



Community Health Improvement Plan
2025-2028

March 2026

Onvida Health 2025 – 2028 Community Health Improvement Plan

Addressing Significant Health Needs

Onvida Health and Yuma Rehabilitation Hospital conducted a Community Health Needs Assessment (CHNA) in 2025 to better understand the most pressing health challenges facing our region. Following the assessment, Onvida Health partnered with Southwest Arizona Town Hall and our Yuma County public health partners to host a community town hall in August 2025. More than 100 community leaders, healthcare professionals, educators, nonprofit partners, and key stakeholders participated. The event included a presentation of the 2025 CHNA followed by facilitated breakout sessions, designed to generate meaningful discussions, shared accountability, and collaborative solutions. The event also served as an important connection to building new partnerships among key stakeholders across multiple industries. Input from the town hall has directly informed organizational strategic goals to collaboratively improve the health of our community.

Onvida Health adopted the below-listed community health priorities as a working document and vision to address the top health concerns within our defined service area, Yuma County. In alignment with our purpose, pillars, and strategic priorities, Onvida Health will focus on the below listed identified needs:

1. Access to Healthcare Services
2. Mental and Behavioral Health
3. Heart Disease and Stroke

Strategies for addressing health priorities are outlined in this document.

Priority Area: Access to Healthcare

Difficulties Accessing Services:

Nearly half, (48.9%) of Yuma County adults report experiencing some type of difficulty or delay in obtaining health care services in the past year.

DISPARITY ► Barriers to care are reported at higher rates in the Foothills area and among women, adults age 40 to 64, those living below the federal poverty level, and especially LGBTQ+ respondents.

TREND ► Over time, two barriers have recorded a significant increase: limited appointment availability and lack of transportation.

Goal: Improve access to healthcare services across Yuma County.

Target Population(s): Yuma County to include south county and Foothills.

Strategy 1: Expand Graduate Medical Education – Primary Care

Strategy 2: Strengthen provider recruitment

Strategy 3: Partner to launch a primary care medical school

Strategy 4: Expand and optimize clinic sites

Strategy 6: Continue transitional care services for high-risk patients

Strategy 7: Provide non-emergency medical transportation

Priority Area: Behavioral Health

Mental Health Providers

In 2024, there were 186 mental health providers in Yuma County (including psychiatrists, psychologists, clinical social workers, and counselors who specialize in mental health care), translating to a rate of 87.0 per 100,000 population (compared to AZ and US at 196.0 and 332.6 respectively)

Diagnosed Depression

A total of 25.3% of Yuma County adults report having been diagnosed by a physician or other health professional with a depressive disorder (such as depression, major depression, dysthymia, or minor depression).

BENCHMARK ► Higher than the rate reported across Arizona, but lower than the national rate.

DISPARITY ► Higher rates reported in Yuma, compared to state averages.

Difficulty Accessing Mental Health Services

A total of 10.7% of Yuma County adults report a time in the past year when they needed mental health services but were not able to obtain them.

TREND ► Represents a significant increase over time.

DISPARITY ► More frequently reported among adults younger than 65, individuals living below the federal poverty level, and residents of diverse racial and ethnic backgrounds.

Goal: Expand timely and equitable access to behavioral health services.

Target population: Yuma County residents, to include targeted areas of:
Veterans, Indian Health and Tribal communities, law enforcement, and geriatrics.

- Strategy 1:** Launch psychiatry graduate medical education residency
- Strategy 2:** Strengthen behavioral health workforce
- Strategy 3:** Expand facilities to support added patient volumes
- Strategy 4:** Expand Intensive Outpatient Services
- Strategy 5:** Partner with local community and social service agencies to raise awareness about behavioral health while also reducing stigma

Priority Area: Heart Disease and Stroke

Between 2021 and 2023, Yuma County experienced an annual average heart disease mortality rate of 206.6 deaths per 100,000 population. A total of 10.5% of surveyed adults report that they currently have or have been diagnosed with heart disease, such as coronary heart disease, angina, or heart attack.

- BENCHMARK ► Fails to satisfy the Healthy People 2030 objective.
- TREND ► Increasing significantly over time within the county.
- DISPARITY ► Rates are considerably higher among white residents.

Stroke:

Between 2021 and 2023, the annual average stroke mortality rate in Yuma County was 51.5 deaths per 100,000 population.

- BENCHMARK ► Fails to satisfy the Healthy People 2030 objective.
- TREND ► Rising significantly, reaching the highest level recorded in the county in the past decade.
- DISPARITY ► Rates are significantly higher among white residents.

Goal: Reduce heart disease and stroke mortality through prevention, early detection, coordinate care, and education.

Target Population(s): Yuma County residents, with targeted messaging to high-risk white population.

- Strategy 1:** Strengthen care coordination between primary care and cardiac specialists
- Strategy 2:** Improve access and availability of advanced cardiac care locally
- Strategy 3:** Partner with community to increase heart disease and stroke awareness and prevention efforts