Regional "STI Update" Videoconferencing: Extending Our Reach

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In the Beginning.....

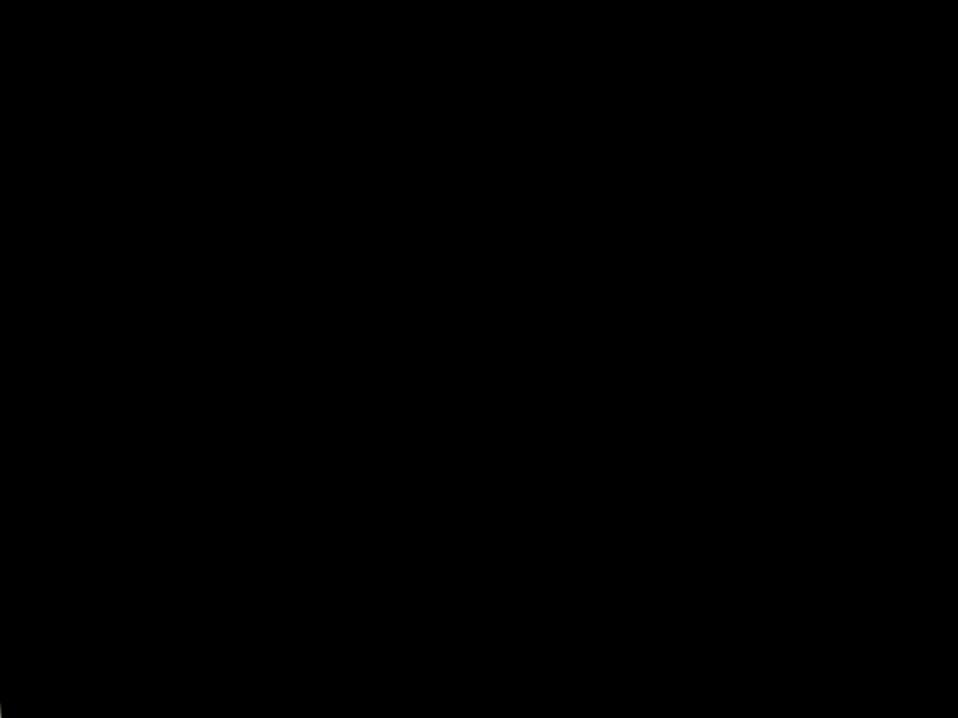
- Release of the 2006 Edition of the Canadian Guidelines on Sexually Transmitted Infections
- Release of report: "Infectious Diseases in Algoma 1995 2004"
- Ongoing Challenges of Professional Education in Rural/Remote Areas



How We Got Started

- Formed planning committee
- Partnership with GlaxoSmithKline and Merck Frosst pharmaceuticals
- Investigated possibilities for video conferencing
- Engaged the Public Health division of the MOHLTC in our "vision"





What We Hoped To Accomplish

- 1. Provide accessible, up to date, evidence based practice information to health care providers in the North
- 2. Promote communication with local community partners for enhanced STI management
- 3. Enhance collaboration among northern health units for educational efficiencies





Who We Reached

- **In 2006** 150 public health nurses, nurse practitioners, and community physicians in 15 sites
- In 2007 174 public health nurses, nurse practitioners and community physicians in 25 sites
- Increase of 25 people and 10 sites





Benefits

- Evidence based practice
- Current and pertinent information
- Minimal travel for participants and presenters
- Presenters did not have to be at same site
- Cost effective continuing education
- Interactive participation between the presenter and participants
- Networking opportunities



Challenges

- Site co-ordination
- Ensuring adequate IT support at the host site
- Technology glitches
- Marketing the event



Lessons Learned

- Shortened Conference from 1.5 days to 1
- Sharing the leadership role
- Technology parameters: 25 sites is best for Q&A
- Videotaping was problematic in 2007
- Time required for site co-ordination



Plans for the Future

- MOHLTC Update
- Best Practices in Clinical Management
- Complex HIV case management
- Electronic client records in Sexual Health Clinics
 - Lessons from the Field



Acknowledgements

- Public Health Division , MOHLTC
- N.O.S.H.N. group
- Presenters
- Pharmaceutical Partners
- Ontario Telemedicine Network
- Community Health Nurses' Initiatives Group

