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## **DHR Public Health Leads by Example with GTA's New Videoconferencing Service**

Prepared by:

Georgia Technology Authority

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There's an old saying about a bird in the hand being worth two in the bush. It speaks to the natural reluctance to give up something that works for something that's unproven, no matter how much better it's supposed to be.

That's how the staff at DHR's Division of Public Health felt when GTA announced the replacement of the tried-and-true GSAMS videoconferencing service with the Georgia Video Network Service. The new videoconferencing service is provided by Applied Global Technologies (AGT) of Kennesaw, Georgia, in partnership with AT&T, which manages the state's wide area network.

Public Health pioneered videoconferencing at DHR in 2004 under the vision and leadership of Richard

A. Lasco, Ph.D., director of the Office of Training and Workforce Development. They quickly found GSAMS to be both stable and reliable. It also offered outstanding customer service. "There wasn't a time when I couldn't pick up the phone and get assistance right away," recalled Donna Dunn, Public Health's state training and distance learning coordinator.

### **So why change?**

Despite its stability and reliability, GSAMS lacked many of the features and flexibility of newer videoconferencing services. It takes less time to set up a GVNS videoconference, and the new service delivers better quality audio and video. GSAMS required equipment that's considered bulky by today's standards, but

GNVS works with a variety of videoconferencing equipment, including desktop units.

"GSAMS built in about an hour of test time to make sure participating sites worked properly. Now it takes about 15 minutes for as many as 18 sites," said Interagency Program Manager Rick Moody, "and GVNS videoconferencing is the closest I've experienced to real time."

### **Success comes with how you use technology**

The smoothness of the transition to GVNS helped to lessen Public Health's concerns about coming off GSAMS. Public Health started by moving only four sites to GVNS. "We wanted to test the new system before we jumped into it," Mr. Moody said. The result met his expectations. "It was the best team effort I've seen in a long time," he added.

Singled out for recognition were Karen Branson, James Brown, Roger Hatcher and Rhett Huber. "The lived up to Governor Perdue's initiative for faster, friendly and easier customer service," said Patsy Medley, Public Health's IT liaison. "I would like to work with them all the time."

He's also been impressed with AGT's customer service. AGT consistently responds to his e-mails within 10 minutes, and a technician is always available to call into a videoconference to troubleshoot any problems.

AT&T provided test circuits without charge to the state during Public Health's transition to GVNS, and Ms. Dunn described the company's customer service as exceptional. "During the

test process, they were responsive,” she said. “As problems were identified, they came up with solutions.”

But as Mr. Moody observed, success comes with how you use technology, and Public Health is taking full advantage of GVNS’ capabilities to reach audiences at 25 locations throughout Georgia.

Executive staff from the Association of State and Territorial Health Officials visited the Office of Training and Workforce Development and found its videoconferencing to be an excellent tool for public health communications and training.

Public Health uses videoconferencing almost daily to provide some form of training or to conduct staff meetings. In one example, the Georgia Public Safety Training Center used Public Health’s videoconferencing facilities to train 100 first responders and Public Health employees in emergency preparedness.

Public Health’s facilities are also used to provide nutritional training to mothers receiving assistance through the Women, Infants and Children Program.

Public Health Director Stuart T. Brown, M.D., conducts quarterly videoconferences to address health issues, and DHR Commissioner B. J. Walker also holds quarterly “town hall meetings” using GVNS. In fact, Mr. Moody credits much of their success to Commissioner Walker’s wholehearted support of videoconferencing.

“People were initially reluctant to use videoconferencing,” said Ms. Dunn. “Now we don’t have enough capacity to meet the demand.”

### **Making time, money and people go farther**

Even in good years, budgets for government agencies are tight, and videoconferencing is one way to stretch limited resources – time, money and people. Public Health conducted its own financial analysis and found that every \$1 invested in videoconferencing returned about \$8 in savings. The analysis looked at such factors as travel expenses and employee time and salary.

After seeing Public Health’s success with videoconferencing, other DHR divisions and offices want to use it, too. DHR is looking to expand GVNS to the divisions of Family and Children Services and Mental Health. It’s considering desktop videoconferencing so employees can participate in training or meetings while seated at their PCs.

Ms. Dunn is also putting together a team and a curriculum to teach others how to conduct a videoconference and the best ways to present information.

Their enthusiasm about getting others to use videoconferencing is tempered by the financial challenges facing smaller public health offices in rural communities. These offices often lack money for equipment and services, and some very rural areas still do not have access to the bandwidth necessary for videoconferencing to be a realistic option. Public Health is looking to GTA for help in resolving these issues.

“We want to provide all public health offices with the same training,” Ms. Dunn said. “We recognize that the power of videoconferencing is connecting communities throughout the state. It’s efficient and cost-effective, and it meets the needs of management and employees.”