Community Health Needs Assessment Jefferson Community Health & Life 2025

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I. Executive Summary

Background and process

History

Jefferson Community Health & Life was established in 1963 as Jefferson County Memorial Hospital and Nursing Home; the first facility built as a hospital/nursing home combination in the state of Nebraska. The facility has grown over the years, adding a home health agency in 1984, a community fitness center in 1996, expanding outpatient services throughout the years, and adding the Fairbury Clinic in 2016. The facility's name was changed in 1996 to Jefferson Community Health Center, and again in 2017 to Jefferson Community Health & Life to better reflect its mission, vision and wide variety of services. Through its more than 60-year history, Jefferson Community Health & Life has been continually active and involved in its community and has worked to promote health and wellness.

Community Needs Assessment

Jefferson Community Health & Life began its fifth community health needs assessment early in 2025. JCH&L conducted focus groups with local organizations, held a community stakeholders meeting, held a church-hosted community input meeting and reviewed statistics made available through Public Health Solutions, Blue Valley Community Action, the state of Nebraska, US Census, Health People 2030, and websites such as CancerInFocus Nebraska by the Fred and Pamela Buffet Cancer Center, County Health Rankings and World Life Expectancy.

A Community Health Needs Assessment stakeholders meeting was held at JCH&L with representatives from area health-related agencies. Focus group meetings were conducted with local community organizations including Kiwanis, Rotary, Optimists, and St. Michael's Catholic Church. A total of 34 attended and participated in the various discussions of community health needs.

For purposes of this assessment and report, the primary service area of Jefferson Community Health & Life was considered to be Jefferson County. After reviewing this data, and compiling and reviewing a list of existing resources, JCH&L has developed an implementation plan to address the community's needs.

Prioritized Needs

The identified needs were prioritized by Jefferson Community Health & Life based on the scope of the problem, JCH&L's ability to impact the issue and resources available, and community resources that are available. Based on these criteria, the areas chosen as most important for JCH&L to focus on for the coming three years were:

- 1) Increasing the number of Primary Care Providers
- 2) Mental/Behavioral Health
- 3) Obesity/Nutrition/Sedentary Lifestyle
- 4) Chronic Diseases affected by Obesity and Sedentary Lifestyle, including Diabetes, Heart Disease, Stroke and Cancer

Implementation Plan

JCH&L's implementation plan is a part of this document.

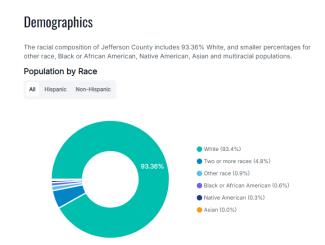
II. Community Description

Jefferson County, Nebraska

The Jefferson Community Health & Life service area for purposes of the community needs assessment is the population of Jefferson County. The population of Jefferson County has been declining since JCH&L opened in 1963. Census numbers show the county with 11,620 people in the 1960 Census. That dropped to 10,436 by 1970; 9,817 in 1980; 8,759 in 1990; 8,333 in 2000; 7,547 in 2010; and 7,240 in 2020. The estimate for 2023 was 7,155.

The population of the county is also aging. As of 2023 estimates, the average age in Jefferson County is 44.7. A total of 29.9 percent of the population was 62 or older (higher than the state total of 21 percent.) A total of 22.8 percent of county residents are under the age of 18 (lower than the state total of 24.2 percent.)

The population of Jefferson County is also becoming more diverse. According to USA Facts, between 2010 and 2022, the Hispanic/Latino population had the most growth increasing by 216 from 205 in 2010 to 421 in 2022.



The World Population Review indicates our county is 93.4 percent white, with those of two or more races making up 4.8 percent of the population.

The US Census Bureau estimates that 4.4 percent of Jefferson County residents speak a language other than English, with Spanish being the top language. The census reports that 2.7 percent of residents are foreign-born.

III. Community Health Needs Assessment Partners

Public Health Solutions District Health Department

Jefferson County and Jefferson Community Health & Life are active partners in the Public Health Solutions District Health Department. Public Health Solutions District Health Department includes Fillmore, Jefferson, Saline, Gage and Thayer counties in southeast Nebraska.

Blue Valley Community Action Partnership

Blue Valley Community Action Partnership is a community action agency striving to overcome poverty by helping people, improving lives and strengthening communities. BVCA serves Butler, Fillmore, Gage, Jefferson, Polk, Saline, Seward, Thayer and York counties in Nebraska.

JCH&L Board of Directors

The board of directors is an eight-member volunteer board elected from the membership of JCH&L. A physician also attends board meetings, along with JCH&L administration. JCH&L is a private not-for-profit community charity. Membership includes any individual or company who has donated \$100 to JCH&L. The board identifies strategic goals and objectives and works with the chief executive officer to see that strategic goals and objectives are implemented. The board also approves and oversees the Community Health Needs Assessment implementation plan along with the strategic plan.

Medical Staff, Providers, and Clinical staff

Medical staff, providers and clinical staff strive to determine the needs of patients in Jefferson County and the surrounding area and meet those needs with exceptional quality health care services.

JCH&L team managers

Jefferson Community Health & Life's team managers include managers of all departments of JCH&L. All work with CEO Holly Wolff and the administrative team to implement the strategic plan as adopted and the CHNA implementation plan as approved by the board of directors. Managers and departments work to identify and meet community health care needs.

Community Organizations

JCH&L sought input for the 2025 Community Health Care Needs Assessment from Jefferson County organizations and agencies. These included: Blue Rivers Area Agency on Aging, Fairbury Rotary Club, Fairbury Optimist Club, Fairbury Kiwanis Club, Blue Valley Community Action, Partnership Fairbury Public Schools, St. Paul's Lutheran School of Plymouth, Fairbury Dental Associates, Jefferson County Commissioners, City of Fairbury, Jefferson County Ministerial Alliance and local churches.

IV. Community Health Needs Assessment Methodology and Process

Jefferson Community Health & Life's Needs Assessment process included the review and consideration of data available from community survey results, Census reports, and health-related data available from the State of Nebraska, the US Census, Healthy People 2030, Public Health Solutions district health, and websites such as County Health Rankings, World Life Expectancy and CancerInFocus Nebraska by the Fred and Pamela Buffet Cancer Center.

V. Identified Community Needs

Needs/concerns Identified include, not listed in priority order:

- Additional primary care providers
- Mental Health
- Obesity
- Sedentary lifestyle
- Chronic diseases (Diabetes, COPD, heart disease, cancer, high cholesterol)
- Aging population
- Poverty/economics
- Lack of OB/childbirth services
- Need for better paying jobs
- Substance abuse (alcohol and drugs)
- **■** Transportation
- Suicide
- Lack of awareness of health service availability
- Nursing home availability
- Special needs of geriatric population/aging community
- Services for disabled
- Nutrition
- Specialties: pulmonology, neurology, endocrinology, midwives, special needs, mental health co-morbidities
- Services: radiation, dialysis
- General health education
- Children's health needs/pediatrician
- Awareness of home health/home care services
- Access to dental care, especially for Medicaid
- Daycare
- Veterans access to care and services
- Substandard housing
- Behavior problems in school
- Parenting/ parenting education
- Broadband expansion
- Need socialization, enjoyable activities
- Walkable community (better sidewalks, more trails)
- Incentives to exercise such as walking or running groups
- Need to get to the root cause of poor health, not just take a pill
- Water quality concerns
- Domestic violence
- Lack of seatbelt and child safety seat use
- Smoking
- People who fall through the cracks (make too much for Medicaid, can't afford insurance)
- People to step up and provide positive leadership
- Hunger

- Before and after school activities
- Long waits to see some specialists
- Insurance cost, frustrations, coverage
- Lack of safe housing
- Social isolation
- Support groups for addiction, mental health, grief (not during workday)
- Aging population
- Immunizations same day as pediatric wellness checks

How healthy is our county?

Each focus group was asked their thoughts on how healthy Jefferson County residents are in 2025 on a scale of: Very Healthy, Healthy, Somewhat Healthy, Somewhat Unhealthy, Unhealthy, Very Unhealthy. In an unscientific survey (raising hands) a majority of participants in all groups chose Somewhat Healthy as the top choice, with Somewhat Unhealthy close behind.

Primary care providers

Jefferson County was designated as a primary care shortage area by HRSA (Health Resources and Services Administration) prior to the practice of two primary care family medicine physicians in 2025. JCH&L Fairbury Clinic currently has one primary care family practice provider and five Advanced Practice Providers (three Family Nurse Practitioners and two Physician Assistants.) JCH&L currently has _____ medical residents and advanced practice providers who are covering the Emergency Room along with the providers on staff.

JCH&L is doing a concentrated recruitment drive to add at least two primary care family practice physicians. JCH&L is also working toward implementation of Avel, which allows telehealth coverage and back up for the emergency department.

Mental Health Care providers

Jefferson County was designated as a mental health care shortage area by HRSA (Health Resources and Services Administration. The county has a 1:1,410 population ratio.

The county is served by Blue Valley Behavioral Health (based in Gage County), Behavioral Health Solutions, and tele-health services by Genesis Psychiatric Group in the JCH&L specialty clinics. The Fairbury Public Schools uses mental health services through ESU 5. In 2025, JCH&L added a Psychiatric Mental Health Nurse Practitioner and a Provisionally Licensed Mental Health Practitioner. Services are offered through JCH&L Behavioral Health.

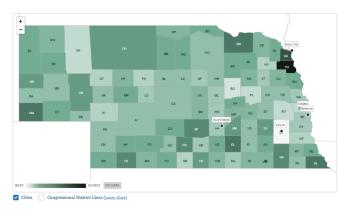
County Ratings for Major Health Concerns

State of Nebraska and Jefferson County life expectancy

The Institute for Health Metrics and Evaluation (IHME) at the University of Washington has a US Health Map which shows life expectancy for females in Jefferson County at 81.5, compared to the statewide life expectancy for females at 81.7; and the life expectancy for men in Jefferson County at 76.6, compared to the statewide life expectancy of 77.4 for men.

For the state of Nebraska, the ten leading causes of death according to the CDC for 2023 (the most recent data available) were: heart disease, cancer, chronic lower respiratory disease, accidents, stroke, Alzheimer's disease, diabetes, hypertension, Parkinson's disease, and septicemia.

Obesity/Lack of Physical Activity

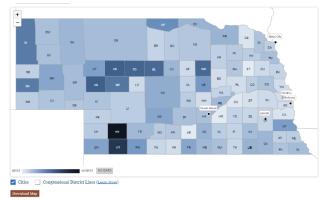


Obesity, nutrition and/or lack of physical activity were mentioned by every group asked about health concerns and priorities for Jefferson County. Obesity, nutrition and lack of physical activity are directly related to many of the top health concerns for our county — including heart disease, stroke and diabetes.

Jefferson County has a 40 percent rate of adult county residents who are obese, according to countyhealthrankings.org (using 2022 data.)

That is higher than the state rate of 36 percent, and higher than the rate reported for the 2022 Community Health Needs Assessment for Jefferson County of 39 percent.

Food Environment Index

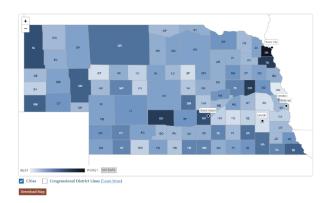


According to the countyhealthrankings.org data, Jefferson County had a food environment index of 7.1, compared to a state rate of 7.6, on a scale of 1 (worst) to 10 (best.) This index measures those who are low income and don't live near a grocery store, as well as the percentage of the population that did not have reliable access to food during the past year.

The current percentage of students who qualify for free and reduced price meals who attend

Fairbury Public Schools (the largest school district in the county) is at 55.93 percent for Central Elementary and 56.76 for Jefferson Intermediate for the 2025-26 school year. The school system offers free meals in the summer for all youth 18 and under.

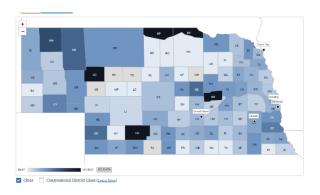
Physical inactivity/sedentary lifestyle



Inactivity is also a factor in obesity. According to the countyhealthrankings.org data, Jefferson County had a 27 percent inactivity rate, compared to the state rate of 24 percent. The percent inactivity was lower for both Jefferson County and for the state than it was in the 2022 Community Health Needs Assessment, when it was 32 percent and 27 percent respectively.

Substance Abuse

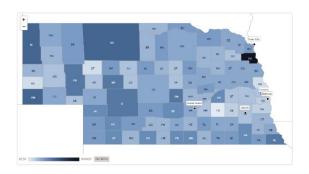
Substance abuse was named as a concern in every focus group. Substance abuse may include (but is not limited to) alcohol, prescription medications, and legal and illegal drugs.



In data from countyhealthrankings.org, a total of 22 percent of driving deaths were found to involve alcohol from 2018 to 2022, down from 29 percent in the 2022 data (2016-2020).

Heavy drinking was reported by 21 percent of Jefferson County adults in 2022, less than 22 percent reported statewide. The 2022 number was down from 22 percent for Jefferson County in the 2022 Community Health Needs Assessment.

Smoking



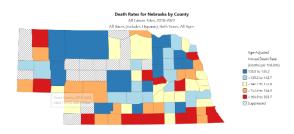
Adult smoking in Jefferson County was at 17 percent in 2022 according to countyhealthrankings.org. That is higher than the Nebraska rate of 14 percent, but down from 19 percent in Jefferson County reported in the 2022 Community Health Needs Assessment (2019 data.)

Heart Disease

The leading cause of death for Nebraskans is heart disease.

Of Nebraska's 93 counties, Jefferson County rates 10th (up from 15th in the 2022 Community Health Needs Assessment.) Jefferson County's rate of heart disease in 2022 was 210.1, higher than the state rate of 160.76 for incidence of heart disease on WorldLifeExpectancy.com.

Cancer



Cancer is the second leading cause of death in Nebraska.

Jefferson County had a higher rate of cancer deaths than the statewide rate for 2018-2022. The county rate was 175.8 per 100,000, while the state rate was 180 per

100,000.

On WorldLifeExpectancy.com, Jefferson County ranked 12th among the state's 93 counties for cancer deaths in 2022. The rate of 174.97 per 100,000 deaths was higher than the Nebraska rate of 150.87.

Lung Disease

Chronic lower respiratory disease is the third leading cause of death in Nebraska.

Jefferson County exceeded the state rate (per 100,000 population) for lung disease deaths for 2022. The Jefferson County rate was 49.84, compared to the state rate of 40.49.

Jefferson County was 29th among Nebraska's 93 counties for lung disease death in 2022 according to WorldLifeExpectancy.com.

Stroke

Stroke is the fourth leading cause of death for Nebraska.

Jefferson County exceeded the state rate (per 100,000 population) for cerebrovascular (stroke) deaths for 2012-2016. There were 40 deaths from stroke in this time period in Jefferson County, with a crude rate of 42.6 and an age adjusted rate of 52.4. The state crude rate was 42.0 and the state age adjusted rate was 33.6.

Jefferson County was 29th among Nebraska's 93 counties for stroke death in 2022 with a rate of 44.2, according to WorldLifeExpectancy.com, higher than the Nebraska rate of 36.49.

Accidental death

Accidents are the fifth leading cause of death in Nebraska.

Jefferson County has a rate of deaths from accidents of 58.11 for 2022, higher than the state rate of 43.17.

WorldLifeExpectancy.com shows Jefferson County as 19th among Nebraska's 93 counties for accidental deaths for 2022.

Alzheimer's Disease

Alzheimer's Disease is the sixth leading cause of death for Nebraska.

Jefferson County has a rate of deaths from Alzheimer's of 17.76 for 2022, lower than the state rate of 29.57.

WorldLifeExpectanc.com lists Jefferson County as 54th among Nebraska's 93 counties for Alzheimer's deaths, down from 2022.

Diabetes

Diabetes is the seventh leading cause of death for Nebraska.

Jefferson County had an age-adjusted death rate per 100,000 population of 22.11, lower than the state rate of 24.64.

WorldLifeExpectancy.com shows Jefferson County as the 40th county in deaths from diabetes of Nebraska's 93 counties.

Parkinson's

Parkinson's Disease is the eighth leading cause of death for Nebraska.

Jefferson County had an age-adjusted death rate per 100,000 population of 12.08, higher than the state rate of 11.03.

WorldLifeExpectancy.com shows Jefferson County as the 5th county in Nebraska for deaths from Parkinson's Disease.

Hypertension

Hypertension is the 9th leading cause of death for Nebraska.

Jefferson County had an age-adjusted death rate per 100,000 population of 4.74, lower than the state rate of 16.68

WorldLifeExpectancy.com shows Jefferson County as the 71st county in deaths from hypertension of Nebraska's 93 counties.

Septicemia

Septicemia is the 10th leading cause of death for Nebraska.

Jefferson County had an age-adjusted death rate per 100,000 population for a rate of 5.88, higher than the state rate of 8.5

WorldLifeExpectancy.com shows Jefferson County as the 71st county in deaths from Septicemia of Nebraska's 93 counties.

Suicide

Suicide was also listed as a concern for many focus groups. It is perceived that a shortage of mental health services for our county is part of this concern.

Jefferson County's 13.41 adjusted rate per 100,000 population for deaths by suicide in 2022 was less than the state rate of 14.97.

WorldLifeExpectancy.com shows Jefferson County as 35th among Nebraska counties for deaths by suicide.

Mental Health

Mental Health was an area mentioned in all community survey groups as an area of need.

Jefferson County residents reported an average of 4.8 poor mental health days of the past 30 days, and 16 percent reported experiencing poor mental health for 14 or more days in the countyhealthrankings.com data. For the state of Nebraska, the number was slightly better, at 4.3 days in the last 30 days being poor mental health days and 13 percent experiencing 14 or more poor mental health days in the past 30 days.

Dental Care

Dental care and oral health were mentioned several during sessions. Jefferson County is listed as a federal dental shortage area.

Jefferson County currently has one resident dentist. A second practice, which had two dentists traveling to Fairbury regularly, closed its Fairbury practice in August 2025.

Hospital staff report area Medicaid-eligible residents and uninsured utilize emergency services at Jefferson Community for emergency dental care. Untreated abscessed teeth were reported as a common problem for emergency dental visits. Many in this position are advised to follow up with their dentist and say they do not have a dentist

Economy

The economy and financial needs were mentioned in every focus group. High inflation, rising prices with wages not keeping pace, the cost of health care, and not enough high-paying jobs available to county residents were major points of concern.

For March 2025, unemployment was 2.8 percent for Jefferson County, and the state rate was 2.9 percent.

The 2023 Census estimate showed median household income of a Jefferson County resident is \$60,568 a year and the poverty rate is 9.87%. Countyhealthrankings.com showed 14 percent of Jefferson County children are living in poverty.

Countyhealthrankings.com showed 93 percent of Jefferson County residents are high school graduates, and 62 percent have at least some college education.

A. Process for Prioritizing

JCH&L Administration reviewed the Community Health Needs assessment data and prioritized the needs for Jefferson Community Health & Life to address, presenting them to the board of directors for their consideration and approval.

The following needs were identified as the most important for Jefferson Community Health & Life to address, based on the following criteria: 1) The number of people affected; 2) The severity of the Problem; 3) JCH&L's ability to impact the problem; and 4) the extent to which other organizations are meeting or may be able to help meet the need.

B. Prioritized needs

- 1) Increasing the number of Primary Care Providers
- 2) Mental/Behavioral Health
- 3) Obesity/Nutrition/Sedentary Lifestyle
- 4) Chronic Diseases affected by Obesity and Sedentary Lifestyle, including Diabetes, Heart Disease, Stroke and Cancer

A. Community Resources and Assets to Address Needs

Community

Public Health Solutions district health department

One local dental office

Blue Valley Community Action Partnership

Blue Valley Behavioral Health

Head Start

Fairbury Public Schools

Nebraska Department of Health and Human Services

Hope Crisis Center

Jefferson Community Coalition

Jefferson County Extension (University of Nebraska-Lincoln)

Blue Rivers Area Agency on Aging, transportation, Senior Center, and home-delivered meals

City of Fairbury

Jefferson County Sheriff's office

County Churches

Apace Services

Behavioral Medicine Clinic

GrandView EyeCare

Heritage Care Center

Cedarwood assisted living

Bryan Health

CHI Health

Cottonwood Hospice

Aseracare Hospice

FYI Center

Local 12-Step programs

Safe Kids

Farm Safety 4 Just Kids

Progressive Agriculture Safety Day

Blue River LOSS team

JeffCo on the Move

Jefferson Community Health & Life

JCH&L Burkley Fitness Center

JCH&L Sports Medicine and Rehab Services

JCH&L Fairbury Clinic

JCH&L Home Health

JCH&L Outpatient Services

JCH&L Pharmacy

(Partnership with BVCA for immunization clinic)

B. Implementation Strategy

A. How JCH&L will address health needs

We have developed an implementation plan (attached.) JCH&L board, administration and staff will follow the implementation plan, as well as our three-year strategic plan. The board of directors adopts and approves a strategic plan every three years, which is carried out by administration and staff at JCH&L.

B. Needs Jefferson Community Health & Life will not address

There were needs identified that JCH&L did not choose to address. While these needs are important to the community, they were not chosen based on the prioritization process.

Needs which will not be addressed specifically by JCH&L include:

- *Substance Abuse, smoking: We will continue to work to be good community partners to all area entities working to improve our community's status with substance abuse and smoking. This area is also not named in priorities because we believe a much broader community approach will be required to be successful in improving our community's status with substance abuse.
- *Suicide: We will continue to work to be good community partners to all area entities working toward suicide prevention and assistance to those affected by suicide. This area is not named in priorities, because a much broader community approach will be required to be successful in reducing the number of suicides.
- *Alzheimer's Disease: We will continue to offer an Alzheimer's Caregiver's Support Group and we will provide educational resources to our community through the Alzheimer's Association. We also partner with the Fairbury High School FBLA to raise money through an Alzheimer's Memory Walk annually. This is the extent of what we feel our involvement can be at this time, so we do not intend to name this as a major area of activity.
- *Additional Specialties and new service: JCH&L is always seeking possibilities for additional specialties and possible new services and will continue this process as a part of our ongoing strategic planning process. However, these are not named in our priorities because of the need for personnel and resources to address priority areas, except for a few select areas which directly affect our priority goals for the next three years.
- * **Dental Health:** JCH&L wishes to be a good community partner with all area agencies and practices which provide services in all of these areas, which are all outside of our current offerings. We do not intend to name dental health as a priority area for JCH&L at the present time.
- *Economy, Housing: These are ongoing societal issues which affect our businesses and services. We will continue to be a good community partner

- in dealing with these issues in our area, but we do not intend to make these areas our priority areas of focus.
- *Insurance/Uninsured/Underinsured: We continue to seek ways that we as an organization can best serve those who are uninsured or underinsured, including charity care. These are not named as priority areas at this time.
- *County demographics: We will continue to work to plan for and prepare for the changing demographics of our county, and will work with our city, county, chamber of commerce and other organizations to continue to help our county grow. We will not name these areas as priority areas at this time.
- *Transportation: We will continue to be a good community partner with organizations that provide transportation. We will not name this as a priority area at this time.
- *Daycare: We will continue to be good community partners with organizations that provide daycare, including providing education and children. We will not name this as a priority area at this time.
- *Awareness of services, general health education, parenting education: We will continue to provide community information and education but will not name these as priority areas at this time.
- *Veterans services & services for the disabled: We will continue to provide community information and education but will not name these as priority areas at this time.
- *Housing: We will continue to be a good community partner with agencies that provide housing but will not name this as priority areas at this time.
- *Broadband expansion: We will continue to be a good community partner with agencies that provide broadband but will not name this as a priority area at this time.
- *Nursing home availability: We continue to provide a 40-bed nursing home. We will not name this as a priority area at this time.
- *Behavior problems in school, school activities: We will continue to be a good community partner with the local schools (and will work to schedule some joint activities but will not name this as a priority area because it is not our main focus.
- *Socialization, enjoyable activities, walkable community, incentives to exercise, getting to the root cause of poor health, social isolation: We will continue to be a good community partner and work toward all of these areas but will not name these as priority areas at this time.
- *Water quality concerns: We will continue to be a good community partner with the city but will not name this as a priority area because it is not our main focus.
- *Domestic violence: We will continue to be good community partners with organizations that provide support and education. We will also continue to provide healthcare services to victims of domestic violence but will not name this as a priority area at this time.

- *Seatbelts, child safety seat use: We will continue to provide child safety seat checkups but will not name this as a priority area at this time.
- *Hunger: We will continue to be a good community partner with the local agencies that provide food pantries but will not name this as a priority area.
- *Support group: We will continue to provide an Alzheimer's Support Group, work with Cottonwood Hospice to provide a grief support group, and are looking at offering a Parkinson's Support Group, but will not name this as a priority area at this time.
- *Immunization: We will continue to be a good partner with Blue Valley Community Action on immunizations and will work with them to try to make schedules work the best possible for parents but will not name this as a priority area at this time.

Implementation Plan for Identified Community Needs -- 2025

Prioritized needs (As determined by Community Health Needs Assessment 2025 and prioritized by the JCH&L Administration and Board of Directors)

- 1) Increasing the number of Primary Care Providers
- 2) Mental/Behavioral Health
- 3) Obesity/Nutrition/Sedentary Lifestyle
- 4) Chronic Diseases affected by Nutrition, Obesity and Sedentary Lifestyle, including Diabetes, Heart Disease, Stroke and Cancer

Goals:

- I. Increase number of primary care family medicine providers.
 - 1) Recruitment is under way through a variety of avenues
- II. Grow the JCH&L Behavioral Health program.
 - 1) Promote behavioral health program
 - 2) Consider addition of more providers as the program grows
 - a) Work with two individuals who are completing schooling toward behavioral health degrees
 - b) Consider space requirements of growing the program as Facility Master Plan is formed

III. Implement and grow programs directed at reducing obesity, increasing nutrition and reducing sedentary lifestyle

- 1) Consider benefit of reimplementing a Smart Moves-type weight management program
- 2) Hold 2 Kids Cooking classes each year
- 3) Continuing to support the city of Fairbury as the city works to improve walking/biking routes and trails in Fairbury
- 4) Offer youth events and educational programs at JCH&L Burkley Fitness Center
- 5) Continue to partner with schools and other youth organizations

IV. Implement and grow programs working toward reducing the incidence of and improving the treatment of diabetes, heart disease, stroke and cancer

- 1) Continue to provide incentives for Men's and Women's health
- 2) Grow Fairbury Clinic Blood Pressure program
- 3) Offer a Family Health Fair
- 4) Consider a men's health event
- 5) Consider whether women's health days are meeting the goals for the program or need to be revamped
- 6) Increase offerings of community health education program on various topics
- 7) Increase use of Medicare Wellness Visit program
- 8) Continue working toward goals for various screenings
- 9) Consider addition of pulmonology specialty
- 10) Continue to provide financial support for the Burkley Fitness Center
- 11) Grow diabetes education program

Results from 2022 Plan:

*Continue to grow Smart Moves program (a program of the National Diabetes Prevention program)

 After being on hold for some time because of COVID, Smart Moves restarted with a group in 2022. That group has kept a "support group" going after the year-long program.

*Restart Kids Cooking classes as soon as possible

Several Kid's Cooking Classes have been held for area youth and a parent or guardian. The class prepares and then shares a meal, instructed by Dietitian Lisa Edeal.

*Continue to be an active part of community partnerships working to establish Walkable Community and walking/bike trails in Fairbury

Enhance community's sidewalks and safe walking/biking routes

City has applied for grants and JCH&L has been a supporter.

Encourage active lifestyles for those of all ages

 Held a family run in September 2024 sponsored by JCH&L Burkley Fitness Center and Jeffs gone M.A.D.

Work with city to establish walking area in Fairbury Community Building, accessible to Senior Diners and community in general

 JCH&L worked with the city to establish a walking area in the Fairbury Community Building, and did monthly prizes for the top walkers for the first six months to encourage its use

*Continue to partner with schools and other youth organizations

Offer sidelines services for athletes

 JCH&L Sports Medicine and Rehab Services provides sidelines services for Fairbury High School football in case of injuries.

Offer youth events at the Burkley Fitness Center

- Burkley Fitness Center has held a number of lifeguarded Youth Swim events. One event was in combination with a pediatric therapy open house with kids activities.
- Burkley Fitness Center has offered Fitness is Fun activities for children in kindergarten through 6th grade in the summers.
- Burkley Fitness Center manager Jen Johnson has led a sixthgrade adventure day at Buckley Creek Recreation Area each spring.

Provide education and information as needed by area schools

- Provided a program for Meridian School on vaping during Red Ribbon Week 2024-2025 school year
- Provided programs for Progressive Ag Safety Days each summer
- Provided a Teddy Bear clinic in spring 2025 for area children and their parents, and showed them what a physical includes

*Continue Men's and Women's Health activities

Offer incentives for men and women who have physicals

 JCH&L provides a \$5 gift certificate to the Bonham Theatre to men and women who have a physical, and women who have a mammogram

Plan a men's health event

We have continued to discuss how to successfully offer a men's health event

Continue to offer and promote Women's Health Days

- Women's health days continue to be offered, providing women a way to get mammogram, blood work, annual exam and mammogram all with one trip in about 3 hours
- *Restart offering community health education programs

Offer community programs on nutrition, obesity, healthy lifestyles, chronic diseases, mental health and substance abuse

- *Enhance use of Medicare Wellness Visit program
 - Have promoted and enhanced the Medicare Wellness Visit program, including articles in the Fairbury Clinic newsletter and local media
- *Continue development and expansion of chronic care coordination program
- *Consider addition of telehealth services for pulmonology
 - Still working on the possibility of adding a pulmonologist, potentially through telehealth
- *Adding certified personal trainers to our fitness center staff.
 - A certified personal trainer was added to the fitness center staff in the summer of 2025
- *Continue to provide financial support for the Burkley Fitness Center
 - JCH&L continues to provide financial support to the Burkley Fitness Center.
- *Consider adding quality incentives to physician contracts to address prioritized community needs
 - Participation in a new ACO has begun to add quality measures targeted for physician-driven outcomes.
- *Increase mental health services being offered to the community
 - Began offering clinic-based behavioral health services in the summer of 2025
- *Become involved in local coalitions working to improve mental health and substance abuse
 - Participated in Upstream mapping workshop
 - Ashley Norden, clinic administrator, represents JCH&L on the Jefferson Community Coalition.
- *Continue involvement with Fairbury Senior Diners.

Help promote Senior Diners, which offers nutritious meals and social interaction to those who are 60 and older

JCH&L helps to promote Senior Diners

 Lana Likens serves on Blue Rivers Area Agency on Aging Advisory board (meets quarterly)

Continue to offer monthly health education program

JCH&L offers monthly (and sometimes twice a month)

educational programs at Fairbury Senior Diners

References

- *US Census 2020, US Census estimates 2023
- *Nebraska 2016 Vital Statistics Report, issued in 2017. Nebraska Department of Health and Human Services. (No newer reports available from Nebraska Vital Statistics.)
- *Cancer InFocus Nebraska UNMC, Fred and Pamela Buffett Cancer Center
- *CDC Stats of the States https://www.cdc.gov/nchs/state-stats/states/ne.html
- * Nebraska Department of Health and Human Services. https://dhhs.ne.gov/TopDeathCauses.
- *USA Facts. USA facts.org
- *DATAUSA
- *World Life Expectancy web site. www.worldlifeexpectancy.com
- *County Health Rankings and Roadmaps countyhealthrankings.org
- *Nebraska Health and Human Services shortage areas http://dhhs.ne.gov/Pages/Rural-Health-Nebraska-Loan-Repayment-Programs.aspx