RESEARCH TRANSLATION SNAPSHOT



Staff-reported barriers and facilitators to the implementation of healthcare interventions within regional and rural areas: a rapid review

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The challenge

People living in rural areas consistently experience worse health outcomes and reduced access to healthcare compared to those in urban areas. While implementing evidence-based healthcare interventions can help to bridge this gap, success depends on understanding the key factors influencing implementation of healthcare interventions in these unique settings.

What we did

We carried out a rapid review of 39 studies, published between 2000 and 2023. These studies explored healthcare staff perspectives – including those of clinicians, managers, and administrators – on the key barriers and facilitators to implementing healthcare interventions in rural and regional settings. We synthesised these findings to identify common themes across the reported barriers and facilitators.

What we found

Barriers and facilitators were reported across four levels:

- **Intervention-level:** Successful implementation depended on the intervention's fit with existing workflows and processes. Complexity, poor integration, and privacy concerns were common barriers.
- **Staff-level:** Positive attitudes, clearly defined roles, strong leadership, and targeted training facilitated success. Lack of knowledge or confidence, role ambiguity, and high staff turnover were barriers.
- **Patient-level:** Patient socio-demographic characteristics and attitudes, including engagement and trust, influenced how interventions were accessed and received.
- **System-level:** Insufficient funding, workforce shortages, vast geographic distances, and infrastructure gaps (e.g., physical and digital) were barriers to implementation. Leadership and organisational support, as well as strong networks and partnerships facilitated implementation.

What does this mean for stakeholders?

For policymakers, healthcare leaders, and researchers aiming to improve the implementation of healthcare interventions in regional and rural areas, this review highlights the need to:

• Tailor interventions:

- Avoid one-size-fits-all approaches. Ensure interventions are relevant and adaptable to local needs.
- Involve local healthcare leaders, staff, and communities in co-design and planning.

• Support and invest in healthcare staff:

- Offer repeated training opportunities, ensure role clarity, and build local leadership capacity.
- Support multidisciplinary team models to optimise rural workforce distribution.

• Engage with patients and communities:

- Communicate using culturally appropriate, inclusive, and accessible language.
- Partner with local communities to co-design health initiatives that build trust, reduce stigma, and support understanding and engagement with healthcare services.

• Strengthen rural health systems:

- Invest in infrastructure (e.g. digital platforms, transport, facilities) and leadership programs.
- Prioritise long-term strategies for rural workforce recruitment and retention.

Reference

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The DELIVER Research Project:

- Identifies what the people and healthcare providers of western Victoria need most in terms of homebased healthcare services
- Designs and tests the best way to deliver these services, so that home-based healthcare services will
 continue to grow and improve across the region and beyond
- Supports the growth of research in western Victoria, so that future research findings can quickly be translated to improvements in healthcare