Message from the Executive Director of the VA Office of Rural Health

Thomas Klobucar, Ph.D., ORH Executive Director

Rural Veterans face a hat trick of challenges when seeking health care: a shortage of rural providers, an aging rural workforce and rural facility closures.

Many of you know that the Office of Rural Health (ORH) has partnered with VA leadership to renew our focus on workforce-related initiatives and expand workforce programming over the past year. In this issue of “The Rural Connection”, you’ll read about several of the ways in which ORH is working to address workforce disparities through recruitment and retention.

Rural provider shortages are particularly acute in specialty areas such as mental health care. In fact, nearly 90 percent of rural residents live in a mental health professional shortage area. Recognizing both the degree of the challenge and the trust that many rural Veterans place in their faith leaders, ORH launched the Rural Community Clergy Training Program to connect Veterans to VA mental health resources through their local clergy.

Read more in Rural Community Clergy Training Program Offers Mental Health Support to Rural Veterans on pages 2-3.

ORH has also addressed the rural workforce disparity by combining forces with other federal agencies. ORH recently joined two interagency policy committees dedicated to addressing rural health challenges by combining cross-government knowledge and resources.

Read more in ORH Joins Two Interagency Policy Committees Focused on Rural Health on page 5.

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Message from the Executive Director of the VA Office of Rural Health (continued from page 1)

ORH’s five Veterans Rural Health Resource Centers (VRHRCs) are satellite offices that serve as hubs of rural health care, research, innovation, and dissemination. The fifth and final story in our series of VRHRC spotlight articles highlights the Portland, Oregon location.

Read more in Office of Rural Health Veterans Rural Health Resource Center (VRHRC) Spotlight: Portland, Oregon on pages 6-7.

Stay tuned as we highlight practical, tangible and beneficial ways to increase access to care for rural Veterans and explore the rural connections to VA’s top health priorities. To join our rural Veteran community and receive program updates, please contact ORH Communications at ORHcomms@va.gov.

For the latest information about VA’s response to the COVID-19 pandemic, please visit https://www.publichealth.va.gov/n-coronavirus/index.asp.

On November 18th, the U.S. Department of Veterans Affairs Office of Rural Health (ORH) observed National Rural Health Day (NRHD) – a day to reflect on some of the most pressing challenges facing our nation’s rural communities.

Approximately 80 percent of rural America is considered medically underserved, and the number of rural providers is predicted to decline by 23 percent over the next decade. According to the National Rural Health Association, there is just one primary care physician for every 2,500 patients in rural communities.

For Veterans in these rural communities, provider shortages can mean longer travel times to the nearest clinic, limited access to specialty care, and less successful patient outcomes.

To increase rural clergy’s ability to identify and support Veterans with mental health issues, the U.S. Department of Veterans Affairs (VA) Office of Rural Health (ORH) and VA’s Chaplain Center developed the Rural Community Clergy Training Program (RCCTP), a unique multi-faith virtual clergy training model.

Initiated in 2010, RCCTP increases rural clergy’s ability to identify and support rural Veterans with mental health issues. Participants gain access to two-hour virtual workshops designed to educate clergy on various topics, including moral injury, suicide prevention in local communities, mental health services and referrals, and building community partnerships.

RCCTP serves as an extension of the National VA Chaplain Services’ Veterans Community Outreach Initiative. Participants may request individual consultation from local chaplain serves and attend free webinars that expand on the training curriculum. While clergy cannot replace mental health professionals, the goal of the program is to provide clergy with the tools they need to help a Veteran in crisis, and with the knowledge to refer Veterans to the proper VA mental health resources.

To date, more than 8,200 clergy, chaplains, behavioral health professionals and others who support rural Veterans have completed the training program. Of these participants, more than 95% would recommend RCCTP to others and 97% reported an increased understanding of potential assistance needs among those returning from war.

For more on RCCTP, watch this video: https://youtu.be/IjQS8AXGT7U.

Individuals interested in learning more about RCCTP should contact Chaplain Matt Cassady at VANationalChaplainStaff@va.gov.

Rural Community Clergy Training Program Offers Mental Health Support to Rural Veterans

By Beth Schwartz, VA Office of Rural Health

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RCCTP Participant Feedback:

“I have used this training as a door opener to [understand] Veterans’ needs and gain their trust.”

“The RCCTP training helped me to understand what was available to Veterans through VA. It opened my eyes for things to look for, especially with the family members of Veterans with PTSD. It helped me to better understand one of our parishioners who has PTSD from the Korean War.”

“The training provided an excellent overview that I believe will stick with me for years to come.”

(Continued on page 3)
Rural Community Clergy Training Program Offers Mental Health Support to Rural Veterans (continued from page 2)

If you or a Veteran you know needs assistance, please visit the VA mental health website at mentalhealth.va.gov or call the Veterans Crisis Line:

- Call 800-273-8255, then select 1;
- Or text 838255 ♦

Using Digital Media to Support Rural Clinics in Harassment Prevention Efforts

By Alexandria Woodard, Human Capital Services Center Communications Team

Preventing harassment and building a workplace culture based in mutual respect is a top priority for the U.S. Department of Veterans Affairs (VA). In VA medical centers (VAMCs), this issue has been especially poignant, as urban and rural clinics have experienced the impact of harassment on both the workforce and the Veterans they serve.

While harassment is not a problem exclusive to rural VAMCs, it is an additional source of stress to an already stretched-thin workforce. Creating safer and more inclusive teams is essential to VA’s mission, but the barriers to accessing the learning resources to do so underscore the dire need for support in this area.

Recognizing these unique challenges posed on rural clinics, the VA Human Capital Services Center (HCSC) - VA’s central resource for workforce learning and development - is helping drive harassment prevention efforts to support the VA workforce across geographic lines. HCSC is committed to transparent, timely and accessible communication within the internal VA community. A key part of this work is fostering a more positive and inclusive organizational culture that helps VA workplaces and facilities feel safe and welcoming for all Veterans, their families, staff, and volunteers.

Earlier this year, HCSC released “It’s On Me,” a video campaign featuring VA employees and Veterans who share their commitment to fostering a safe and inclusive workplace and encourage others to do the same. The video message is regularly broadcast on the Veteran News Network (VNN), which airs on common space TVs in VAMCs across the country. Over the next year, HCSC will continue to use this campaign as part of more anti-harassment strategic messaging and tools that can be used at VAMCs across the country.

HCSC’s contributions bring harassment prevention efforts directly to the workforce in an accessible and tangible way, and most of all, through messaging that focuses on VA employees holistically, and how they can come together to better ensure that the work they do aligns with VA’s values and mission to provide the highest quality care to our nation’s Veterans. This will foster a more positive and inclusive organizational culture that helps VA workplaces and facilities feel safe and welcoming for all Veterans, their families, staff, and volunteers.

What can I do to support these efforts?

To support HCSC harassment prevention campaign, you can:

- Share the “It’s On Me” video with your networks and colleagues
- Check out the video on the Veterans News Network
- Learn more about harassment prevention at VA by visiting the Harassment Prevention program website, Office of Resolution Management Diversity and Inclusion (ORMDI), where you can access other critical resources such as reporting harassment at VA

The Human Capital Services Center (HCSC) is committed to providing world-class services that equip the VA workforce with tools and programs they need to succeed in every step of their career journey.
Veterans Rural Health Advisory Committee (VRHAC) Spring Meeting to Focus on Rural Workforce Disparities

By Scott Bledsoe, VA Office of Rural Health

The Veterans Rural Health Advisory Committee (VRHAC) will convene for its annual spring meeting in April to examine the latest issues regarding rural workforce recruitment and retention. Rural communities face stark shortages of doctors, nurses, psychologists and other health professionals. For rural Veterans, these shortages often mean long travel times to medical appointments, lack of access to specialty care, and poorer health outcomes compared to their urban and suburban peers. This spring, VRHAC members will be briefed by VA leadership, researchers, and rural clinicians on the biggest barriers as well as potential solutions to recruiting and retaining health professionals in rural areas. The information they receive will ultimately inform their work to develop policy recommendations for the VA Secretary on how to build a robust rural health care workforce that can address the diverse needs of rural Veterans and the communities they call home.

The spring 2022 VRHAC meeting will be held on Zoom from April 5-7, 11:00 am – 2:30 pm (EST) each day. The meeting is open to the public, and anyone may join by clicking this link: https://us06web.zoom.us/j/81510091251.

Secretary McDonough Announces New Workforce Plan

By VAntage Point Staff

Last month, U.S. Department of Veterans Affairs (VA) Secretary Denis McDonough delivered remarks regarding his Human Infrastructure plan at the Ralph H. Johnson VA Medical Center in Charleston, South Carolina.

“"You know, today marks one year since I was sworn in at VA and I don’t think there’s anything that I'm more proud of than the fact that, in the midst of the pandemic, VA didn’t weaken or slow down. No, VA got strong and took care of Vets when they needed it most,” he said, addressing VA employees nationwide via an internal livestream. “But as proud as I am of that accomplishment, I didn’t do it. You did it. And that’s why I’m here today: to recognize all you’ve done, and discuss what our country is doing to invest in you.”

The Secretary thanked employees and shared that, in partnership with Congress, VA is moving forward with 10 major steps to make every VA job a good job, where all employees are engaged, supported, heard and empowered to provide Veterans with timely access to world-class health care, earned benefits and the lasting resting place they deserve.

- Work with Congress to invest in wages by raising the Federal worker minimum wage to $15 an hour and urging Congress to pass the RAISE Act
- Maximize bonuses and retention incentives by waiving limits on bonuses for work done during the pandemic and increasing retention incentives
- Increase opportunities to advance at VA by growing future leaders and opening the door to opportunities for higher general schedule grades and promotions
- Expedite the hiring process by better leveraging hiring authorities and redesigning the national onboarding process
- Offer greater flexibility in where employees work by maximizing opportunities to increase availability to work outside your traditional workspace whenever and wherever possible
- Help cover the cost of childcare by increasing the income cap from $89,000 to $149,000 per year to receive a childcare subsidy through VA
Secretary McDonough Announces New Workforce Plan (continued from page 4)

In addition to VA-wide workforce initiatives, the VA Office of Rural Health (ORH) is taking its own measures to tackle the rural clinical workforce crisis. ORH oversees several programs designed to improve the recruitment and retention of rural health care providers and researchers, including the Rural Interprofessional Faculty Development Initiative, the Rural Health Career Development Award Program, and the Rural Scholars Fellowship. Through these efforts, and through support from the wider VA network, ORH is dedicated to addressing provider shortages and health disparities in rural communities across the country.

ORH Joins Two Interagency Policy Committees Focused on Rural Health

By Thomas F. Klobucar, Ph.D., Executive Director, VA Office of Rural Health

In support of workforce goals established by the U.S. Department of Veterans Affairs (VA), the VA Office of Rural Health (ORH) was recently named to represent VA two multi-agency policy committees: the Rural Health Interagency Policy Committee (RHIPC) and the Rural Prosperity Interagency Policy Committee (RPIPC). These committees, called together by the White House Domestic Policy Council in 2021, aim to assist rural communities in accessing federal resources to improve rural infrastructure, economic vitality, and healthcare services by leveraging the power of agencies that represent available resources across the federal government.

These interagency policy committees bring together representatives from the U.S. Health Resources and Services Administration (HRSA), the World Health Organization (WHO), the Office of Management and Budget (OMB), the U.S. Department of Agriculture (USDA), the U.S. Department of Health and Human Services (HHS), the U.S. Department of Labor (DOL) and many other federal rural stakeholders to advocate for and provide concrete assistance in enhancing the prosperity and health care environment of rural Americans.

Goals of the RHIPC include keeping health care facilities open, expanding the pipeline of rural care providers, expanding rural access to mental health care, addressing rural substance use disorder, lowering rural health care costs, and expanding rural telehealth.

So far, RHIPC has received a commitment from HHS to partner on rural faculty development and has received support from the White House to expand ORH’s Rural Interprofessional Faculty Development Program (RIFDI) to include non-VA providers.

The second interagency policy committee, RPIPC, focuses on synergizing federal resources and making federal funding opportunities transparent and accessible to rural communities. Goals include expanding rural community access to federal programs, building trust through community engagement, and creating enduring rural access structures.

To achieve these goals, the RPIPC is focused on the establishment of Rural Desk Officer functions at each participating federal organization as well as implementing an interagency pilot to provide technical assistance to selected rural communities in accessing federal funding opportunities and community programs.

By supporting both interagency policy initiatives, ORH hopes to continue serving rural Veterans by leveraging knowledge and resources across the federal government.
ORH Veterans Rural Health Resource Center (VRHRC) Spotlight: Portland, Oregon

This story is the final in a series of articles focusing on the Office of Rural Health’s five Veterans Rural Health Resource Centers (VRHRCs) across the United States. VRHRCs are ORH satellite offices that serve as hubs of rural health care research, innovation, and dissemination.

Veterans Rural Health Resource Centers were established by congressional mandate 38 USC § 7308 to support ORH’s mission to improve the health and well-being of rural Veterans with a specific mandate to:

- **Improve understanding of rural-specific challenges**
- **Identify disparities rural Veteran care and services**
- **Formulate practices or programs to enhance the delivery of health care**
- **Implement practices systemwide**

VRHRCs are bridges for connecting innovative care models and study data with real-world, practical interventions that benefit Veterans living in rural areas. Each of ORH’s VRHRCs maintains an annual portfolio of studies, innovative pilots, disseminations and other programmatic initiatives designed to expand rural Veterans’ access to healthcare.

Located at the [Portland VA Medical Center](#), the ORH Veterans Rural Health Resource Center (VRHRC) in Portland, OR was established in 2019. The Portland VRHRC maintains a diverse project portfolio. Focus areas include:

- **Increasing rural Veterans’ access to care**
- **Finding innovative ways to combat the pain and opioid epidemics**
- **Prevent Veterans’ suicide**
- **Address disparities in vulnerable populations**

The Portland VRHRC is led by Clinical Director Travis Lovejoy, PhD, MPH and Operations Director Sarah Ono, PhD. Dr. Lovejoy is a psychologist and health services researcher. His clinical and research work focus on the intersection of pain and substance use disorders. Dr. Ono is an anthropologist who wants to increase Veteran engagement in research. Both are affiliated with the Center to Improve Veteran Involvement in Care (CIVIC), a VHA health service research Center of Innovation in Portland. In addition to Drs. Lovejoy and Ono, the Portland VRHRC is comprised of a team of six core staff members who are integral to the Center’s success.

“Our focus is on improving the health of rural Veterans, and if what we learn or make can benefit all Veterans and the rural communities where they live, then all the better,” emphasizes Dr. Ono.

(Continued on page 7)
Office of Rural Health Veterans Rural Health Resource Center (VRHRC) Spotlight: Portland, Oregon (continued from page 6)

As with each of ORH’s VRHRCs, Portland is charged with developing high-impact rural interventions through research, pilot studies, and dissemination projects. Dr. Lovejoy notes, “We strive to identify key challenges in rural Veteran health care, develop innovative evidence-based solutions that address these challenges, and disseminate them for use across the VA nationally.” Projects within the Portland VRHRC portfolio include:

- **Collaborative Telepain Care for Rural Veterans**
  This project will ultimately yield a manualized pain treatment program that can be delivered to rural Veterans receiving VHA care across the U.S. Implementation training materials are also in development to aid future VHA sites that wish to adopt this collaborative telepain program within their health care systems and medical centers.

- **Systematically Testing the Evidence on Marijuana (STEM)**
  The STEM team uses “living” systematic review methods to develop a web-based resource for up-to-date evidence about the health effects of cannabis. The long-term goals of the project are to empower clinicians to have evidence-based discussions about cannabis use with their patients, and to identify specific research gaps to help researchers design high-yield studies that will advance the field.

- **Growing Rural Outreach Through Veteran Engagement (GROVE) Center**
  The GROVE Center researches and develops processes, tools and guidelines to facilitate Veteran engagement, so that Veterans’ expertise and lived experience can inform VHA research projects at all stages.

- **Prevention of Firearm Injuries Among Veterans in the U.S.**
  This project is leading to a culturally competent, Veteran-focused firearm injury prevention program tailored to VA facilities and rural-residing Veterans at risk of firearm injuries, and their caregivers, clinicians, and communities. The research conducted throughout the project’s lifespan will ensure this program is empirically-sound, Veteran- and provider-informed, and implementable at VA facilities in which rural-residing Veterans receive care.

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**Video Blood Pressure Visits Training - Registration Now Open**

By, Lisa Huang, VA Office of Primary Care

The Video Blood Pressure Visits (VBPV) Program is a VA Enterprise-Wide Initiative funded by the Office of Rural Health and coordinated through the Office of Primary Care. The program allows Veterans to receive high-quality nursing care for chronic diseases, like hypertension, in their homes or location of choice through VA Video Connect (VVC). The program empowers VA staff to be VVC champions, and it empowers our Veterans with the knowledge and tools needed to monitor and control their health and well-being.

Registration for a 5-week, 8-class VBPV training course is now open to VA employees. Classes are offered on Tuesdays and Thursdays in June and August of this year. Each class is one hour, followed by a 30-minute open office hours period to review concepts and answer questions. The program offers 8.0 Continuing Education Units (CEUs) from the American Nurses Credentialing Center (ANCC).

VA employees can visit the VBPV SharePoint site for more information about this initiative. The training course’s registration form, class dates, and additional details are available at this link.

For additional information or questions about the program, please contact VAVideoBPV@va.gov.