

# E Health Breakout – THET links 2010



[www.medicineafrica.com](http://www.medicineafrica.com)

A novel web based healthcare education  
social network

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# Overview

- History of MedicineAfrica – KTSP (Kings THET Somaliland Partnership)
- “Is there a Need?”
- Crisp Report / current development ideas
- An Introduction to MedicineAfrica
- Outcomes
- Longer term Vision
- Documentary
- Group Session



# Telemedicine & EHealth – An Overview

- Such High Potential - ? Low Cost / connecting remote peoples
- Large number of willing people to support education
- Telemedicine has been characterised more by failure than success.
  - Expensive high tech hardware solutions.
  - Technology before community
  - ? A fundamental challenge is the cost of bandwidth (x 50 times)
  - Non sustainable funding and organisation
  - Unrealistic expectations
  - Lack of research into effectiveness and also cost effectiveness
  - Many small overlapping projects.
    - Eg teledermatology support tool in North West India
    - Poor sharing of expertise (re – inventing the wheel)

# History Of Medicine Africa

- 2007 KTSP trip
- Idea of Social Network for Education
- Currently in third phase of technical development
- Partnership with KCH and Interns in Somaliland
- Pilot phase → Presented at International Conference of Telemedicine and E-Health
- 2010 - Weekly teaching for all final year students & Interns in Somaliland
  - Medicine
  - Pyschiatry
  - Srugery
  - O&G
  - Specialities - ENT , Ophthalmology, ID
  - Strong M&E





“The **vision** of MedicineAfrica is to improve the quality and availability of health care services in low income countries through mentoring and supporting the education of students and staff in the health sector by connecting them with an international network of colleagues via an interactive online clinical learning tool.”

# Is there a Need?

- **Clear lack of senior supervision on KTSP trips**

Formal gathering exercise –

- “I have access to educational mentors for any clinical / careers dilemmas I may have”
  - 19/25 strongly disagree, disagree or feel neutral
- “I receive regular constructive careers advice”
  - 19/25 strongly disagree, disagree or feel neutral
- “I have access to a network of peers with whom I can swap ideas and information”
  - 19/22 strongly disagree, disagree or feel neutral
- “It is easy for me to develop my specific areas of interest”
  - 18/23 strongly disagree, disagree or feel neutral

# What is MedicineAfrica?



- Web 2.0 Social Network & Interactive clinical learning environment
  - Clinical training tool
  - Mentoring (inc Career Support )
  - Strengthening of Links / Communication tool
  - Telemedicine referral and service delivery tool
  - Research (epidemiology / educational research tool).

- Teaching Facilities
  - Live clinical case based teaching
  - Static discussions / blogs
  - Linked resources
- Technical
  - Low band width compatibility
  - Internet browser based
  - Multimedia (text, images, videos, ppt)
  - Social Network Structure

# CRISP REPORT - Global Health Partnerships E-medicine and Current Development Theory

The UK and other industrialized countries grasp the opportunity – and see themselves as having a responsibility as global employers – to support a massive scaling-up of training, education and employment of health workers in developing countries

## **Recommendation 14**

The UK should give increased emphasis to the use of ICT (information and communication technology and other new technologies in improving health and health services in developing countries through:

- *Bringing the innovators in digital technology and its application to health together with experienced development professionals to understand the potential impacts and work with international partners to pilot and evaluate applications*

# MedicineAfrica Site

# Outcome

## SUCESSES

- 120 people currently actively using the site (teachers / doctors etc)
- Regular twice weekly teaching sessions to the new interns & final year medical students
- North – South
- South – North
- Student link programme (psychiatry)
- Sierra Leone / Wellbodi Partnership to start using link to teach 6 Paediatricians

## CHALLENGES

- Internet challenges → Coding fixes.
- Locally appropriate?
- Technology challenges / New learning style & environment
- M&E & Research
- Embedding within links

# CRISP REPORT – key features

- 1. Strategic Partnerships**
- 2. Strengthening Health Systems**
- 3. The Staffing Crisis**
- 4. Scaling Up the Education and Training of Health Workers in Developing Countries**
- 5. The Technological and Commercial Environment**
- 6. Evidence, Knowledge and Research**

# Future

- Technological development (Ongoing & Future)
- KTSP
  - Expanding teaching programme
  - Personal Mentoring programme
  - Integration into Global Health institute (eg. BScs etc).
- Supporting new links
  - KTSP - Zimbabwe
  - Sierra Leone paediatric link
  - UCSF link
  - Other UK links
  - Within Africa links
  - Open access?
- Research / PhD
- Administrative / organisational work



**THE ROAD TO SUCCESS  
IS ALWAYS UNDER  
CONSTRUCTION.**

Somaliland 2010

# DOCUMENTARY

# Breakout Group Work

## Experiences & Challenges –

Group 1. Have you used any form of Medical E-Learning / Telemedicine?  
Successes / benefits and challenges of their experience.

Group 2. How would you design a Health E-learning / Telemedicine project in your context?

Group 3 Other Challenges / Issues to consider when start up Emedicine projects:  
How to set up a telemedicine link -  
Legal  
Accountability  
Practical

# Action Plan ?

- How can the UK Links Movement use Emedicine to improve it's work?
  - New Ideas / technologies Vs Use of existing technologies ?
  - Collaboration ?
  - Specific Action Points?