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In 2015, The U.S. Department of Veterans Affairs (VA) Office of Rural Health (ORH) announced a strategic plan to increase rural Veterans’ access to health care with four ambitious goals:

1. Promote the health and well-being of rural Veterans
2. Generate and diffuse knowledge regarding rural Veteran health
3. Strengthen community care infrastructure where rural Veterans reside
4. Inform health care policy that impacts rural Veterans.

We anchored these goals around the belief that rural Veterans deserve enduring solutions to the health challenges they face. In the second year of our plan, ORH made measurable progress on each of these fronts.

As always, our work was informed by the voice of rural Veterans nationwide. We met rural Veterans from Spokane, Wash., to White River Junction, Vt., to hear about their communities and the obstacles they often overcome to gain access to quality health care. Their stories continue to guide and drive our work.

To meet rural Veterans’ unique needs, ORH launched Enterprise-Wide Initiatives (EWIs) that systematically disseminate proven and innovative health care solutions. At their core, these programs help bridge the health care gap by bringing care to rural Veterans or bringing rural Veterans to care. From mental health specialists to transportation coordinators, community clinics to telehealth infrastructure, the 40 EWIs funded in fiscal year 2016 benefited more than 1.2 million rural Veterans.

We also continued to train providers in new specialty areas, like geriatric medicine, women’s care and suicide prevention. At Veterans Rural Health Resource Centers, clinicians researched and shared best practices. ORH also created new websites, videos, webinars and PSAs to educate community leaders, advocates and the public.

ORH realizes tackling the health care challenges facing rural Veterans requires a team effort. In fiscal year 2016, we built enduring partnerships by collaborating with other federal agencies, national nonprofits, state organizations, health experts and universities to raise awareness, pioneer new telehealth technology and connect more rural Veterans to care than ever before.

As the national health care landscape continues to evolve, ORH’s efforts will remain focused on achieving its four operational goals. Thank you for your support as we continue to identify, disseminate and transform programs that help America’s Veterans thrive in rural communities.

Thomas F. Klobucar, PhD
Acting Executive Director, Office of Rural Health
Nearly 2.7 million Veterans who rely on VA for their health care live in rural communities across all 50 states. Understanding who rural Veterans are allows VA to create programs and leverage technology that meets their unique needs.

Rural Veterans are more likely than their urban counterparts to be male, older than 65 and white, but the rural population also includes women, minorities and younger Veterans:

- Six percent of rural Veterans are women
- About one in every three Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn-era Veterans is rural
- About half of American Indian and Alaska Native Veterans are rural

**WHO WE SERVE: RURAL VETERANS IN AMERICA**
Rural Veterans may see red rocks, rolling plains, snow-capped mountains or the vast ocean outside their window. Although there’s no such thing as a “typical” rural experience, many of these Veterans feel a strong sense of community and patriotism. They enjoy privacy, fresh air, lower cost of living and less traffic.

Alongside these benefits, however, rural Veterans also face challenges that urban Veterans do not:

- Fewer nearby health care providers and limited public transportation options mean longer travel times to access care
- Certain medical conditions – including high blood pressure, obesity, diabetes, and service-related disabilities – are more prevalent in rural areas
- Unaffordable or unreliable access to broadband Internet makes it more difficult to get information and communicate with care providers
- The smaller size of rural communities may mean fewer opportunities to secure housing, education, employment and healthy food
- Rural Americans have a lower average household income than those who live in or near cities.

These factors can influence a Veteran’s overall well-being and make it difficult to access health care or other essential services. To help Veterans thrive in America’s rural communities, ORH identifies and disseminates Enterprise-Wide initiatives.

“I live in the country. I like it out here, but from my home it’s approximately 98 miles to the White River [VA Medical Center]. It wasn’t that much of an issue before I was told that I need to stay in a wheelchair.”

— Ralph S, Rural Veteran, Vermont
Rural Promising Practices are innovative, field-tested programs that stem from clinical experience and VA research and show promise for adoption in a variety of rural settings. Each program that earns this designation from ORH undergoes a rigorous approval process designed to ensure it is cost-effective, feasible, proven-effective, encourages collaboration and expands access to care for rural Veterans.

ORH supports two types of Enterprise-Wide Initiatives:

- **Collaborative Rural Access Solutions** are national initiatives which disseminate established health care practices to VA facilities that serve rural Veterans. In fiscal year 2016, ORH supported 35 Collaborative Rural Access Solutions, more than one-third of which were newly launched.

- **Rural Promising Practices** are innovative, field-tested programs that stem from clinical experience and VA research and show promise for adoption in a variety of rural settings. Each program that earns this designation from ORH undergoes a rigorous approval process designed to ensure it is cost-effective, feasible, proven-effective, encourages collaboration and expands access to care for rural Veterans.
PROVEN COLLABORATIVE RURAL ACCESS SOLUTIONS

The health care challenges facing rural communities often cross state boundaries. For example, rural Veterans in New Mexico may face similar transportation difficulties as those in Maine, and the same health conditions may be prevalent in rural parts of Alaska and Florida. As a result, ORH partnered with local VA Medical Centers to expand proven VA programs that address health care access challenges to rural Veterans.

RURAL EXPANSION OF TELE-INTENSIVE CARE UNIT

Many rural communities face a shortage of Intensive Care Unit (ICU) care providers, posing a serious risk to their most vulnerable patients. ORH funded the expansion of Tele-Intensive Care Units, which link specialized care providers with the patient’s bedside care team through remote monitoring. Remote intensivists and clinical care nurses can check on patients at any time, track their vital signs, review medical records and order certain medical tests from thousands of miles away.

In fiscal year 2016, Tele-ICU nurses cared for more than 14,000 patients via nearly 95,000 bedside clinician interactions and nearly 20,900 video interactions with patients and caregivers. The expansion of the program will continue with the opening of a new command center in Baltimore, Maryland in 2017, adding more than 100 new beds to ICU and emergency departments across eight new hospitals nationwide.

EXPANDING RURAL PROMISING PRACTICES

ORH’s Veterans Rural Health Resource Centers (VRHRC) identify, review and carefully evaluate each potential health care initiative, designate the strongest as Rural Promising Practices, and promote their adoption at VA facilities nationwide with on-the-ground guidance from experienced clinicians and providers. In fiscal year 2016, ORH’s Rural Promising Practices expanded across the country providing health care access to 47,281 enrolled rural Veterans in 52 locations.

The fiscal year 2016 Rural Promising Practices include:

- Community Clergy Training to Support Rural Veterans’ Mental Health
- Remote, Telephone-Based Delivery of Cardiac Rehabilitation
- COVER to COVER – Connecting Older Veterans (Especially Rural) to Community or Veteran Eligible Resources
- Clinical Video Telehealth to Care for Rural Veterans with Multiple Sclerosis
- Geriatrics Scholars Training
- Telehealth Collaborative Care for Rural Veterans with HIV Infection

REMOTE TELEPHONE-BASED CARDIAC REHABILITATION

Heart disease is the leading cause of hospitalization in the VA health care system. A major event such as a heart attack or surgery requires follow-up rehabilitation to improve the chances of successful recovery. Unfortunately, rural Veterans recovering from a heart attack or surgery who live hours away from a rehab center might forgo this care and risk suffering another cardiac event.

To address the possible social, geographic and financial barriers preventing rural Veterans from accessing cardiac rehabilitation, ORH’s cardiac rehabilitation Rural Promising Practice uses telehealth technology to eliminate the need for rural Veterans to travel multiple times over several weeks to a VA facility. By remotely connecting rural Veterans with care specialists, the program lets patients determine when and how they want to receive their rehabilitation in the privacy and comfort of their home.

MENTAL HEALTH CAMPAIGN

Rural Veterans have a higher suicide rate than their urban counterparts. To empower community leaders and the public with information about VA’s suicide prevention resources, ORH launched a multimedia mental health campaign in coordination with VA’s Office of Mental Health Services. ORH distributed information highlighting the Collaborative Rural Access Solution Vets Prevail and the online platform Make the Connection via television, radio and newspapers throughout the country, reaching 140 million potential listeners, readers and viewers.
**ORH GOAL: GENERATE AND DIFFUSE KNOWLEDGE REGARDING RURAL VETERAN HEALTH**

**VETERANS RURAL HEALTH RESOURCE CENTERS**

Veterans Rural Health Resource Centers (VRHRC) are hubs of rural health care innovation, and practice. The three centers are located at host VA Medical Centers in Togus, Maine; Iowa City, Iowa; and Salt Lake City, Utah.

At each center, providers who specialize in overcoming rural health access challenges:

- Care for Veterans, including those who live in surrounding rural areas;
- Generate and spread Enterprise-Wide Initiatives;
- Conduct program-specific and ad-hoc research; and
- Develop partnerships with state and community organizations.

In addition to developing, testing and implementing Enterprise-Wide Initiatives, VRHRCs also serve as test beds for Rural Promising Practices. Once an approach to care achieves Rural Promising Practice status, other VA facilities that want to adopt it are paired with a mentor from a VRHRC. This on-the-ground support helps the adopting facility implement, troubleshoot and individualize the program so that it fits seamlessly into existing processes.

**NATIONAL RURAL STUDIES TEAM**

Based in White River Junction, Vermont, the ORH National Rural Studies Team (NRST) provides advice and expertise on studies and research for rural Veterans, oversees the ORH rural research agenda and responds to requests for issue briefs, data analysis and rural studies.

In fiscal year 2016, NRST and ORH supported 67 ongoing research projects on a wide array of topics in medical utilization and patient perceptions, with emphasis on innovations to improve access to quality care. One way the Team helps achieve increased access is through research projects that assess Rural Promising Practice dissemination. Each Rural Promising Practice is tracked by an accompanying research project that reviews and reports on the efficacy of the Practice’s integration throughout the VA health care system.

While ORH continually assesses the need for research in all areas related to the rural Veteran population, the NRST developed a research agenda that addresses specific, urgent research gaps. The rural studies agenda covers:

- Mental Health Services
- Women’s Health Services
- Geriatric Care
- Telehealth Services
- Pharmacy Care Services
- Use of Non-VA Health Care
- Pain Management
- Respiratory and Renal Disease Burden
This rural studies agenda helps identify current and future risks to rural Veteran health as well as established or emerging best practices that can help satisfy unmet needs. Combined with NRST’s efforts to track Rural Promising Practice effectiveness, it helps ORH promote and disseminate innovative programs that increase rural Veterans’ access to quality care.

**GEOSPATIAL OUTCOMES DIVISION**

ORH’s GeoSpatial Outcomes Division (GSOD) operates out of Gainesville, Florida, and applies advanced mapping techniques to help inform health care analysis. GSOD produced nearly 500 maps in fiscal year 2016, including recreation therapy, physical therapy, occupational therapy, and clinical video care patients aggregated by ZIP code for the Rural Veterans Tele-Rehabilitation Enterprise-Wide Initiative; assisting the Planning System Support Group with mapping for the Veteran Choice Program; and mapping women Veterans in Veteran Integrated Service Network 8.

GSOD’s annual efforts are captured in the Rural Veterans Health Care Atlas, a comprehensive resource guide for rural and Veteran advocates to enhance health care delivery to rural Veterans. The Atlas features six areas of interest, with updates that reflect VHAs changes on the definition of rurality, the establishment of the Veterans Choice Program, and the reclassification of VHA medical facilities.

**COMMUNICATING ORH’S WORK**

In fiscal year 2016, ORH created several communication products that inform and empower audiences to become stronger advocates for rural Veterans at the local, state and federal levels. Now, those who want to promote the well-being of rural Veterans can learn more about programs designed specifically for their needs via ORH’s caregiver video series and redesigned website.

One video highlights the experience of rural Veteran Ralph S. as he takes the 100-mile journey from his Vermont home to the White River Junction VA Medical Center using the VA Veterans Transportation Service. This Collaborative Rural Access Solution provides salaries for mobility managers and drivers, as well as disability-friendly vehicles that bring rural Veterans to their VA care without the stress, strain or expense of arranging private travel.

In another video, caregivers learn how the Remote, Telephone-Based Delivery of Cardiac Rehabilitation Rural Promising Practice improved two rural Veterans’ lives. This model eliminates the need for Veterans to travel to rehabilitation multiple times a week, and enables patients to tailor the location and schedule of their rehabilitation exercise sessions.

Fiscal year 2016 marked the launch of the newly redesigned ORH website. Rebuilt to provide richer content, simplify navigation and offer a wider variety of resources, the website helps stakeholders learn more about the rural Veteran population, subscribe to the quarterly newsletter, check funding criteria, track career opportunities and more.

**RESEARCH LIBRARY**

ORH’s online Research Library resource supports the advancement of all VA health care providers, with a particular focus on those who treat rural Veterans. The Research Library contains scholarly journal articles highlighting rural health care delivery innovations from communities across the country.

In fiscal year 2016, ORH added more than 25 articles intended to connect the rural health research community and provider communities. By fueling knowledge- and resource-sharing, ORH helps providers translate research to practice, resulting in increased access and better care for rural Veterans nationwide.
ORH GOAL: STRENGTHEN COMMUNITY CARE INFRASTRUCTURE WHERE RURAL VETERANS RESIDE

WORKFORCE AND TRAINING

A prominent health care barrier in rural communities is sheer lack of clinical providers and workforce infrastructure. Telehealth solutions have successfully brought both specialized and primary care to rural Veterans, but workforce development and educational resources are needed to strengthen community care in rural areas.

To help overcome these challenges, ORH has developed a Workforce, Education and Training category for programmatic development and implementation. In fiscal year 2016, ORH funded more than 10 projects in this category implemented by more than 30 facilities.

Collectively these projects:

- Trained more than 20,300 providers and staff
- Trained nearly 600 student and resident trainees
- Held more than 300 trainings

RURAL HEALTH TRAINING INITIATIVE

One ORH-sponsored program that has been particularly effective is the Rural Health Training Initiative (RHTI). Since 2013, the RHTI program has enabled external health professionals to spend part of their time at a rural VA facility working with patients under the supervision and guidance of VA health care professionals. Through a mix of academic learning and in-person training at a rural VA medical center, students gain a better understanding of rural health care, rural Veterans and the VA health care system. In fiscal year 2016, nearly 100 trainees reported being hired after completing their two-year RHTI training experience and nearly 30 of the trainees remain employed at the rural VA facility where they were trained.
INDIAN HEALTH SERVICES MEMORANDUM OF UNDERSTANDING

Strengthening rural community care infrastructure involves more than acquiring the most innovative equipment or training a capable workforce. It also rests on building collaborative partnerships with the community.

In fiscal year 2010, VA entered into a memorandum of understanding (MOU) with the Department of Health and Human Services’ Indian Health Services (IHS) division to improve the health status of American Indian and Alaskan Native Veterans. Although this rural Veteran population averages fewer diagnoses, it is more likely to have service-related disabilities.

In an effort to strengthen health care infrastructure in the communities where American Indian and Alaskan Native Veterans reside, ORH and the Salt Lake City VRHRC manage this partnership, which helps increase American Indian and Alaskan Native Veterans’ access to telemental and suicide prevention services. In fiscal year 2016, ORH served more than 4,000 American Indian and Alaska Native Veterans through the IHS MOU and similar programs.

RURAL VETERANS COORDINATION PILOT

The Rural Veterans Coordination Pilot (RVCP) is a Congressionally mandated program¹ in which VA partnered with five state agencies and community nonprofit partners that serve rural Veterans as they transition from active duty to civilian life.

Each local partner met one or more of the legislative requirements:

- Increase coordination of Veteran health care and benefits
- Increase availability of high quality medical and mental health services
- Provide assistance to families of transitioning Veterans
- Outreach to Veterans and families

From a competitive pool of nearly 100 applicants, VHA selected The Maine Department of Labor, The Nebraska Association of Local Health Directors, The New Mexico Department of Veteran Services, The Volunteers of America of North Louisiana and WestCare Washington Foundation – each of which received $2 million.

Fiscal year 2016 was the second and final year of the program. ORH administered the funding, worked closely with the recipients to review their progress, and provided insights that allowed recipients to optimize their programs and troubleshoot issues.

In its report to Congress on the program’s effectiveness, ORH noted the following findings:

- All grantees reported a significant number of Vietnam-era Veterans (23 percent) and post-9/11 Veterans (26 percent) presenting for services
- Grantees hosted more than 1,200 outreach events that reached more than 36,000 Veterans and 15,000 family members
- More than 97 percent of Veterans served expressed high satisfaction (among the three sites that collected data on customer satisfaction)

The results of the RVCP program clearly demonstrate the power of partnerships in helping reach, engage and assist rural Veterans in accessing high-quality care. ORH remains committed to collaborating with organizations, from government to academe to private industry, to connect rural Veterans with the services they need.

¹ Public Law 111-163 Section 506
ORH GOAL: INFORM HEALTH CARE POLICY THAT IMPACTS RURAL VETERANS AND RURAL HEALTH CARE DELIVERY

PARTNERSHIPS AND JOINT ACTIVITIES

Health care access challenges cannot be solved by one organization or government office alone. In fiscal year 2016, ORH convened thought-leaders and influencers in a series of coordinated activities that influenced health policies on behalf of rural Veterans. ORH collaborated with the White House, other VA program offices and federal agencies to:

- Speak at the White House Rural Forum policy session
- Integrate rural Veterans’ issues into VA’s 2024 quadrennial strategic plan
- Write six Rural Promising Practices summaries for VA’s “Best Care Everywhere” book
- Implement nearly 20 Enterprise-Wide Initiatives across more than 10 program offices
- Distribute articles in U.S. Department of Health and Human Services’ (HHS) “Primary Health Care Digest,” reaching 15,000 readers monthly
- Reach more than 6,400 HHS Health Resources and Services Administration’s Rural Health Information Hub subscribers

ORH also proactively collaborated with state policymakers, Veteran service organizations, national community-based organizations and universities to:

- Update the 56 National Association of State Directors of Veterans Affairs members on national rural Veterans’ health initiatives
- Publish seven papers in the National Rural Health Associations’ rural Veteran Journal supplement, reaching more than 21,000 members, and conducted a webinar about rural Veteran health care in conjunction with National Rural Health Day
- Collaborate with Disabled American Veterans to prioritize rural issues and share rural-focused Facebook content to more than 1 million followers
- Host a Veteran service organization rural Veteran health panel
- Lead a rural Veteran health care policy session with University of Notre Dame undergraduates
- Attend relevant conferences and bring the rural Veteran perspective to health advocates

In the spring of 2016, ORH formalized its relationship with the Health Resources and Services Administration (HRSA) and began to collaborate on HRSA’s Federal Office of Rural Health Flex Rural Veterans Health Access Program, which supports mental health and health services access solutions.

Through these partnerships, ORH can elevate the rural Veteran voice to a diverse group of stakeholders, identify emerging best practices, and lend expertise to both researchers and practitioners as they work together to solve access challenges for Veterans.
In 2008, the VA Secretary chartered the Veterans Rural Health Advisory Committee (VRHAC) to study and analyze the health access challenges rural Veterans face and to advise the Secretary accordingly. Among the 16 appointed VRHAC members are Veterans; leaders of local, state and national Veterans Service Organizations; researchers; and private sector, non-profit, state and federal rural health professionals. Together, they act like a think tank – working throughout the year to understand how the rural health landscape is changing, and then thinking collaboratively and critically about how to overcome Veterans’ barriers to care.

ORH works closely in support of VRHAC, delivering updates on national policy and VA programs that impact rural Veterans; facilitating biannual meetings; creating and maintaining an online portal of relevant news and information; soliciting applications for new members; and liaising with VA leadership on behalf of committee members.

In fiscal year 2016, VRHAC gathered in Spokane, WA, where members increased their understanding of health access successes and challenges from the shared experiences of local Veterans, health care providers and administrators. The Committee also made three policy recommendations in fiscal year 2016:

- Tailor future programs to the Veteran population and the rural communities in which they live.
- Focus on improving access to care by recruiting and retaining qualified physicians, nurses, and other essential health care providers to serve rural Veteran populations.
- Continue to build on the progress VA has made to date in extending health access to rural Veterans through telehealth technology.
THE ROAD AHEAD

With ready access to high-quality health care, America's Veterans can thrive in rural communities. Looking ahead, ORH will continue to:

- Promote rural Veteran health directly through the expansion of Enterprise-Wide Initiatives;
- Generate knowledge and research tools about rural Veterans and the health access challenges they face;
- Strengthen ORH’s internal and intergovernmental partnerships and support training for providers to reinforce rural health care infrastructure; and
- Inform advocates, ORH partners, advisory committee members and Congress to develop policies that benefit rural Veterans.

Seed, Spark, Spread – Innovation in VA

From telehealth to improved care models, innovations are rapidly changing the face of modern medicine. But these advances are only effective if they reach the populations they were designed to assist.

With this in mind, the VA Center for Innovation and the VHA Diffusion Council are collaborating with ORH to foster a clear path for VA employee and program office innovators to design, pilot and deploy best practices throughout the VA network.

This collaborative effort seeks to spread innovations at all levels of VA, helping to remove organizational barriers and unleash the experience and creativity of VA employees nationwide. From headquarters to the field and across all 50 states, this new partnership will provide employees with a clear, concise map to share their best ideas to transform the face of Veteran health care.

VA and the Office of Rural Health work tirelessly to make sure rural Veterans have access to high-quality care. The services provided through medical centers, hospitals and community clinics, combined with cutting-edge technology and strategic investments in clinicians and infrastructure, help provide critical care to those who need it most. Together with its partners, ORH will continue to help America’s rural Veterans thrive.