



## Office of Rural Health

National Organization of State Offices of Rural Health (NOSORH)  
Annual Conference  
November 15, 2010

Oklahoma City, Oklahoma

Sheila M. Warren MPH, RN, CPHQ  
Deputy Director, Office of Rural Health  
Office of the Assistant Deputy Under Secretary for Health and Planning  
Veterans Health Administration

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### VA Mission & Vision



• **VA Mission:**

To fulfill President Lincoln's promise "To care for him who shall have borne the battle, and for his widow, and his orphan" by serving and honoring the men and women who are America's Veterans.

• **VA Vision:**

To provide Veterans the world-class benefits and services they have earned - and to do so by adhering to the highest standards of compassion, commitment, excellence, professionalism, integrity, accountability, and stewardship.

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### VHA Mission & Vision



• **VHA Mission:**

Honor America's Veterans by providing exceptional health care that improves their health and well-being.

• **VHA Vision:**

VHA will continue to provide exemplary services that are both patient-centered and evidence-based delivered by engaged, collaborative teams in an integrated environment that supports learning, discovery and continuous improvement. VHA will emphasize prevention and population health and contribute to the nation's well-being through education, research, and service in National emergencies.

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**ORH Establishment**

- In 2006, Congress created Office of Rural Health (ORH) by enacting Public Law 109-461 (also known as the Veterans Benefits, Health Care, and Information Technology Act of 2006).
- By March 2007, ORH was established within the Office of the Assistant Deputy Under Secretary for Health (ADUSH) for Policy and Planning, Veterans Health Administration (VHA), Department of Veterans Affairs (VA).

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**Legislative Requirements**

*Authority & Responsibility*

ADUSH Policy & Planning

February 2007  
Immediate Action on PL requirements & staff recruitment

October 2007  
Office of Rural Health

**Public Law 109-461**

**Establishment of the Office of the Rural Health as mandated by Public Law 109-461:**

The Office of Rural Health shall perform functions to include:

1. In cooperation with the medical, rehabilitation, health services, and cooperative studies research programs in the Office of Policy and the Office of Research and Development of the Veterans Health Administration, to assist the Under Secretary for Health in conducting, coordinating, promoting, and disseminating research into issues affecting veterans living in rural areas.
2. To work with all personnel and offices of the Department of Veterans Affairs (VA) to develop, refine, and promulgate policies, best practices, lessons learned, and innovative and successful programs to improve care and services for veterans who reside in rural areas of the United States.

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**ORH Organizational Structure**

**ORH Director (SE3)**  
Mary Beth Skugan, Ph.D., MS, RN

**Veterans' Rural Health Advisory Committee**  
Chairman James Ahrens

**ORH Working Groups**

**ORH Deputy Director**  
Shella Warren, MPH, RN, CPHQ

**Chief Liaison**  
Lynn McQueen, DPH, RN

**Budget Analyst**  
Sharon Howell, MBA (Acting)

**Staff Assistant**  
Abe Jones

**Program Analyst**  
Anthony Achampong, MBA, MHSA

**Program Analyst**  
Christina White

**Program Analyst**  
Serena Chu, Ph.D.

**Veterans Rural Health Resource Centers**

**VRHRC-Western Director**  
Byron Barr, M.D.

**VRHRC-Central Director**  
Peter Kaboli, M.D.

**VRHRC-Eastern Acting Director**  
Paul Hoffman, M.D.

**Contractor Support**

**VSN Rural Consultants**

**Full-Time (9 Funded)**

1. Jackie Monahan (V9)
2. Shari Daboul (V11)
3. Paula Fleming (V15)
4. Deanna Jackson-More (V16)
5. Ann Schmidt (V19)
6. Julie Walters (V20)
7. Corale Alvarez (V21)
8. Kiki Dziak (V23)

**Part-Time / Collateral (13 Positions)**

1. Douglas Edwards (V1)
2. Christopher Peltys (V2)
3. Bernhe Felti (V3)
4. Anthony Behm (V4)
5. Aida Henrique (V5)
6. Tabbot Walen (V6)
7. Allison Hawley (V7)
8. Pat Ryan (V8)
9. Joe Kibut (V10)
10. Joseph Zimmerman (V12)
11. Shenita Washington (V17)
12. Greg Koshak (V18)
13. Laurie Traylor (V22)

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 **Office of Rural Health** 

- **13 Member Advisory Board**
- **Provides Oversight and Recommendations to the Office of Rural Health.**

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 **ORH Resources** 

- **Veterans Rural Health Resource Centers (VRHRCs)**
  - Three regional centers: White River Junction, VT; Iowa City, IA; Salt Lake City, UT.
  - Function as field-based clinical laboratories for demonstration projects/pilot projects.
  - Serve as rural health experts.
  - Act as educational and clinical repositories.
  - Provide programmatic support to ORH.
- **VISN Rural Consultants (VRCs)**
  - Serve as primary interface between ORH and VISN rural activities.
  - Develop rural health service plans based on VISN-wide needs assessments.
  - Facilitate information sharing across the VISNs.
  - Perform outreach to develop community relationships.
- **Veterans' Rural Health Advisory Committee (VRHAC)**
  - Federal advisory committee to advise the Secretary of Veterans Affairs on health care issues affecting enrolled Veterans residing in rural areas.
  - Evaluate current program activities and identify barriers to providing rural health care services.
  - May adopt recommendations to enhance or improve VA rural health care services.

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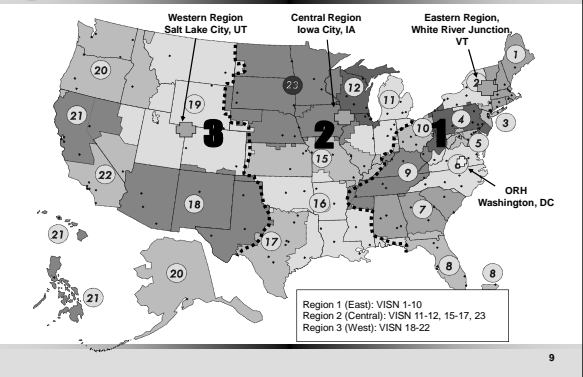
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 **MAP: ORH Resource Centers** 



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## Vision and Future of ORH

- ORH is a "Veteran-Centered" Program with mission-driven staff -- It is all about the Veteran
- Honest and Open communication will be paramount
- Teamwork and collaboration will occur at all levels and with many partners
- Continuous improvement will be the norm with accountability and evaluation of programs/projects
- Innovation will be encouraged and rewarded
- Increased use of technology for all processes and activities
- Decisions for change will be driven by data and evidence based practices
- Celebrate successes for advocating and providing improved access to high quality care for rural Veterans

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## ORH 2011 Priorities

- Improve Communication on all levels.
- Develop a web-based data and tracking system.
- Evaluate ORH at all levels – a year of evaluation.
- Establish robust rural health-specific access and health care measures.
- Build Collaborations and Partnerships
- Improve Recruitment and retention in rural Areas.
- Increase Education and Training Efforts.

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## ORH Funding

### • Fiscal Year 2010

Category	Funding
Telehealth/Telemedicine Expansion	\$4,718,846
Home Based Primary Care Expansion	\$953,640
Mental Health Programs	\$1,124,514
Health Care Service Expansion	\$10,395,908
Outreach Initiatives	\$63,290,751
Education and Training	\$3,374,694
Fee Care	\$200,000,000
Other	\$28,675,121
<b>Total:</b>	<b>\$312,533,474</b>

Funding as of August 31, 2010

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 **ORH Accomplishments** 

- ORH has currently executed over \$500 million in support of over 600 national and local-level rural health initiatives and is now working to gather metrics and other outcome data for these initiatives.
- ORH executed the July 19, 2010 VRHAC Public Teleconference and held in October 13-14, 2010 Meeting in Washington, D.C.
- ORH participated prominently in the VA-Indian Health Service (IHS) Memorandum of Understanding (MOU) Work Group and updated the current interagency MOU from 2003. Signed on Oct 1, 2010.

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 **VA Leads the Way in Telehealth Applications** 



- One of the biggest telemedicine/telemental health systems in the world:
  - Videoconferencing
  - In-home monitoring and treatment (care coordination)
  - Growing web resources
  - Involved in developing technologies

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 **National Telehealth in VA** 

Dr. Adam Darkins, Director, OTS, VHA

- Uses information and telecommunication technologies to deliver care
- Helps provide the right care in the right place at the right time
- Enables care to be provided in the home or least restrictive setting
- Reduces the need for travel by patients and practitioners
- Increases access to care in over 36 specialty areas

**Care Coordination/Telehealth (CCHT):**

- Optimizes care for Veteran patients in their homes with chronic conditions
- Available at more than 150 VA sites nationally
- Currently 46,000 Veteran patients are enrolled
- Predominantly for non-institutional care and chronic care management

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## National Telehealth in VA



- **Clinical Video Conferencing (CVT):**
- Uses real time clinical videoconferencing on a dedicated IT network
- Provides care between hospital and hospital and between clinic and clinic
- 70,000 Veteran patients care for annually at 110 VAMCs
- Predominant uses are for mental health care and rehabilitation
- and 500 CBOCs
- **Care Coordination/Store-and-Forward Telehealth (CCSF):**
- Involves the acquisition of clinical Images at sites close to the patient
- Interpreted and reported by clinicians asynchronously at distant site
- Main areas of care diabetic retinopathy screening and dermatology
- 160,000 patients receive care annually at 245 sites

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## ORH Funding for Rural Telehealth



In FY 2009, Public Law (P.L.) 110-329 provided \$250 million to support service expansion and outreach initiatives within VA ranging from the national to local level:

- **Key Major Initiative Categories Include:**
- \$86 million - National & Local Telehealth Expansion Initiatives
- \$43 million - National & Local Home Based Primary Care Initiatives
- \$21 million - Local Outreach Clinic Expansion
- \$13 million - Local Community Outreach
- \$10 million - National Mental Health Programs
- \$ 6 million - Local Transportation Programs

**In FY 2010:**

- Allocated: \$28.1 M to OTS & \$70.9M across the VISNs for rural Telehealth

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## ORH Major Telehealth projects



- Successful implementations of Telehealth and Tele-specialty services in rural areas (VISNs 1, 3, 4, 10, 12, 19, 20, and 23)
- Improved access to care via Care Coordination Home Telehealth by implementation of best practices for home based primary care & geriatric services
- As of June 2010, completed 150 rural clinical video telehealth encounters.
- Increased access to specialty services for rural Veterans through E-consults and telehealth.
- Developed & supported telehealth sub-specialty pre- and post-operative services for the most rural medical centers for: surgery, endocrinology, cardiology; TBI; pain management; podiatry; PTSD; mental health/behavioral health conditions.
- Implemented the Tele-audiology pilot program & TeleMOVE! Program.
- Established 10 telehealth specialty clinics (VISN 19).
- Implemented VISN-wide (15 & 20) Tele-dermatology services reaching over 2,400 Veterans and diagnosing over 3,700 conditions.

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### ORH Major Telehealth projects



- Implemented a Care Coordination Home Telehealth renal project for chronic kidney disease for 20 Veterans (VISN 23).
- Implemented Northern Plains PTSD Telehealth services on rural reservations
- Treatment services used innovative VA Telehealth technologies
- Currently 14 clinics serving over 11 Tribes in Montana, Wyoming, Nevada, North & South Dakota, and Utah from the Denver VA Medical Center with a rural funded psychiatrist
- Opening additional PTSD Tele-mental health clinics in VISN 19 & 23\
- Implemented a collaborative discharge planning model using tele-conferencing serving rural Veterans and 100% surveyed reported their health care needs were met and barriers to care were addressed;
- Implemented and valued programs VISN-wide that will enhance access for mental health and substance abuse care for OEF/OIF Veterans using Tele-health technologies;

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### Challenges/Conclusions in Rural Telehealth



- Technology can be a powerful facilitator of care for rural Veterans
- Thus far, preliminary findings demonstrate there is a level of patient satisfaction with the use of rural Telehealth technologies (Shore et al. 2010)
- We are at a critical juncture in development and adaptation of programs and need to evaluate the success of modalities & programs
- Need to work as a team and across programs/disciplines to provide Telehealth services that meet the needs of rural Veterans
- We need to be thoughtful about which models we select and adapt
- If we do this correctly there is a tremendous potential to improve quality and access to care for rural Veterans and underserved Veteran populations
- We need to account for the diversity in rural Veterans, their communities and environments

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### ORH Field Accomplishments



**Several ORH rural health initiative successes include:**

- **Enhancing Primary Care and Mental Health Services for Rural Veterans in Rhode Island (VISN 1)**
  - Enrolled 142 rural Veterans, developed collaborations with the local community health clinic, disseminated educational materials including Operation Enduring Freedom / Operation Iraqi Freedom (OEF/OIF) resources, and hired an outreach coordinator for mental health and OEF/OIF programs and referrals.
- **MyHealtheVet Rural Outreach, Mental Health Intensive Case Management E-Range, and Rural Women Veterans Health Program (VISN 5)**
  - Participation in 23 rural health Veterans outreach events with mass networking with community partners and resources.
  - Accepting referrals for the MHICM E-Range and working with community providers to support employment, housing services, medical care, and transportation.
  - Completed a women Veteran health care needs assessment and tools evaluation and hired a rural nurse practitioner for active community outreach.

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### ORH Field Accomplishments



- **Rural Health Community Low Literacy Program (VISN 6)**
  - Increasing rural Veteran enrollment, MyHealthVet utilization, assessing health literacy levels, and improving self health management to over 500 Veterans.
- **Utuaado, Puerto Rico Rural Outreach Clinic (VISN 8)**
  - Provided services to over 200 unique Veterans in rural communities. The clinic has received a high demand for services and outreach resources.
- **Rural Health Professions Institute (VISN 9)**
  - Completed 8 of 9 workshop sessions to over 200 providers on the complexities of rural health care.
  - Received strong enrollment response and positive feedback from participants across VISNs.
- **Wilmington, Ohio Outreach Clinic (VISN 10)**
  - Since August 2010, the outreach reach clinic has provided primary care, mental health, and telehealth services to rural Veterans.

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### ORH Field Accomplishments



- **Northern Michigan (Saginaw) Rural Health Transportation Network (VISN 11)**
  - Scheduled over 400 transportations for rural Veterans to appointments, who on average live 176 miles away from their appointment locations.
- **Collaborative Discharge Planning for Veterans Returning to Rural Areas (VISN 15)**
  - Over 80 rural Veterans received discharges from psychiatric care to outpatient care as a result of collaborative teleconferencing with inpatient and outpatient providers.
- **ACCESS: Assisting Communities to Collaborate for Expanded Soldier Support (VISN 16)**
  - Implemented and evaluated programs to enhance access for mental health and substance abuse care for OEF/OIF Veterans using the latest technology.
  - Completed a Student Veteran Outreach Program implementation tool-kit, held an orientation in August 2010, on education to administrators and student services personnel in 4 rural college campuses.
  - Veterans Treatment Court (VTC) provided outreach services (eligibility evaluations, education, and counseling) to rural Veterans, and certified six Veterans in the VTC Mentor Program.

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### ORH Field Accomplishments



- **La Grange Outreach Clinic (VISN 17)**
  - Providing primary care and women's health services.
  - Since August 2009, the clinic has seen 1027 unique rural Veterans. The clinic has reached the 2010 projected level of patients two years early.
- **Rural Outreach to Homeless Veterans (VISN 18)**
  - Completed set-up of an 1,300 bed shelter with urgent psychiatric and medical stabilization staging areas, and access to medical and mental health facilities.
  - The program supports rural Veterans with subsidized housing and continued medical care and case management.
- **Fully-operational mobile medical units (MMUs) (VISNs 1, 4, 17, 19, and 20)**
  - Utilized MMU to serve 148 Veterans for primary care services and 102 Veterans for mental health services and received high patient satisfaction scores (VISN 17).

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### ORH Field Accomplishments



- Successful implementations of telehealth and telespecialty services in rural areas (VISNs 1, 3, 4, 10, 12, 19, 20, and 23)
  - Improved access to care via Care Coordination Home Telehealth by implementation of best practices (VISN 1).
  - As of June 2010, completed 150 rural clinical video telehealth encounters (VISN 3).
  - Increased access to specialty services for rural Veterans through E-consults and telehealth (VISN 4).
  - Developed telesurgical sub-specialty pre- and post-operative services for the most rural medical centers (VISN 10).
  - Implemented the teleaudiology pilot program & TeleMOVE! Program (VISN 12).
  - Established 10 telehealth specialty clinics (VISN 19).
  - Implemented VISN-wide teledermatology services reaching over 2,400 Veterans and diagnosing over 3,700 conditions (VISN 20).
  - Implemented a Care Coordination Home Telehealth renal project for chronic kidney disease for 20 Veterans (VISN 23).

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### ORH Field Accomplishments



- Successful rural services support and expansions, including Home-Based Primary Care (HBPC) Expansion (VISNs 2, 7, 10, 21 and 22)
  - Enhanced access and expansion of services for rural Veterans in Northern Pennsylvania (VISN 2).
  - Implemented HBPC expansion at the Jasper, Mississippi Community-Based Outpatient Clinic (CBOC) resulting in improved access to services and decreased emergency room and inpatient stays (VISN 7).
  - Expanded optometry and podiatry services to 10 rural CBOCs (VISN 10).
  - Implemented HBPC on Molokai, Hawaii, resulting in increased access services and completed a town hall meeting with rural stakeholders in July 2010, to discuss service needs (VISN 21).
  - Implemented the Veteran medical motel model, Medtel, used to coordinate Veteran health care, transportation, and follow-up services (VISN 22).

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### ORH Website



**For More Information about the  
VA Office of Rural Health go to:**

**[www.ruralhealth.va.gov](http://www.ruralhealth.va.gov)**

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## Contact Information



**For further information please contact:**

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# QUESTIONS?

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