



Office of Rural Health Annual Report

THRIVE 2017

VA



U.S. Department of Veterans Affairs
Veterans Health Administration
Office of Rural Health



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EXECUTIVE DIRECTOR'S LETTER

From coast to coast, America's Veterans call a variety of rural communities home. And regardless of where they live, the VHA Office of Rural Health (ORH) is committed to helping them thrive.

In 2017, we continued to execute our mission to identify, develop, refine and disseminate programs that serve rural Veterans' mental and physical health. Our initiatives ranged from innovative telehealth solutions to approaches that address core rural health care challenges, such as a lack of transportation options or qualified providers. On all fronts, our guiding principle has remained the same – to support the most innovative and effective programs serving the greatest need as efficiently as possible.

The health care challenges facing rural Veterans are serious and complex. That's why ORH remains committed to partnering with stakeholders from across government, academia and private industry to better serve the rural health care workforce. From promoting broadband deployment to training clinical providers, these partnerships inform our perspective and expand our reach into the communities that need it most.

As the national health care dialogue continues to evolve, ORH remains flexible and adaptable. Although our mission is unchanged, national legislation and evolving patient needs will inform how we deliver on our promise to rural Veterans. Strengthened by our partnerships, informed by research, and powered by innovation, we remain focused on our highest goal – helping rural Veterans **thrive**.

Thomas F. Klobucar, PhD

Executive Director, Office of Rural Health

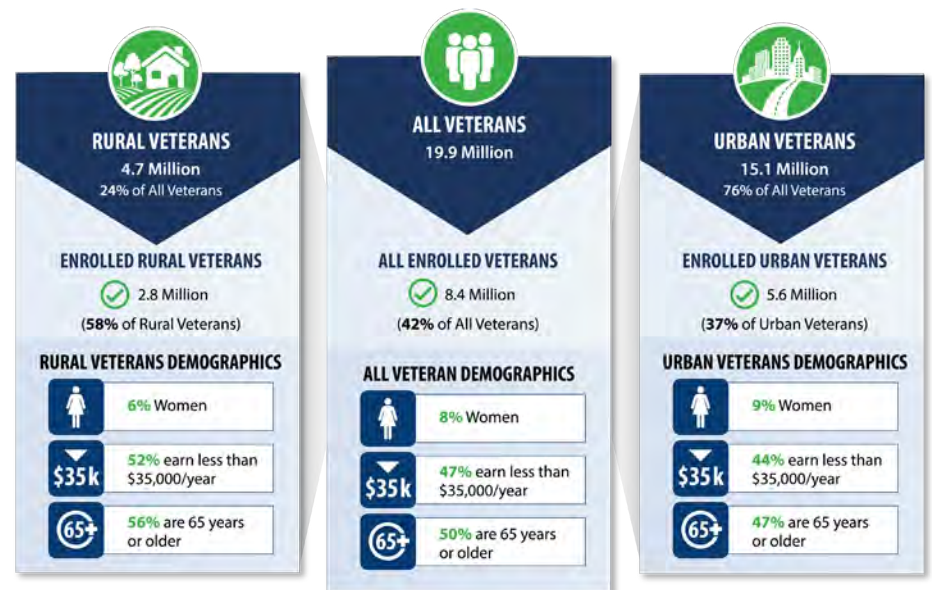


WHO WE SERVE

Almost a quarter of all Veterans in the United States return from active military careers to reside in rural communities. Veterans choose these communities for a variety of reasons and benefits, including proximity to family, friends and community; open space for recreation; lower cost of living; or more privacy.

However, the benefits of rural living also present unique challenges. Rural Veterans often face a variety of obstacles separating them from quality medical care, including hospital closings; greater geographic and distance barriers; provider shortages; and fewer transportation and employment options.

In recognition of these challenges, VA allocates 32 percent of its health care budget to promote rural Veteran care. ORH uses this budget to implement initiatives and programs which improve the health and well-being of rural Veterans by increasing their access to care and services.



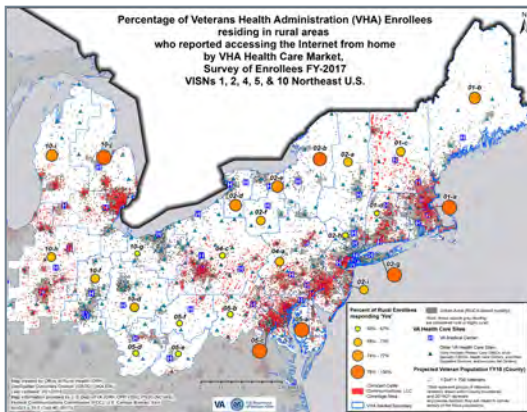
OUR OFFICE

For more than a decade, ORH has pursued a four-part mission: promote the health and well-being of rural Veterans, generate and diffuse knowledge regarding rural Veteran health, strengthen community health care infrastructure that serves rural Veterans, and inform policy that impacts rural Veteran care delivery.

In 2017, ORH made great strides toward pursuing its mission to increase access to care for rural Veterans. Together with its Veterans Rural Health Resource Centers (VRHRC), the office collaborated with more than 15 clinical and administrative program offices to successfully fund and administer innovative programs that reached more than 1,000 VA sites of care, increasing access to primary, specialty and mental health care services for more than 700,000 Veterans. Fiscal year (FY) 2017 initiatives include.. solutions include:

- ▶ **Increased virtual access to providers:** ORH funded 22 telehealth initiatives (\$102 million) at 609 VA sites of care to provide mental health, radiology, neurology, ophthalmology and primary care locally to rural Veterans. Ten rural telemental health hubs offer mental health services to 18,000 Veterans, many in rural communities, through more than 165 spoke sites.
- ▶ **Increased rural workforce clinical skills:** ORH funded seven training initiatives (\$12 million) at 51 VA medical sites to enable more local providers to deliver fundamental geriatric, obstetrics and gynecology, nephrology, and psychiatry specialty care services. More than 10,000 provider, staff and student attendees completed training to support rural Veteran care.
- ▶ **Increased transportation assistance:** ORH funded transportation programs (\$17 million) at 40 VA sites of care to reduce the travel burden experienced by rural Veterans due to distance, geography and lack of public transportation. Nearly 43,000 rural Veterans used ORH-provided transportation services in fiscal year 2017.

ORH's GeoSpatial Outcomes Division supported 48 unique projects and produced 146 static maps, 2 interactive maps and 12 data-only deliverables (such as routing and network analysis and closest facility/site selection). The team assisted the ORH Executive Director in providing visual mapping products for six congressional hearings.



Veterans Integrated Service Network (VISN) Rural Consultants continued to serve as communication conduits between VA Central Office, ORH and Veterans Health Administration (VHA) field operations to facilitate information sharing regarding rural access issues. Throughout the year, they worked closely with internal and external stakeholders in their respective VISNs to introduce, implement and evaluate rural projects, as well as report on the budget and effectiveness of each to ORH.

In FY2017, the Veterans Rural Health Advisory Committee (VRHAC) convened its biannual meetings in Reno, Nevada and Washington, D.C. to gain a firsthand understanding of how policy worked at the local level and recommend improvements to the VA Secretary. In Reno, members heard expert presentations; toured a VA medical center, community-based outpatient clinic, tribal center and a homeless center; and met with a rural Veteran panel to discuss health access challenges.



Throughout FY2017, ORH collaborated with its office partners and VRHAC to fulfill the Office's strategic goals as well as VA's five priorities:



Greater Choice



Modernize Our Systems



Focus Resources Efficiently



Improve Timeliness of Services



Suicide Prevention

By remaining aligned with VA-wide priorities, ORH is able to increase access to care and services to help rural Veterans thrive in their communities.



PRIORITY ONE: GREATER CHOICE

VA is focused on expanding Veterans' health care choices through care coordination and technological innovation. ORH demonstrates its commitment to this priority by funding evidence-based programs such as Rural Promising Practices and Enterprise-Wide Initiatives (EWIs) which empower rural Veterans' to choose how and where they receive services and care.

Geographic barriers can hinder rural Veterans from accessing the care they need. To overcome this barrier, ORH supports telehealth technology that provides rural Veterans with virtual access to providers, enabling patients to receive care from their homes or local communities. In FY2017, ORH funded 22 telehealth initiatives at 609 VA sites of care to provide mental health, radiology, neurology, ophthalmology and primary care locally to rural Veterans.

VA's Teleprimary Care program, which establishes teleprimary care hubs and spoke sites to grant access to primary care in rural areas where providers are unavailable, continued to help rural Veterans overcome geographic barriers. In FY2017, Teleprimary Care supported 13,000 rural Veteran encounters.

Rural communities tend to have fewer transportation options, making it difficult for rural Veterans to get to and from appointments. In FY2017, ORH increased transportation assistance for rural Veterans, reducing travel burdens due to distance, geography and lack of public transportation. In FY2017, nearly 43,000 rural Veterans used ORH-provided transportation services, helping to improve timeliness of services by enabling Veterans to get to and from their appointments. Through the Veterans Transportation Services program, ORH helped provide medical transportation services for more than 3,800 rural Veterans and funded salaries for drivers and mobility managers as well as vehicle leasing fees.



PRIORITY TWO: MODERNIZE SYSTEMS

VA is focused on modernizing aging infrastructure and equipment to provide better care for Veterans nationwide. As the largest provider of telehealth services in the country, VA is continuing to upgrade and modernize these services to offer Veterans' access to high-quality clinical care no matter their location.

Provider shortages, long distances to health care facilities and few transportation options often hinder rural Veterans from obtaining timely and quality care. To overcome these challenges, ORH uses telehealth technology to deliver services closer to home. In FY2017, ORH funded 23 enterprise wide telehealth initiatives to build rural-focused health care solutions that enable Veterans, regardless of where they live, to obtain effective health care in remote VA facilities or even in their homes. These rural focused telehealth programs alone reached more than 327,000 Veterans across the country.

Through the Telehealth Equipment Modernization EWI, ORH is making updates and upgrades to aging telehealth equipment in rural-serving VA facilities. From 2009 to 2017, clinics reported a 383 percent increase in rural telehealth encounters.

ORH is also focused on improving home telemonitoring services. Under this approach, clinicians and case managers use simple technology to remotely monitor health data from rural Veterans' homes to track conditions such as blood sugar levels, blood oxygen, or even to check on progress in a home-based rehabilitation program. Since 2009, the number of rural Veterans who use home telemonitoring increased 122 percent.



PRIORITY THREE: FOCUS RESOURCES EFFICIENTLY

In support of VA's commitment to strengthening foundational services, ORH dedicated almost 25 percent of its budget in 2017 to fund 16 initiatives that provide specialty care to rural Veterans.

As 56 percent of the rural Veteran population is 65 and older, strengthening geriatric care is critically important. In FY2017, ORH supported the expansion of the Gerofit Geriatric Fitness Program, an exercise and health promotion initiative for Veterans ages 65 and older, to 13 VA Medical Centers. In total, the Gerofit Geriatric Fitness Program hosted nearly 3,500 rural Veteran encounters. Now rural Veterans have a place to exercise that is closer to home.

Finding a dermatologist can be a challenge in rural communities. Teledermatology, which uses telehealth technology to remotely connect patients and clinicians, helps rural Veterans access qualified care without facing long drives and time away from work and family. In FY2017, Teledermatology expanded store-and-forward Teledermatology to rural sites, including primary care training on dermatologic consults and minor procedures. During the fiscal year, more than 107,000 teledermatology consultations provided care to more than 100,000 rural Veterans at 15 facilities that serve as hubs to 125 rural spokes.

The number of women Veterans is growing rapidly, driving an increase in the need for gynecological services. As of May 2017, 26 percent of enrolled women Veterans lived in rural and highly rural areas. These areas require more primary care providers designated as Women's Health Primary Care Providers and nursing staff trained in women's health.

To help meet this need, ORH funds training programs that specifically support rural women Veterans. The Clinical Skills Training in Women Veterans Health Care program trains rural providers in skills unique to the treatment of women Veterans. By increasing the clinical expertise of local providers, ORH helps connect rural Veterans with the care they need through the efficient use of program resources.



PRIORITY FOUR: IMPROVE TIMELINESS OF SERVICES

As VA works to improve timeliness of services for Veterans, ORH is committed to funding programs that offer same day services for primary care and mental health as well as improving access to care and wait times.

VA uses telehealth to enable rural Veterans to receive care directly in their homes or local communities, instead of traveling hundreds of miles to the nearest medical center. Telehealth visits increased 289 percent in the past 8 years. The Clinical Video Telehealth Patient Tablet program provides computer tablets to rural Veterans for delivery of telehealth care into their homes through a secure internet connection that transmits patient data to a remotely connected VA health care provider. In FY2017, 55 percent of all Clinical Video Telehealth encounters involved rural Veterans.

Rural communities often have a workforce shortage of physicians. To overcome this barrier to care and improve timeliness of services for rural Veterans, ORH supports programs focused on training and workforce. In 2017, ORH increased rural workforce clinical skills by funding seven training initiatives at 51 VA medical sites. This enabled more local providers to deliver fundamental specialty care services like geriatric, obstetrics and gynecology, nephrology and psychiatry services. More than 10,000 provider, staff and student attendees completed training to support rural Veteran care. By training more providers who serve rural Veterans, ORH is improving timeliness of services in rural communities.

In FY2017, ORH supported the addition of Clinical Pharmacy Specialists at more than 60 VA facilities and community based outpatient clinics (CBOCs) in rural communities nationwide. These Pharmacy Specialists are highly-trained clinical workers who focus on and help to increase rural Veterans' access to primary care and provide medication management services to rural Veterans in areas such as diabetes, high blood pressure, pain management, mental health and more. This initiative is estimated to increase access by more than 230,000 visits annually.

In 2017, the Rural Health Training Initiative supported more than 27,000 rural Veteran encounters. The program provided rural clinical training sites for health professions students and clinical residents. Trainees include social workers, nurse practitioners, pharmacists, psychiatrists, optometry students and dental and family medicine residents. Adding more highly trained clinical workers and primary care specialists to rural communities increases the opportunities for rural Veterans to receive care in their communities and improves timeliness of services.



PRIORITY FIVE: SUICIDE PREVENTION

Veteran suicide is the number one clinical priority at VA. [Research](#) shows that service members in transition to Veteran status are at a higher risk of mental health challenges and suicide.

Rural Veterans face a higher suicide rate than their urban counterparts. Through the Rural Suicide Prevention EWI, ORH connects rural Veterans to comprehensive suicide prevention services and resources through enhanced education, public awareness campaigns, community training, crisis support, firearm safety and care management for high risk individuals.

In 2017, ORH funded programs that delivered mental health services to nearly 30,000 enrolled rural Veterans. ORH dedicated almost 12 percent of its budget in fiscal year 2017 to fund 10 mental health EWIs that increase rural Veterans' access to mental health at 414 VA medical sites nationwide. These mental health programs provide support to rural Veterans through telehealth solutions, community outreach programs, interactive online and phone-based resources, and workforce support.

For example, the Community Clergy Training to Support Rural Veterans' Mental Health program, an ORH Rural Promising Practice, helped support rural Veterans' mental health needs by teaching local religious leaders to recognize mental health difficulties and refer Veterans to VA for care. In late FY2017, the Community Clergy Training Program hosted a webinar which tackled this high priority subject in an engaging way and helped community clergy identify a Veteran in distress.

In addition, ten rural Telemental Health Hubs now offer mental health services to 18,000 Veterans, many in rural communities, through more than 165 spoke sites. These Telemental Health Hubs connect mental health specialists with rural sites where Veterans require same-day or urgent access to mental health services, where access is limited due to provider shortages or other barriers.

Additional FY2017 mental health initiatives included:

- ▶ The National Telemental Health Center extended expert mental health services to rural VA facilities to increase Veterans' access to expert clinical recommendations and therapy.
- ▶ Military Sexual Trauma Web-based Therapy delivered specialized mental health care delivery directly to Veterans' homes through telehealth technology.
- ▶ VetsPrevail Web-based Behavioral Support combined principles of cognitive behavioral therapy with interactive e-learning techniques to provide Veterans with tools to overcome mental health challenges such as depression or PTSD.

Innovative collaborations like these, as well as telehealth technology and workforce integration, will continue to help close the gap between urban and rural Veterans seeking mental health treatment.



COMMUNICATIONS UPDATES

In FY2017, the communications team continued its focus on telling the rural Veteran story through an integrated communications strategy that engaged stakeholders across multiple channels through presentations, social media, digital and broadcast media, and webinars.

As part of its effort to address workforce development needs, ORH launched several initiatives that highlighted VA programs, built new partnerships and identified innovative solutions. Efforts included a multi-platform communications campaign and a series of workforce development-themed webinars.

The campaign generated more than 1 million potential impressions and involved 15 communications products. Additional stakeholder engagement efforts included 4 webinars with 216 participants and 13 presenters.

The Office continued to update the ORH website – www.ruralhealth.va.gov – to make it easier for rural Veterans, researchers and partners to access pertinent information. By streamlining content and consolidating pages, ORH connects rural Veterans with the information they need easily and efficiently.



A LOOK AHEAD

As VA and the national health care landscape continue to evolve, ORH will continue to seed, spark and spread innovation to help rural Veterans thrive in their communities.

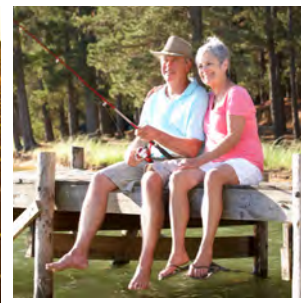
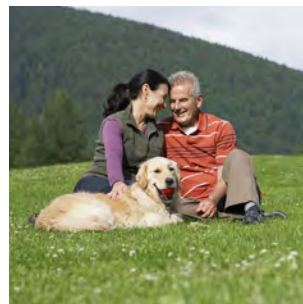
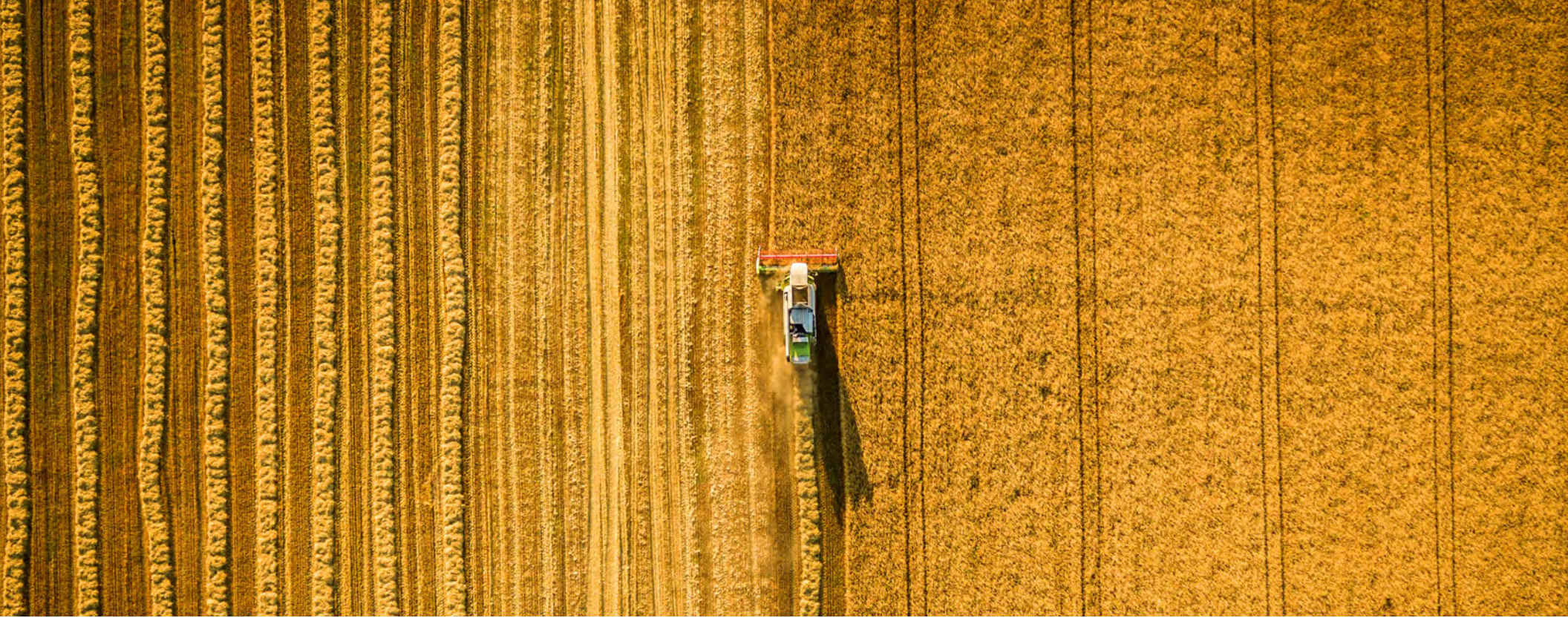
In spring of 2018, Congress directed ORH to create a pilot program to provide Veterans with agricultural vocation training as well as behavioral health services and treatments from licensed providers. In response, ORH collaborated with VA's Nutrition and Food Services as well as the Offices of Care Management and Social Work, Mental Health and Suicide Prevention's Therapeutic and Supported Employment Service section, and Community Engagement ORH, along with the Office of Mental Health Services, Social Work, Community Engagement to develop a pilot program. ORH will provide national oversight of the pilot program and evaluate outcomes to determine agritherapy's ability to enhance outcomes in Veterans with behavioral and mental health needs.

To assist system and infrastructure modernization, ORH will continue to collaborate with more than 25 federal agencies, including the Departments of Labor, Commerce and Transportation to support the Broadband Interagency Working Group (BIWG). This Presidential initiative works to expand rural broadband access and simplify the process of obtaining federal support for broadband investment. The deployment of broadband technology will provide the foundation for future innovative telehealth-powered solutions.

In FY18 and beyond, ORH will continue its partnership with the US Department of Health and Human Services Health Resources and Service Administration to promote innovations as well as sharing of promising practices and culturally competent models of care that demonstrates effectiveness in serving Veterans seeking care in community-based settings.

ORH will continue to examine and remain aligned with key legislation. Specifically, ORH will analyze the MISSION Act's impact on rural health, including policies affecting community care programs or improving recruitment processes for rural health care professionals.

Most importantly, ORH will continue to rely on its collaborative partners inside and outside VA to spread innovations to improve the health and well-being of rural Veterans to enable them to thrive in their local communities.



VA



U.S. Department
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