factor Surveillance System (BRFSS), 2022

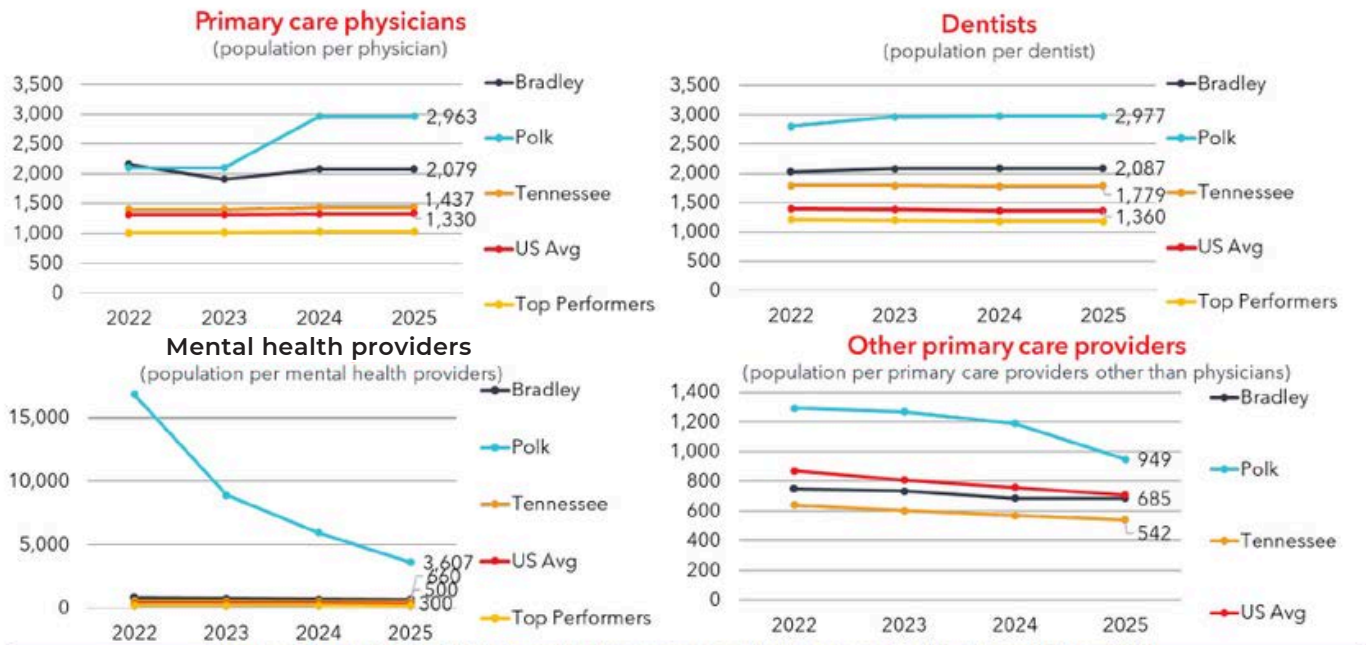
Source: Smoking - CHR; Behavioral Risk Factor Surveillance System (BRFSS), 2022

Source: Alcohol-impaired driving deaths - CHR; Fatality Analysis Reporting System, 2018-2022

Source: Drug overdose deaths - National Center for Health Statistics - Mortality Files, Census Population, 2020 - 2022

Clinical Care

Clinical care measures are comprised of population per primary care physicians, dentists, mental health providers and other primary care providers.



Source: Pop to PCP - CHR; Area Health Resource File/American Medical Association, 2021

Source: Pop to Dentists - CHR; Area Health Resource File/National Provider Identification file, 2022

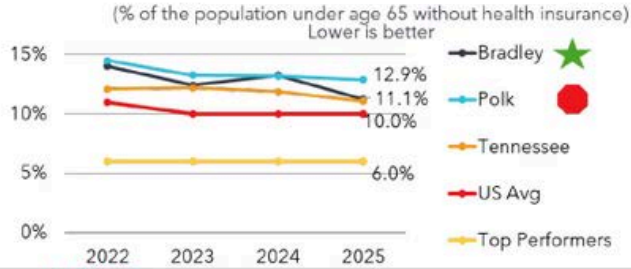
Source: Pop to mental health provider (psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists and advanced practice nurses specializing in mental health) CMS, National Provider Identifier File, 2022

Source: Population to other primary care providers - CHR; CMS, National Provider Identification, 2024



Bradley Medical Center
Vitruvian Health

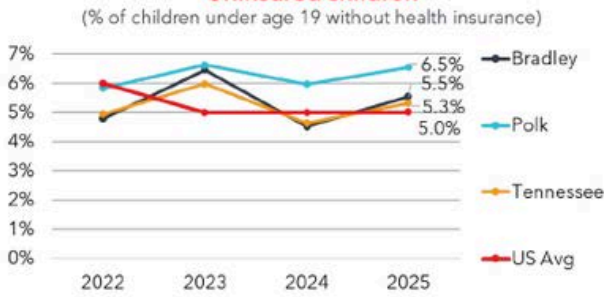
Uninsured



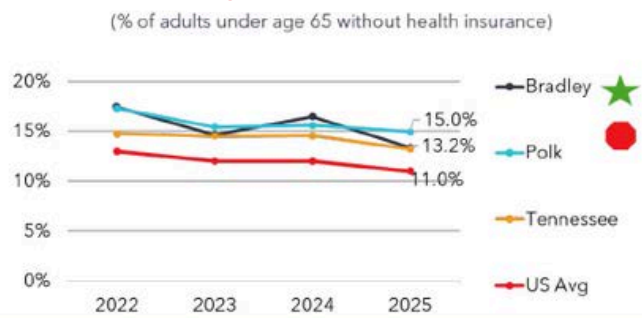
HP2030 goal = 7.6%

U.S.			
White	Black	Hispanic	AI/AN
5.7%	9.6%	17.7%	18.8%

Uninsured children



Uninsured adults



Source: Uninsured - CHR; Small Area Health Insurance Estimates, 2022



Social and Economic Factors

Social and economic factors are comprised of education, income, employment and wealth, social support, and safety. Many of the socioeconomic factors were covered earlier in the report. These are the remaining metrics.

Education

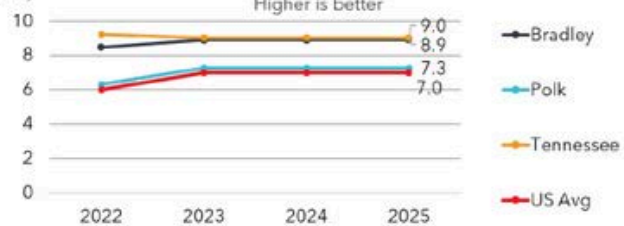
Childcare cost burden

(Childcare costs for a HH w/2 children as a percent of median HH income)
Higher is better

Entity	Percentage
Bradley Co.	27%
Polk Co.	22%
Tennessee	22%
U.S.	28%

Childcare centers

(# of childcare centers per 1,000 population under 5-yrs old)
Higher is better



School funding adequacy

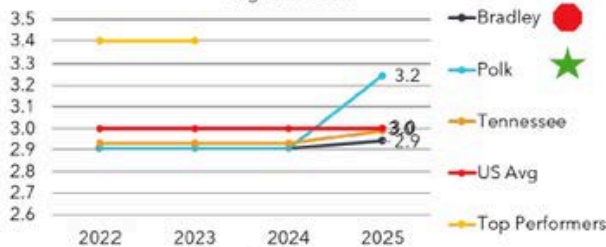
(The average gap in dollars between actual and required spending per pupil among public school districts. Required spending is an estimate of dollars needed to achieve U.S. average test scores in each district)
Higher is better

Entity	Amount
Bradley Co.	\$621
Polk Co.	\$1,016
Tennessee	\$44
U.S.	\$1,411

Source: School funding adequacy – CHR; School Finance Indicators Database, 2022
Source: Childcare Cost Burden – The Living Wage Institute; Small Area Income and Poverty Estimate, 2024
Source: Childcare centers – CHR; Homeland Infrastructure Foundation-Level Data, 2010-2022

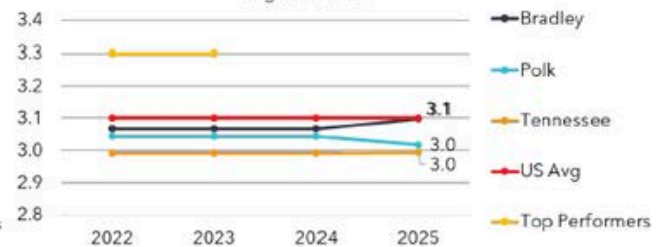
3rd grade math scores

(Avg. grade level performance on math standardized tests)
Higher is better



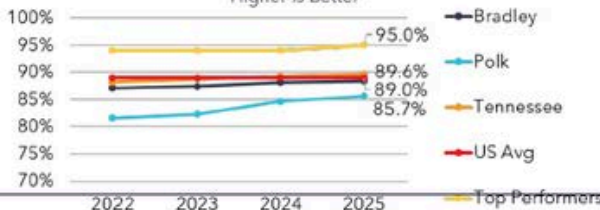
3rd grade reading level

(Avg. grade level performance on English language arts standardized tests)
Higher is better



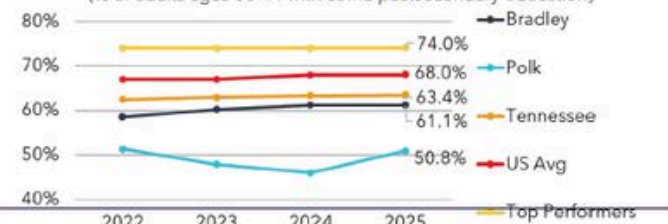
High school completion

(% of adults ages 25 + with a high school diploma or equivalent)
Higher is better



Some college

(% of adults ages 35-44 with some postsecondary education)
Higher is better



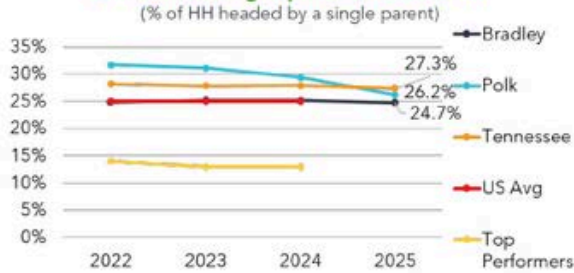
Source: Reading and Math scores – CHR Stanford Education Data Archive, 2019
Source: High school completion – CHR, American Community Survey, 5-yr estimates, 2019-2023
Source: Some college – CHR, American Community Survey, 5-year estimates, 2019-2022



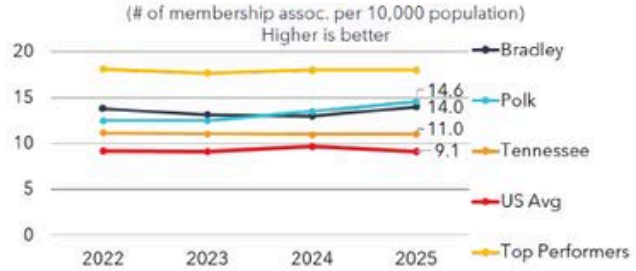
Bradley Medical Center
Vitruvian Health

Family and Social Engagement

Children in single-parent households



Social associations



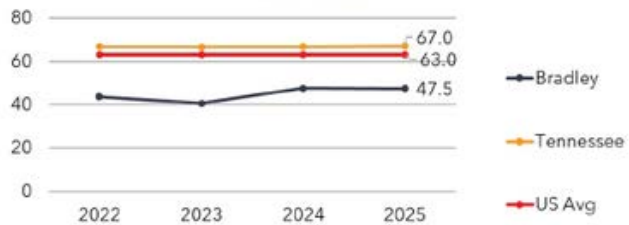
Voter turnout

(% of citizen pop aged 18+ who voted in the 2020 U.S. Presidential election)
Higher is better

Bradley Co.	57.1%	●
Polk Co.	61.7%	★
Tennessee	60.1%	
U.S.	67.9%	

Residential segregation - Black/White

(index of dissimilarity where higher values indicate greater residential segregation between Black and White county residents)
Lower is better



Source: Children in single-parent households - CHR; American Community Survey, 5-yr. est., 2019-2023

Sources: Social associations - CHR-County Business Patterns, 2022

Source: Residential segregation - CHR, American Community Survey, 5-yr. est., 2019-2023

Census participation

(% of HH that self-responded to the 2020 census)
Higher is better

Bradley Co.	68.1%	★
Polk Co.	43.6%	●
U.S.	65.2%	

Lack of social and emotional support

(% of adults reporting they sometimes, rarely, or never get the social & emotional support they need)
Lower is better

Bradley Co.	29%	●
Polk Co.	28%	★
Tennessee	28%	
U.S.	25%	

Source: Census participation - CHR; Census Operational Quality Metrics, 2020

Source: Voter turnout - CHR, MIT Election Data & Science Lab; American Community Survey, 5-yr. est., 2020 & 2016-2020

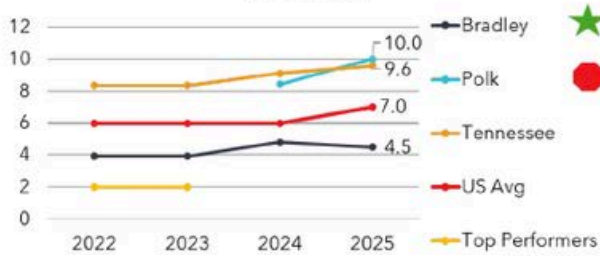


Bradley Medical Center
Vitruvian Health

Community Safety

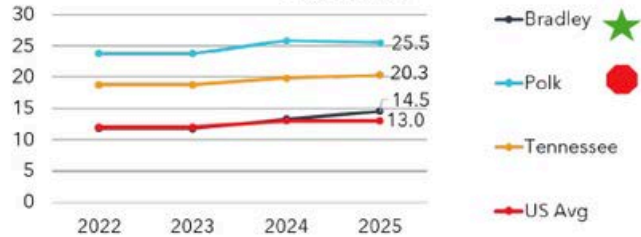
Homicide rate

(# of deaths due to homicide per 100,000 population)
Lower is better



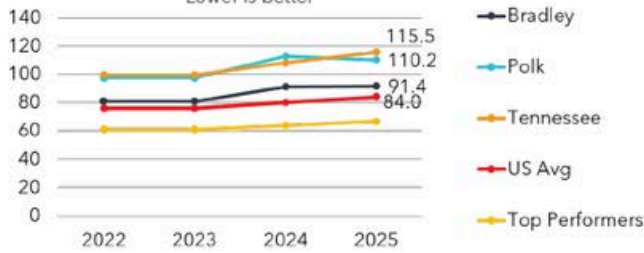
Firearm fatalities*

(# of deaths due to firearms per 100,000 population)
Lower is better



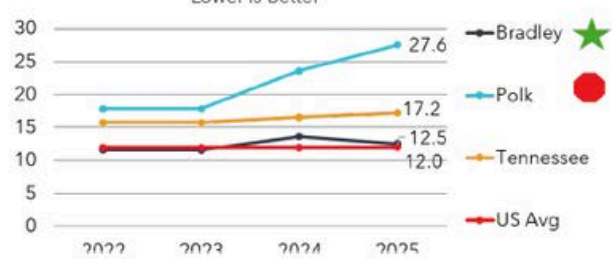
Injury deaths*

(injury mortality per 100,000 population)
Lower is better



Motor vehicle crash deaths

(# of motor vehicle crash deaths per 100,000 pop) goal = 10.0
Lower is better



Source: Homicide rate & Firarm fatalities- CHR; National Center for Health Statistics – Mortality files; Census population, 2016-2022
 Source: Injury deaths - CHR; National Center for Health Statistics – Mortality files; Census population, 2018-2022
 Source: Motor vehicle crash deaths – CHR, National Center for Health Statistics – Mortality Files, Census population, 2016-2022



Physical Environment

Physical environment contains housing and transportation, air, water, and land, civic and community resources.

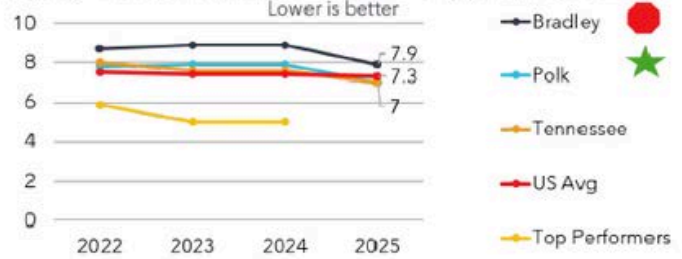
Drinking water violations

(indicator of the presence of health-related drinking water violations)

	2021	2022	2023
Bradley Co.	No	No	No
Polk Co.	No	No	No

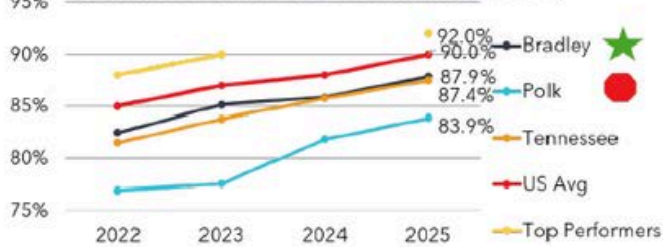
Air pollution particulate matter

(avg daily density of fine particulate matter in micrograms per cubic meter)



Broadband access

(% of households with broadband internet connection)



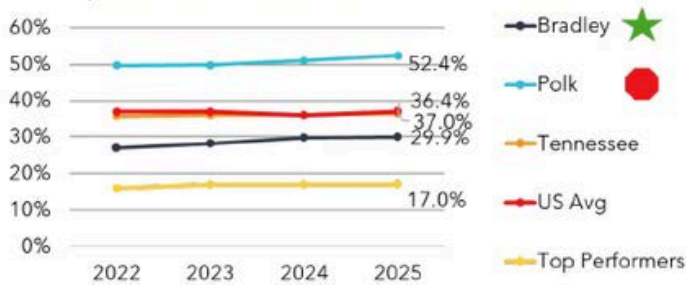
Library access

(Library visits per person living w/in the library service area per year)

Bradley Co.	<1
Polk Co.	2
Tennessee	1
U.S.	2

Long commute- driving alone

(among workers who commute alone, the % that commute >30 min.)



Source: Drinking water violations – CHR; EPA, Safe Drinking Water Information System, 2023

Source: Air pollution – CHR; CDC National Environmental Public Health Tracking Network, 2020

Source: Broadband access – CHR; American Community Survey, 5-yr estimates, 2019-2023

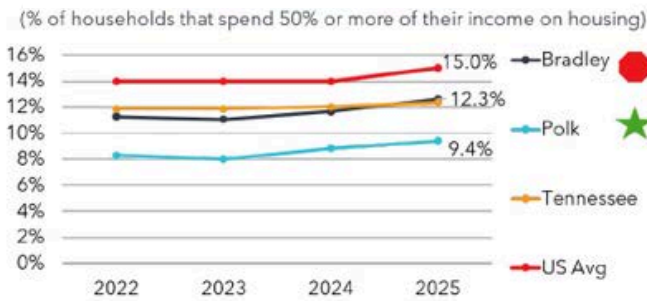
Source: Driving alone to work and long commute – CHR- American Community Survey, 5-year estimates, 2019-2023



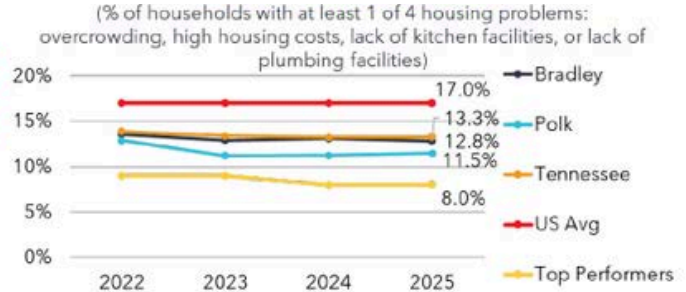
Bradley Medical Center
Vitruvian Health

Housing

Severe housing cost burden



Severe housing problems



Home ownership



Source: Severe housing cost burden & home ownership— CHR; American Community Survey, five-year estimates, 2019-2023
 Source: Severe housing problems – CHR; HUD Comprehensive Housing Affordability Strategy data, 2017-2021.

5. COMMUNITY ASSET INVENTORY

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 that accompanies this document. This asset inventory is not exhaustive and may have inadvertently omitted community resources. There are instructions for making changes after the inventory. The focus groups also identified community resources to improve health, which are listed on page 48 of the Community Health Needs Assessment.

Safe, affordable housing		
Organization/Service	Website	Phone 423-
Low Income Home Energy Assistance Program	http://bccsagencytn.org/low-income-home-energy-assistance-program/	479-4111
Cleveland Bradley Housing Corporation	http://bccsagencytn.org/housing/	423-479-4111
Cleveland Housing Authority	https://www.clevelandhousingauthority.org/	423-479-9659
Affordable Housing for ages 62+	https://www.dcea-affordablehousing.org/bradley-county	423-586-1494
Low Income Housing - Bradley County	https://www.lowincomehousing.us/cty/tn-bradley	
Polk County Human Resources	https://www.sethra.us/locations/polk	423-338-2335
TN Housing Development Agency: Housing Choice Voucher Program	https://thda.org/help-for-renters-section-8/housing-choice-voucher-program	931-520-0608
Affordable Housing (nationwide) Project Home - Family Promise	https://www.affordablehousing.com/housing-authority-bradley-county-tn/ https://www.familypromisebradleytn.org/need-help	423-650-4106
Housing Choice Voucher Program	https://www.hud.gov/helping-americans/housing-choice-vouchers-tenants	800-225-5342
Blue Ridge Landing Apartments	118 Chilhowee Cir, Benton, TN 37307 https://www.lowincomehousing.us/cty/tn-polk	423-241-2112
Low income Housing - Polk County	https://www.lowincomehousing.us/cty/tn-polk	
Jobs providing a living wage		
Organization/Service	Website	Phone 423-
Bradley Cleveland Community Services Agency: Employment Assistance	http://bccsagencytn.org/employment-assistance/	479-4111
Vocational Rehabilitation - Cleveland	https://www.tn.gov/humanservices/ds/vocational-rehabilitation.html Email: info@trousdaleschool.com / 3171 Hewitt Street, Cleveland, TN, 37323	833-751-0597
Adult Education: Trousdale School	https://app.honestjobs.com/account/registration/job-seeker	423-479-7130
Honest Jobs - Background-friendly jobs	https://www.tn.gov/workforce/jobs-and-education/job-search1/find-local-american-job-center.html	
Job Centers: American Job Center of TN	https://www.indeed.com/q-paid-daily-cleveland,-tn-jobs.html?vjk=3f30f3841061c23d	423-790-5552
Indeed		



Bradley County Government Employment Opportunities Ticket to Work	https://bradleycountyttn.gov/departments/human-resources/employment/	423-728-7143
My Employment Options Luttrell Staffing Group - Cleveland TN Malone Workforce Solutions - Cleveland	https://employreward.com/eligibility-test-result-n/	888-322-9570
Cleveland American Job Center	https://myemploymentoptions.com/application/	800-441-3114
TN Find a Job	https://www.luttrellstaffing.com/staffing-agency-cleveland/	423-790-7733
	https://www.malonesolutions.com/?utm_source=gmb&utm_medium=yext	866-805-8600
	https://www.edsi.com/locations/cleveland-american-job-center	423-790-5552
	https://tnvirtualajc.com/find-job-center	

Language barriers

Organization/Service	Website	Phone
TN Dept. of Environment & Conservation Language Assistance	https://www.tn.gov/environment/contacts/language-assistance.html	
The Caring Place	https://thecaringplaceonline.org/	423-472-4414; 423-472-0769
Southeast Spanish, INC.	https://www.sespanish.com/tennessee/	877-374-0095
Iglesia de Dios de la Profecía Hispana de Cleveland TN (Christian Church in Cleveland, TN)		2610 Grove Ave Cleveland, TN 373232
CASA of Bradlry and Polk Counties	https://casabp.org/	423-472-5800

Access to mental health care

Organization/Service	Website	Phone 615-
Mental Health Cooperative: Adult Behavioral Health Services	https://www.mhc-tn.org/make-a-referral/adult-referrals/	743-1555
Living Free Community Outreach (Polk County)	http://www.livingfreecommunityoutreach.org/	423-241-0254
Cleveland Behavioral Health	3555 Keith St NW, Cleveland, TN 37312	423-728-2282
Behavioral Health Safety Net	https://www.tn.gov/behavioral-health/bhsn.html	
Centerstone of Tennessee	https://centerstone.org/	1-877-HOPE-123
Volunteer Behavioral Health Center	https://volunteerbehavioralhealth.org/locations/cleveland-tn/	1-877-567-6051
Ocoee Regional Health Corporation	https://ocoeregional.com/#services	423-338-2831
Pirate Springs	https://piratesprings.org/	423-476-4860
Camelot Care Centers	https://www.clarvida.com/tennessee/programs/	423-476-3799
Open Counseling	https://www.opencounseling.com/tennessee/cleveland	

Access to affordable healthcare and insurance

Organization/Service	Website	Phone 423-
Bradley Medical Center	https://vitruvianhealth.com/	559-6000
Cleveland Family Health Care (Ocoee Regional Health)	https://ocoeregional.com/	423-338-2831



Care guide Services	https://careguideservices.com/	844-358-3286
Atticus Disability Benefits Karis Community	https://www.atticus.com/disability-benefits/n/get-help/survey/landing/default?utm_source=FindHelp.org&landing_experiment=https%3A%2F%2Fwww.atticus.com%2Fdisability-benefits%2Fn%2Fget-help%2Fsurvey%2Flanding%2Fdefault	844-295-9085
Health Prescription Assistance Karis Community	https://www.karishealth.org/karis-medical	423-457-8024
Health Prescription Assistance	https://www.tn.gov/tenncare/members-applicants/eligibility/tenncare-medicaid.html	423-457-8024
TennCare Medicaid		855-259-0701
County Health Department	https://www.tn.gov/health/health-program-areas/localdepartments.html	Bradley County: 423-728-7020; Polk County: 423-338-4533. 423-496-3275
Polk County Health Department (Ducktown)	840 Cherokee Trail, Ducktown, TN 37326	423-338-4533 423-728-7020 888-405-1837
Polk County Health and Environment		
Bradley County Health Department	2279 Parksville Rd, Benton, TN, 37307	
Zion Enrichment & Outreach Center	https://bradleycountyttn.gov/departments/health-department/	
	https://zionoutreachcenter.weebly.com/health--wellness.html	

Access to quality, affordable childcare

Organization/Service	Website	Phone
Boys & Girls Club (Benton Unit, Polk County)	280 Campbell Rd, Benton, TN 37307	423-299-9057
Tennessee Head Start	https://www.myfratn.org/	423-479-9339
First Five Years Fund	https://www.ffyf.org/states/tennessee/	
Child Care Payment Assistance	https://www.tn.gov/humanservices/families/child-care-services/child-care-payment-assistance.html#:~:text=Child%20Care%20Payment%20Assistance%20is,several%20child%20care%20assistance%20programs.	
The Learning Center at PHP		423-299-9062
Tennessee Department of Human Services, Polk County	https://peoplehelpingpeopletn.org/	240 423-338-5332
Family Resource Agency	Cherokee Cir, Benton, TN 37037	423-479-9339
Kiddie University	https://www.familyresourceagency.org/home	423-226-1681
The Caring Place (Resources)	https://www.kiddieutn.com/	423-472-4414
Families First - Department of Human Services	https://thecaringplaceonline.org/services/case-management/	
	https://www.hhs.gov/answers/programs-for-families-and-children/what-is-tanf/index.html	



Transportation		
Organization/Service	Website	Phone
Rural Public Transportation Program (Bradley Co.)	https://www.sethratransit.org/how-to-ride	423-478-3053
Rural Public Transportation Program (Polk-Benton)	https://www.sethratransit.org/how-to-ride	423-338-2335
Rural Public Transportation Program (Polk-Ducktown)	https://www.sethratransit.org/how-to-ride	423-496-2644
Families First - Department of Human Services	https:// www.hhs. gov/ answers/ programs-for-families-and-children/ what-is-tanf/index.html	423-478-0300
Emergency Assistance - Bradley-Cleveland Community Services Agency	http://bccsagencytn.org/our-services/ https://www.sethratransit.org/about-cuats	423-479-4111
Cleveland Urban Area Transit System (CUATS)	3753 Georgetown Rd NW, Cleveland, TN 37312	423-478-1396
U Go Transportation		
STAT Ride - Ducktown	https://www.stat-ride.com/	423-790-7888
Cleveland Transit System	1250 Old Chattanooga Pike SW, Cleveland, TN 37311	706-431-8877
Polk County Transportation info	https:// ocoecountry.com/ transportation/	423-478-1396



Bradley Medical Center
Vitruvian Health

COMMUNITY ASSET INVENTORY CHANGE FORM

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: BMC@HHCS.org or call Bradley Medical Center Marketing Department: 423-559-6299



Bradley Medical Center
Vitruvian Health

COMMUNITY HEALTH NEEDS ASSESSMENT FOR BRADLEY AND POLK COUNTIES, TENNESSEE

Completed in partnership with:

