

TANDBERG CUSTOMER PROFILE

Grampians Rural Health Alliance Network



- **GOAL:** Deliver education and training, improve the quality and access to healthcare by connecting staff in 40 regional towns, maximise resources, reduce travel and associated costs.
- **SOLUTION:** TANDBERG IP solution for healthcare.
- **RESULT:** Increased staff productivity, reduced operational expenses including travel, vehicle and time, enhanced peer-to-peer collaboration, optimised workforce recruitment and retention, delivered quality professional development and vocational training as well as improve quality of patient care.

“ Overall, we have seen an outstanding return on our investment in videoconferencing technology, especially in terms of time and resources.”

PETER ZIEBELL,
PROJECT DIRECTOR
GRAMPIANS RURAL HEALTH ALLIANCE
NETWORK (GRHANET)

EXPANDING BRANCH SERVICES

The Grampians Rural Health Alliance Network (GRHANet) was established in 2003 to implement and sustain a broadband information and communications technology network.

Funded under the Australian Federal Government's National Communications Fund, GRHANet received \$8 million to install, operate and connect the healthcare sector in the Grampians region of Victoria to a broadband network. The project is providing major broadband capability at local hospitals in at least 40 rural and remote towns, servicing an area of over 48,000 square kilometers and 200,000 people. In these towns GRHANet has also provided 100 non-hospital connections to sites ranging from general practitioners, community health centres and pharmacies, as well as home and community care service providers.

As part of this infrastructure deployment, GRHANet turned to videoconferencing to deliver education and training and improve health outcomes by delivering clinical services remotely. It implemented a TANDBERG IP-based visual communication solution, leveraging the GRHANet Cisco IP infrastructure. The converged solution provides voice, video and data communications solution for the desktop and office that allow real-time person-to-person video sessions to be added transparently as easy as a telephone call.

THE VISUAL COMMUNICATION IMPERATIVE

“Doing more with less is a universal challenge facing many industries. This is particularly true for the rural health sector, where specialist resources are scarce and often isolated from the broader network of doctors and nurses available in metropolitan areas,” explained Peter Ziebell, Project Director.

“We looked to videoconferencing to deliver three key objectives. Firstly, we wanted to increase staff productivity and maximise limited resources, while at the same time reduce travel expenses, vehicle costs and minimise occupational health and safety risks. Secondly, we wanted to provide a mechanism to deliver quality professional development and training to address one of the most critical issues facing rural communities: attracting and retaining doctors, nurses and healthcare professionals. And thirdly, we wanted to improve the quality and access to clinical healthcare by connecting 33 hospitals to specialists in larger centres through real-time tele-consultation, enabling remote diagnosis, specialist consultation or peer-to-

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“TANDBERG is helping GRHANet connect healthcare and medical professionals in real-time to collaborate on operational issues, improve their knowledge, access remote expertise and in the future, significantly increase patient care - all the while reducing costs.”

PETER ZIEBELL,
PROJECT DIRECTOR
GRAMPIANS RURAL HEALTH ALLIANCE
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peer collaboration amongst physicians.”

VIDEOCONFERENCING DELIVERS OPERATIONAL EFFICIENCIES

By taking full advantage of IP videoconferencing, the GRHANet initiative is having a profound impact on patients and healthcare professionals alike. “There are many difficulties associated with delivering healthcare to a large rural area,” added Ziebell. “For patients, long travel times to a health facility, can make round-the-clock access to care extremely difficult. Similarly, we don’t want our healthcare professionals spending time behind a wheel, instead of working with patients, especially when you consider the distances to be covered, the state of the roads and the poor mobile phone coverage.”

“Not only are we improving staff productivity and enhancing organisational communication, we are also dramatically lowering our travel, vehicle and telecom-related costs. For example, rather than travelling to weekly gatherings, face-to-face meetings can now take place remotely for nurse management, infection control or financial operations.”

IMPROVING STAFF RECRUITMENT AND RETENTION

The difficulties with recruiting and retaining health professionals in rural areas of Australia has been well documented. Isolation, lack of professional development programmes, lack of academic programmes, lack of peer consultation and the need to travel long distances are some of the reasons identified in the Government’s National Rural Health strategy. Videoconferencing has been shown to reduce the disincentives to rural practice, and also improve the professionals’ competence and confidence in managing patient care.

“Access to professional development and vocational training is an important requirement for rural health professionals,” explained Ziebell. “Rather than taking time off to travel and attend training in Melbourne, Sydney or Adelaide, we can now deliver training by videoconferencing. And thanks to our IP telephony solution, we’re not paying large amounts for ISDN connectivity.”

ENHANCING THE QUALITY OF PATIENT HEALTHCARE

The quality, reliability and transparent nature of TANDBERG’s IP Video will allow the Grampians healthcare providers to access specialised services more effectively, ultimately increasing the quality of healthcare delivery.

“The remote delivery of clinical services throughout the region is still in its infancy,” detailed Ziebell. “We have the opportunity to use video communication as a collaborative tool to help health providers speed diagnosis, control costs and improve patient care. We’re working with agencies and clinical staff to deploy the technology more broadly. We have the ability to display X-rays, tissue samples and MRIs on video. Specialists can be consulted more quickly and easily and triage can be conducted by emergency teams before injured patients even get to the hospital. This is particularly advantageous for a patient that may be located 2 to 3 hours from the nearest 24 hour emergency centre.”