

The Value of Evidence-Based Practice Training Through Telemedicine: Do We Need to Be in the Same Room?

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1. INTRODUCTION

- Research suggests many factors limit providers in rural regions from utilizing evidence-based practices (EBPs).
- These factors include limited time, access, and understanding of EBPs.
- Telemedicine may be a solution for overcoming implementation barriers in rural and remote regions.
- Research suggests that evidence-based lifestyle interventions delivered to patients through telehealth methods transcend implementation barriers.
- It is not well understood if telemedicine is an effective platform for training providers on EBPs.
- Qualitative methods are useful for gaining a deep understanding of the issue in question.
- These methods were utilized to understand the value of telemedicine for mode of training to deliver EBPs.

2. OBJECTIVES

- To understand the benefits and limitations of utilizing telemedicine to deliver trainings on EBPs in rural and remote regions.

3. METHODS

Recruitment

- Participants were recruited from those who had completed an online telemedicine course that provided them with certification to deliver EBPs to caregivers.

Instruments

- Demographics were assessed using a participant profile form designed for this study.

Analysis

- SPSS version 24 was used to examine demographics.
- Thematic analysis was utilized to identify common themes. Three coders were utilized.

Benefits of Implementing EBPs Through Telemedicine

Peer Support

"The other participants were awesome. We were able to communicate outside of the program, to process what we had heard, and how will we practice in our own communities, which are all different. So it was great, it was very positive."

Facilitator Competence

"When your facilitator is excited about the program and well-versed in it, that makes it even better. Both of these individuals were very knowledgeable and their information was fabulous, too."

Convenience

"You can access training from a well-respected institution and get the latest information on evidence-based practices, and it's available anywhere, anytime. And a person can use the information immediately. Otherwise, if you live in rural areas, you don't have access to institutions like Stanford, who provided the program. Otherwise, that would not be possible."

Barriers to Implementing EBPs Through Telemedicine

Individual Learning Differences

"You can't go as fast as some people would like. You have to slow down or somebody didn't understand it as quickly as maybe you did. You have to be open to that part of it."

Technology Problems

"Technology that's not working [prevents an online training from being successful]. And possibly a person that may not understand how to use the technology appropriately."

4. RESULTS

Participant Characteristics

- Wyoming Residents ($n = 7$)
- Female ($n = 7$, 100%)
- Modal health profession was social work ($n = 3$, 43%)

Thematic Analysis

- Saturation was achieved and coding reliability exceeded 90%.
- Two primary themes emerged as barriers to using telemedicine to teach EBPs, and three primary themes emerged as benefits to this platform. See Figure 1 for quotations from Town Hall Meetings representing each theme.
- Benefit themes:
 - Peer support
 - Facilitator competence
 - Convenience
- Barrier themes:
 - Individual learning differences
 - Technology problems

5. CONCLUSIONS

- A number of benefits and limitations to implementing EBPs through a telemedicine platform were identified from participant perspectives.
- Telemedicine appears to be a solution for delivering EBPs to individuals in rural and remote regions.
- Recommendations to overcome rural barriers to EBP implementation include rotating trainings with other EBPs to optimize recruitment of participants and to consider telehealth as a delivery option for EBPs to reach participants outside of individual communities.

Figure 1. Identified themes with representative quotes.