



Increasing accessibility, efficiency and impact for clinicians and service: networked educational engagement for remote and islands healthcare teams

Fiona Fraser
Project Lead - RRHEAL

The Remote & Rural
Healthcare Educational
Alliance (RRHEAL)

www.nes.scot.nhs.uk/rrheal

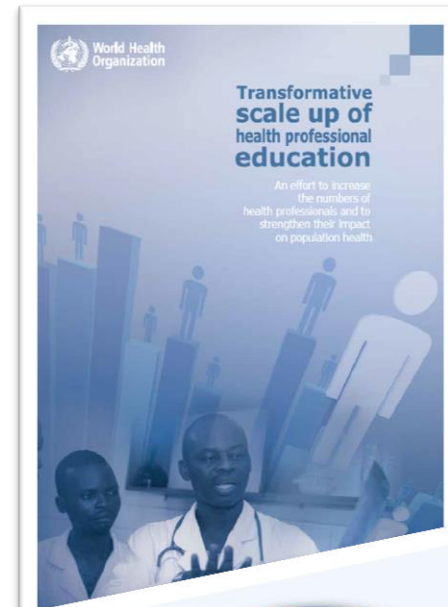
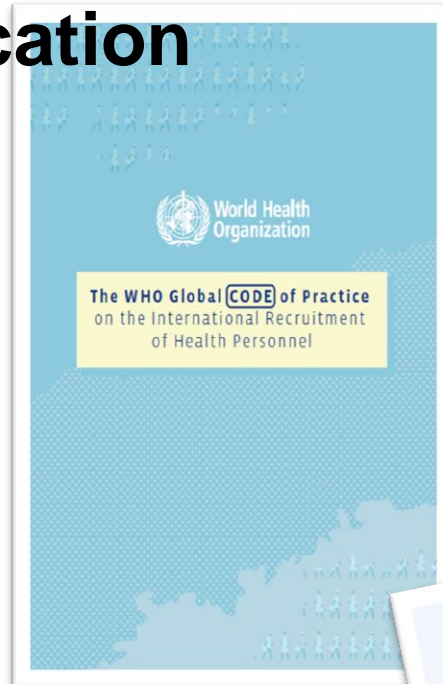
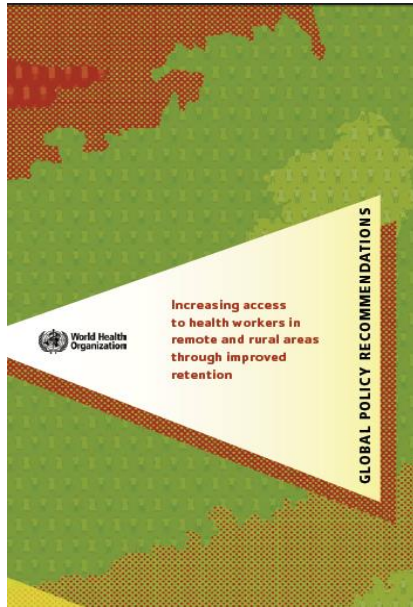




Context

- **Scotland - 20% population live across 94% of *remote and rural* landscape**
 - **Challenging – service delivery + staff support.**
 - **Drive for service re-design, new roles & ways of working**
 - **Cultural shift with change**
 - **Innovation required –improve quality and reduce cost**
- ✓ Policy directive
Delivering for Remote and Rural Healthcare (2008) ***“access, rural specific content and support for remote and rural learnerskey issues to be addressed”***
 - ✓ RRHEAL develops and delivers practical, structured educational resources and networks.

WHO Publication



•Global health workforce crisis

•Skill mix imbalance

•Uneven distribution
(health professionals)

•Need more, but not more of same!

•Quantity

•Quality

• Relevance

Factors related to decisions to relocate to, stay in or leave rural and remote areas



Figure 2. Factors related to decisions to relocate to, stay in or leave rural and remote areas



Personal

Rural background (origin), values, altruism

Family and community

Provision of schooling for children, sense of community spirit, community facilities available

Financial aspects

Benefits, allowances, salaries, payment system

Career related

Access to continuing education opportunities, supervision, professional development courses/ workshops etc, senior posts in rural areas

Working and living conditions

Infrastructure, working environment, access to technology/medicines, housing conditions etc

Bonding or mandatory service:

Whether obligated to serve there

Source: adapted from (29)

Background

An island Board sought intervention.

Educational engagement

- Isolated mixed discipline health teams
- Dispersed island chain

Need;-

- Increased access to “live” content
- Reduce cost and service impact of staff engagement
- Increase networking and peer to peer critical debate
- CPD opportunities
- **Connectedness** – impact on recruitment and retention



Intervention

Initiate a Video Conferencing (VC) educational network specifically for remote and islands teams

Pilot as proof of concept

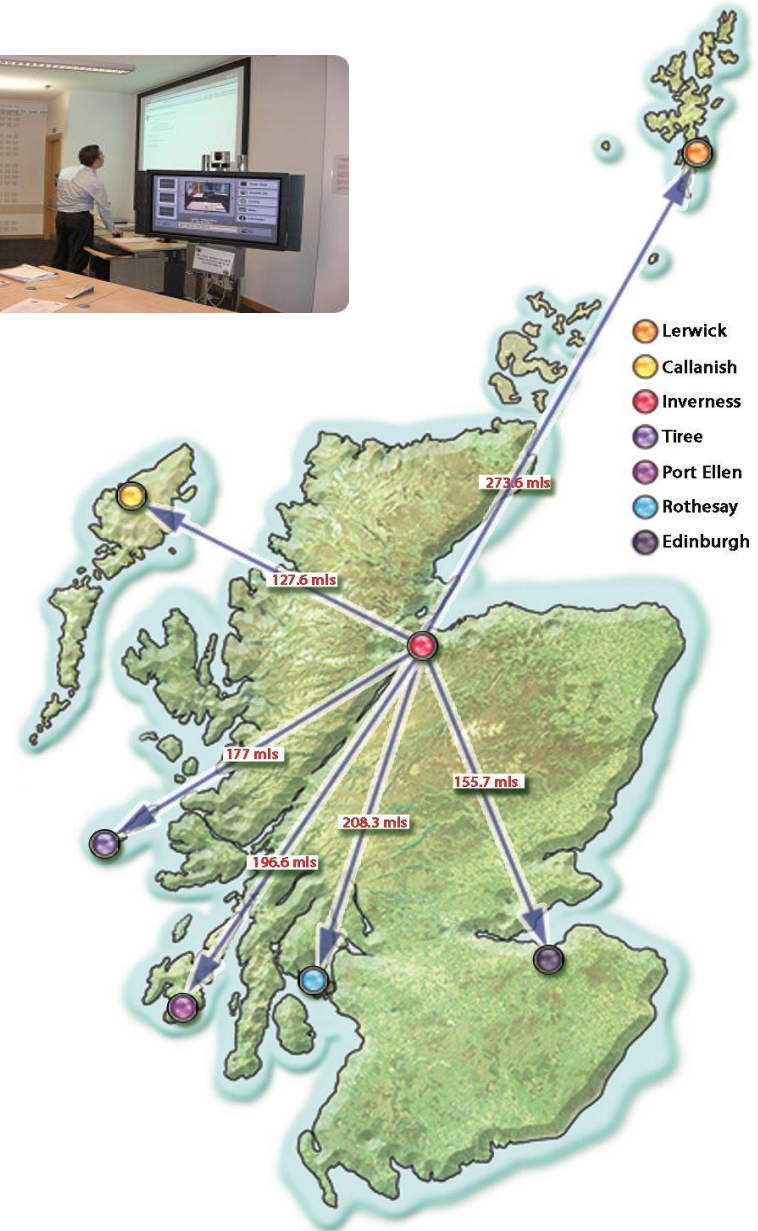
Standardised format enhancing remote participation and inclusion

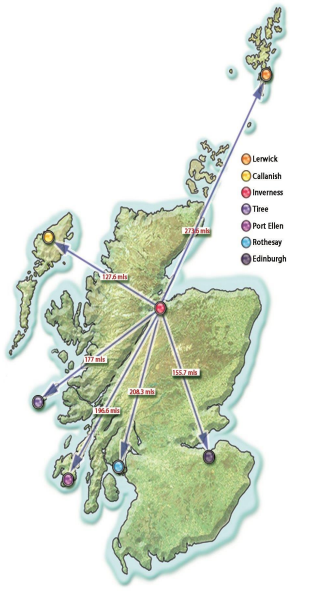
(Application of existing RRHEAL VC guidance)

Monthly meetings/ audience self selecting

Existing Service Level Agreement in NSH Scotland for VC

Focus on networked discussion & applications to local practice





Results/ outputs

- ✓ VC has greater potential for educational delivery and inter-disciplinary networking.
- ✓ Evaluation – high audience appeal with increasing engagement
- ✓ Demand for greater content/ higher specificity
- ✓ “Off shoot” VC educational programmes now evolving
- ✓ Increasing opportunities for educational engagement, knowledge exchange and cultural shift
- ✓ One VC Education network with enhanced knowledge support showing very favourable feedback+++



Take home messages:

- **Prepare – consider workplace access to computers and VC hardware**
- **Prepare “work- arounds” for areas of reduced connectivity**
- **Strong facilitative skills required**
- **Timing to anticipate engagement, varying from theme to theme**

- **Robust facilitation crucial**
- **R&R audiences familiar with remote participation supports presenters who may be less so**
- **Speaker preparation crucial with separate facilitator support**
- **High transferability to non remote, hard to reach audiences**

The Remote & Rural
Healthcare Educational
Alliance (RRHEAL)
www.nes.scot.nhs.uk/rrheal



Thank you

www.rrheal.scot.nhs.uk

