

Veterans living in rural communities often face unique challenges that limit their access to health care. Barriers such as long distances to clinical facilities and a shortage of qualified providers can put rural Veterans and their families at risk.

Rural Veterans have a
20%
greater risk of suicide compared to their urban counterparts¹

Rural areas have
FEWER
mental health care providers than their urban counterparts²

To overcome these challenges, the U.S. Department of Veterans Affairs (VA) is developing Clinical Resource Hubs (CRH) – a network of solutions that combines in-person care and telehealth to support underserved medical facilities. This allows rural Veterans to get the care they need, when they need it, regardless of location.

Hubs and Spokes

VA supports CRH locations, also known as hub sites, which serve a specific geographic region or Veterans Integrated Service Network (VISN). The hub site team provides care to Veterans at their local VA health care facilities, or spoke sites, through telehealth technology or in-person visits.

The hub and spoke model is the foundation of the CRH initiative. When paired with telehealth technology, it allows VA to connect Veterans with distant providers and improve access to health care.

Different Ways to Access Care

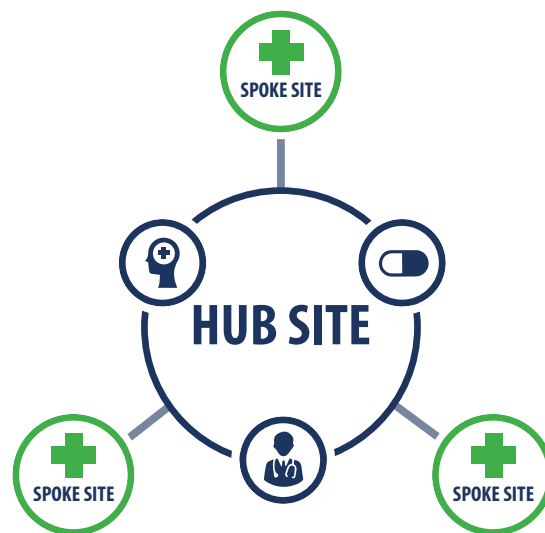
Clinical Resource Hubs include a variety of clinical and administrative staff that provide clinical services to identified facilities in each VISN. These teams help CRHs increase access to quality health care for the nation's nearly 5 million rural Veterans in several ways, including:



Telehealth Care: Clinical Resource Hubs provide primary care, mental health and specialty care services in VA facilities or in Veterans' homes via video or telephone



In-Person Visits: When needed, mobile deployment teams can provide face-to-face care for rural Veterans at local VA health care facilities



CRHs are also expanding care options for Veterans at non-government locations, including Walmart, Veterans Service Organizations (VSOs), libraries and other community locations.

Clinical Resource Hubs allow providers across different specialties to collaborate as part of the Veteran care team, including Primary Care Providers, Mental Health Providers, Clinical Pharmacists, Specialty Care Providers and Rehabilitation Providers.

The Road Ahead

In fiscal year 2019, the Office of Rural Health funded telemental health care initiatives prior to the launch of Clinical Resource Hubs. These efforts resulted in:

- ▶ **2,493,719** encounters using ORH-funded programs that provide services via telehealth, including:
 - **215,687** rural Veterans served by mental health services
 - **245,987** rural Veterans served by specialty care services
 - **89,644** rural Veterans served by primary care services

Over the next five years, VHA will build upon this success by expanding CRHs to improve access to primary care, mental health and specialty care services. These CRHs will play a significant role in providing rural Veterans with faster, easier access to high-quality care.



¹ McCarthy, J.F., Blow, F.C., Ignacio, R.V., Ilgen, M.A., Austin, K.L., & Valenstein, M. (2012). Suicide among patients in the Veterans Affairs health system: Rural–urban differences in rates, risks, and methods. *American Journal of Public Health*, 102(S1), S111-S117. doi: 10.2105/AJPH.2011.300463.

² Varia, S.G., Ebin, J., & Stout, E.R. (2014). Suicide prevention in rural communities: Perspectives from a Community of Practice. *Journal of Rural Mental Health*, 38(2), 109.

Office of Rural Health

Congress established the Veterans Health Administration Office of Rural Health (ORH) in 2006 (38 USC § 7308) to conduct, coordinate, promote and disseminate research on issues that affect the nearly five million Veterans who reside in rural communities. The mandate also requires ORH to develop, refine and promulgate policies, best practices, lessons learned, and innovative and successful programs. Learn more at www.ruralhealth.va.gov.