

Abstract

The Virtual Rural Generalist Service - a COVID-19 resilient support service for rural and remote communities

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Abstract

Introduction: Recruiting and retaining a highly skilled medical workforce in rural and remote communities is challenging^{1,2}. In Western NSW Local Health District (Australia), a Virtual Rural Generalist Service [https://aci.health.nsw.gov.au/_data/assets/pdf_file/0005/662234/ACI-virtual-rural-generalist-service.pdf] (VRGS) was established to support rural clinicians in providing safe and high quality care. The service leverages the unique skillset of rural generalist doctors to provide hospital-based clinical services in communities without a local doctor or where local doctors request additional support.

Method: Presenting observations and outcomes during the first 2 years of operationalising VRGS.

Results: This presentation reports on the success factors and challenges in developing VRGS to supplement face-to-face care in rural and remote communities. In its first 2 years, VRGS has provided over 40,000 patient consultations across 30 rural communities. The service has delivered equivocal patient outcomes compared with face-to-face care and has been COVID-19 resilient during a period where existing fly-in-fly-out workforce has been unable to travel due to border restrictions in Australia.

Discussion: Outcomes of the VRGS can be mapped to the quadruple aim³, focusing on improving patient experience, improving the health of populations, increasing the effectiveness of healthcare organisations and ensuring sustainable health care into the future. The findings described regarding VRGS can be translated to support both patients and clinicians in rural and remote settings worldwide.

References

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