

Clinical Decision Making & Provider Education Using Project Echo

Alanna Sieck, LICSW
Jennie Wright RN ACM
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Disclosure



- Tension between clinicians and technology advances. Pervasive skepticism-
 - ✓ Taking time away from patients
 - ✓ Making things more complicated
 - ✓ Removing the “face to face” from clinical care
 - ✓ Poor return on investment of time
- Our experience with innovative technology in the field has been positive- we are here to share....



What Is ECHO?

Project ECHO uses a hub-and-spoke videoconference model to share knowledge across large networks. The **hub** consists of an expert team that is able to connect virtually with various **spokes** (primary care doctors, nurses and other clinicians) to provide advice, recommendations and education.

<http://echo.unm.edu/>



People need access to specialty care for their complex health conditions.



There aren't enough specialists to treat everyone who needs care, especially in rural and underserved communities.



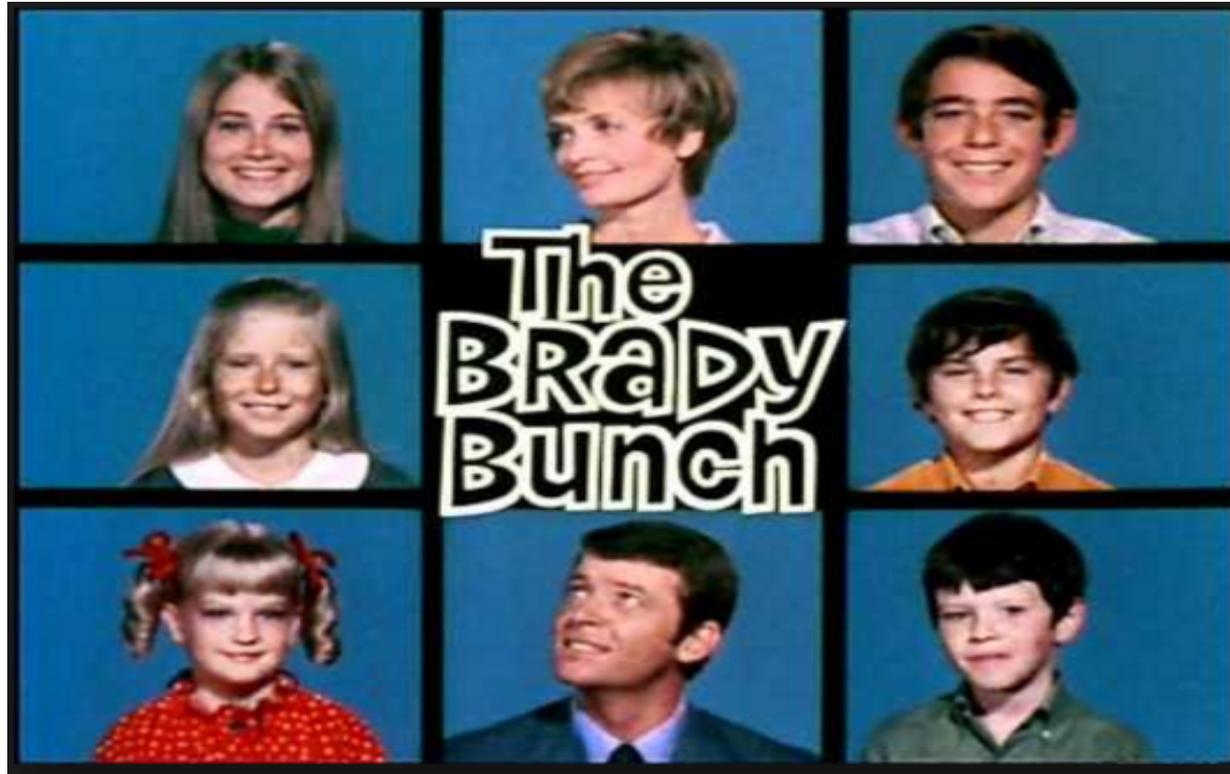
ECHO trains primary care clinicians to provide specialty care services. This means more people can get the care they need.



Patients get the right care, in the right place, at the right time. This improves outcomes and reduces costs.

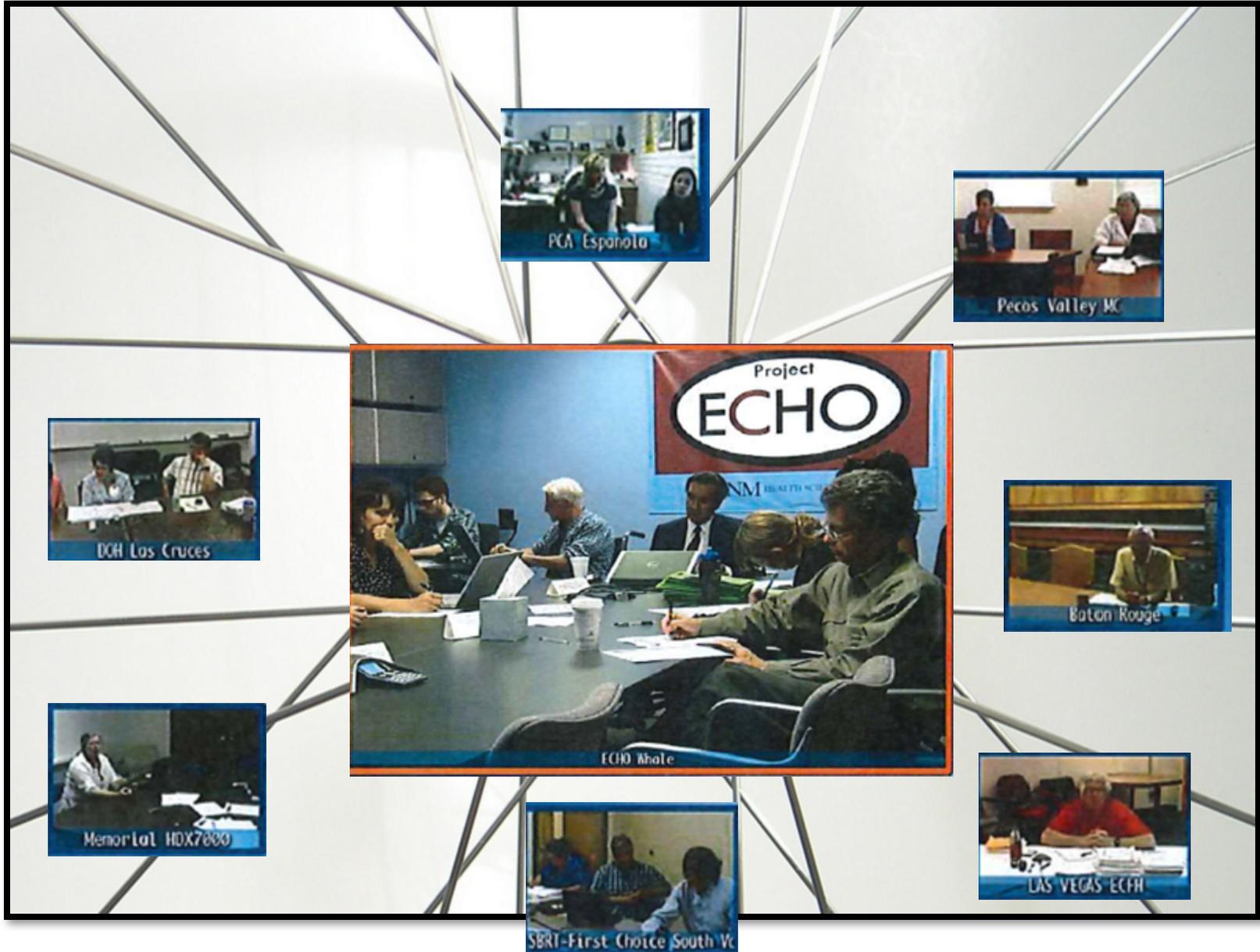


What does Project Echo Look like?





Project Echo is a Hub and Spoke model





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Start- Up



Making It Real Implementation - Process

- Meet with NWPHO leadership – identify goals
- Identify potential **spokes**– look for champions and early adopters
- Survey practices to determine appropriate frequency, day and time
- 1:1 meeting with practice managers and medical directors at identified practices
- Create a mini implementation team for each **spoke** for process and clinical support
 - ✓ Create buy-in from primary care clinicians
 - ✓ Case find and seed initial cases
 - ✓ Support the clinicians in terms of completing case review materials
 - ✓ Troubleshoot during the presentation
- Recognize the importance of **hub** facilitation skills
 - ✓ Strong time management
 - ✓ Ability to summarize and synthesize clinical information
 - ✓ Virtual crowd control



Making It Real Implementation -Technology

- Provide curriculum for didactic presentations- make it relevant and time limited
 - ✓ Organizations can develop their own curriculum
 - ✓ Utilize Project Echo Library database - BOX
- Use the mini- implementation team at each **spoke** to insure a positive technology interface for clinicians
 - ✓ Provide onsite set up
 - ✓ Assist with in the moment technology interface support during each Echo session
 - ✓ Conduct a mock Echo Clinic before go live
 - ✓ Cue clinicians to help them make the move from conference calls to visual encounters
 - ✓ Trouble shoot audio/visual speed bumps

How do Echo Clinics *Actually* Work?

Pre-work:

- Administrative team reaches out to providers to obtain cases to present
- Presenting providers use a standardized template that has all PHI removed

Echo Clinic Day

15 Minutes



Provider presents case to Hub and Spokes



15 minutes



Suggestions and recommendations are provided by Hub and Spoke members



20 Minutes

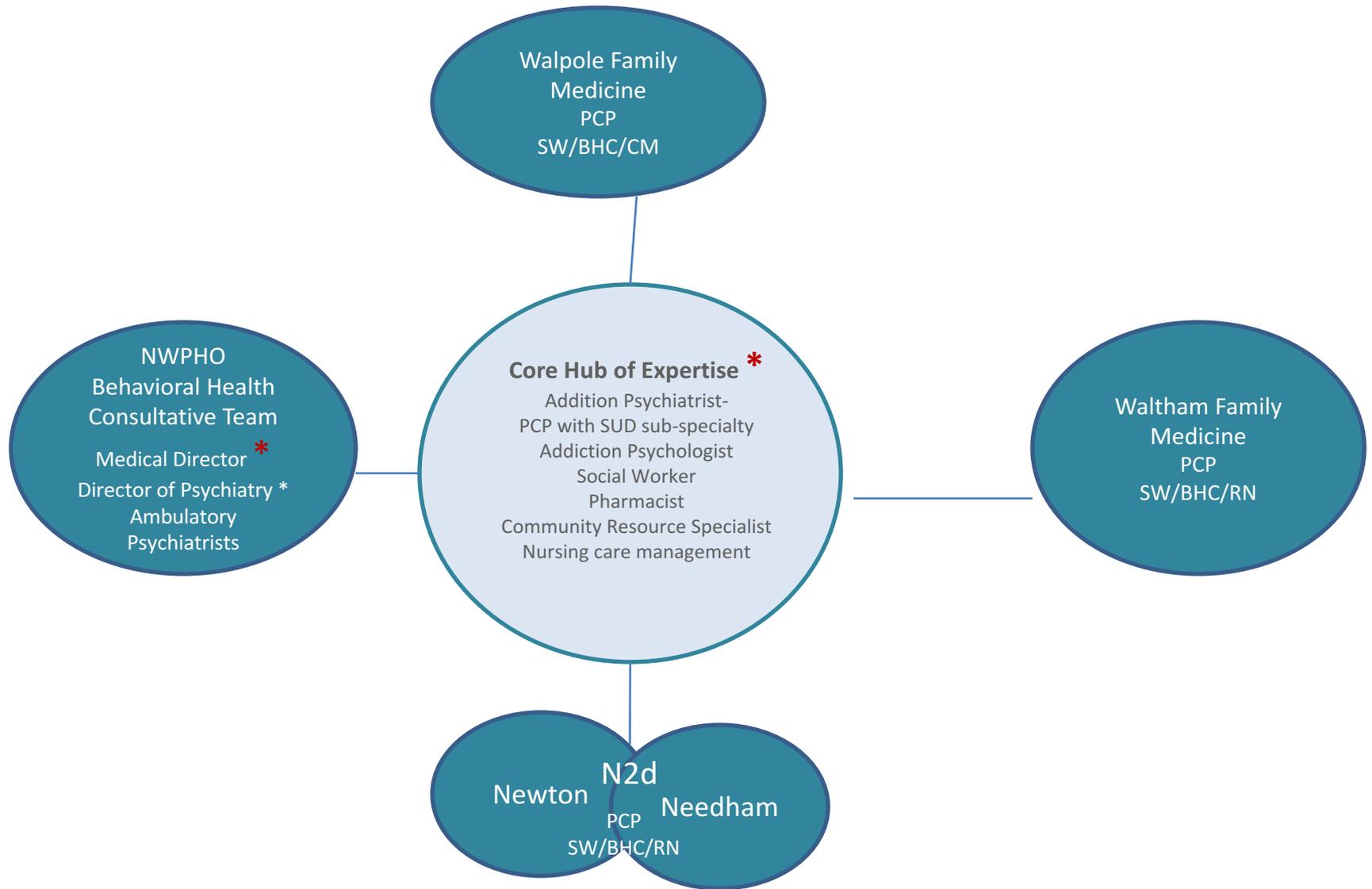


Learning didactic presented by Hub Team member with content expertise

Last 10 minutes are saved for closing questions and comments

Post-work:

- Administrative team sends recommendations and suggestions via email to participants
- Presenting providers can use recommendations with patients at their next visit



* Identifies Behavioral Health expertise



- 53 year old male with HTN, DM2, liver functions WNL
- Going through a stressful separation. Father of two young children
- Occupation - described as “high stress” job
- Commercial insurance- high deductible
- Financially secure – proud of being the sole provider
- Tobacco user
- Self describes his relationship with alcohol-
 - ✓ Helps him to wind down- every evening- at least 2-3 beers/nights
 - ✓ Friday and Saturday evenings- “out with the guys”- 8-10 rum /cokes
 - ✓ Doesn’t see his relationship with alcohol as “an issue”



“Should I be worried?”

“Does Mark have SUD?”

“If so- How should I approach him?”

“How can I broach this topic without his becoming defensive

“What should I do next?”





Our First ECHO Case- HUB Input



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- Recognize Mark trusts you! He keeps his appointments
- Use standard assessment tools to identify a pattern of use
- Ask Mark open ended questions
- Listen for “change talk”
- Consider introducing other mechanisms to reduce Mark’s stress
 - Exercise
 - Counseling/coaching
 - See if he wants to change
- Consider **naltrexone**- to reduce craving when he goes out with the guys



- Feedback from the PCP and **spokes**-
 - ✓ PCP appreciated support around the prep-work
 - ✓ Hub suggestions extremely helpful
 - ✓ Didactic on MI was valuable
 - ✓ Assessment tools- AUDIT C, PHQ9 and GAD-7
 - ✓ Medication recommendations- unsure about trying -would like to learn more

- Feedback from the **hub**-
 - ✓ Surprised about educational opportunity regarding assessment tools
 - ✓ Excited MI was well received!
 - ✓ Interested in feedback – reluctance to prescribe- suggestive of need for additional training and support

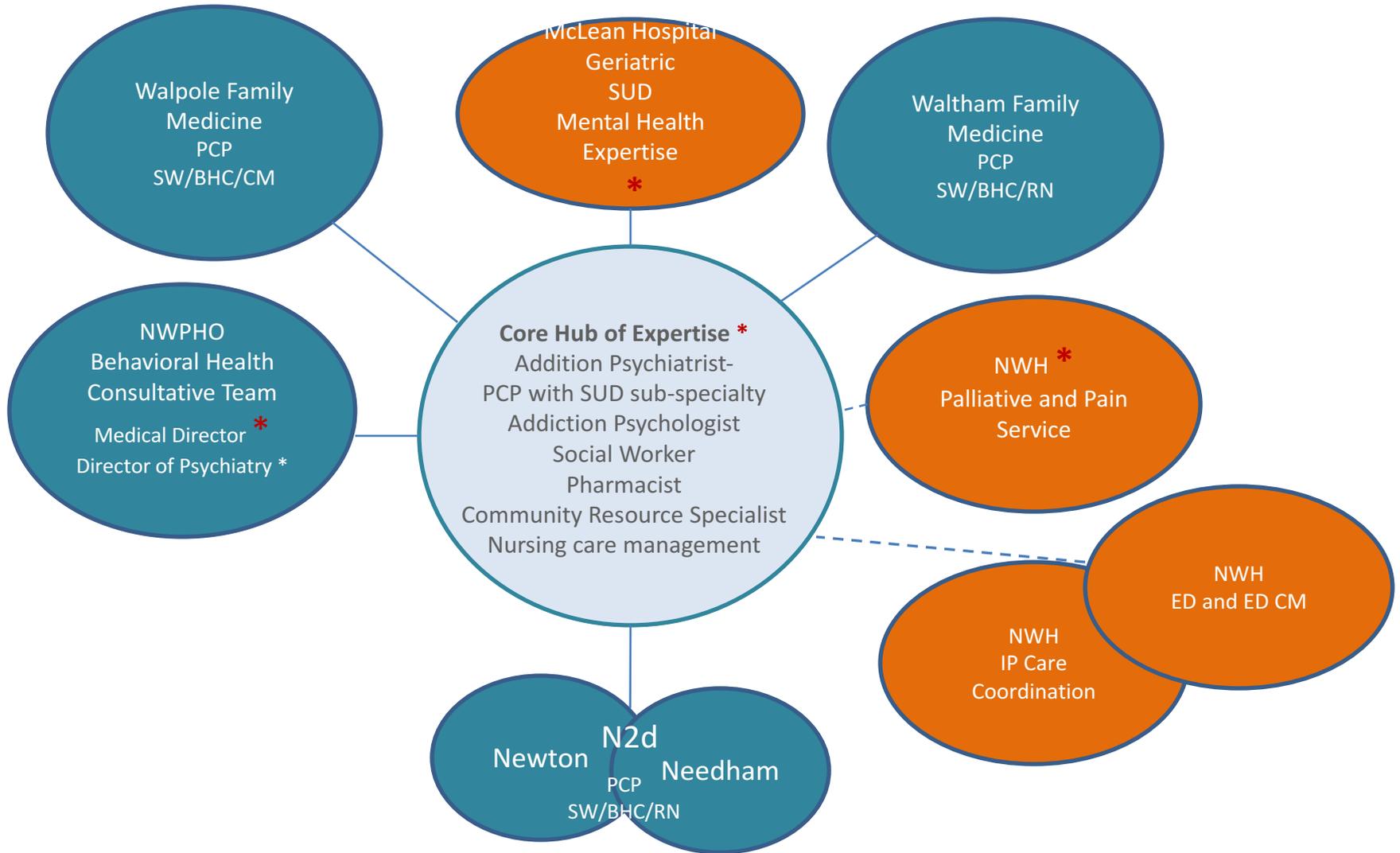


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Mid-Point

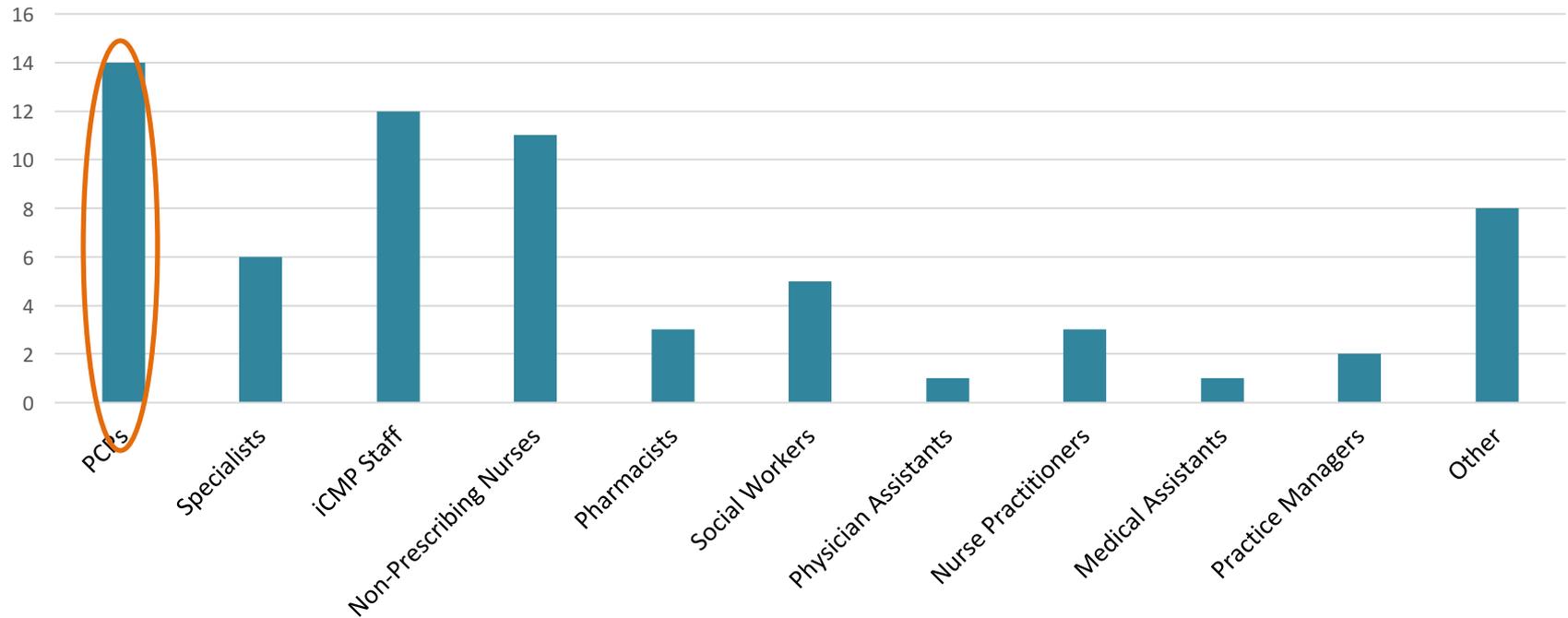


Identify and engage key stakeholders, promote champions, consider community partners



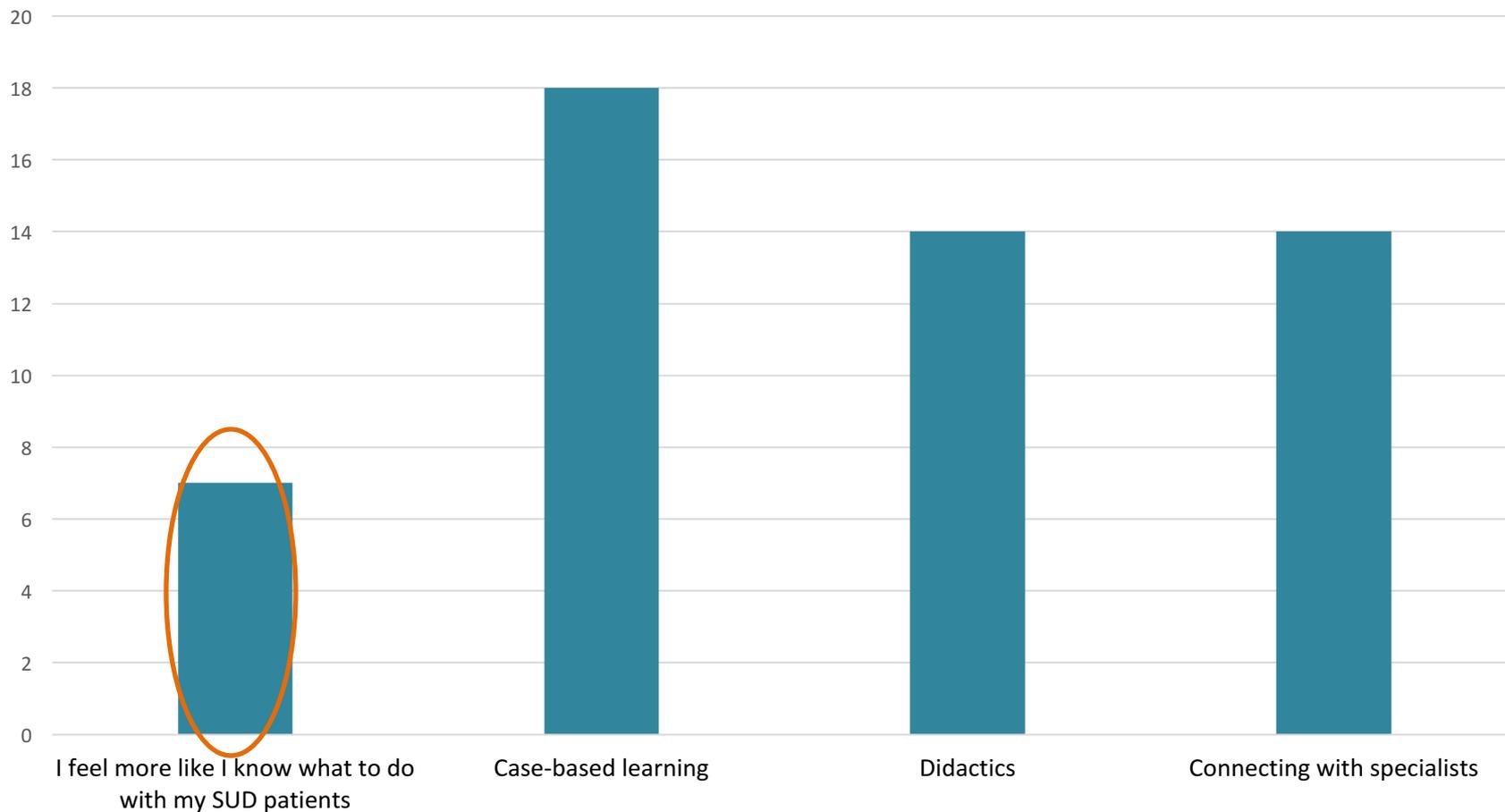
* Identifies Behavioral Health expertise

Attendance Data Summary of First 7 Sessions



- Specialists: pain providers, psychiatrists, psychologists
- iCMP Staff: iCMP care managers, iCMP social workers, iCMP pharmacists
- Non-Prescribing Nurses: iCMP care managers, RNs, LPNs, student nurses
- Pharmacists: iCMP pharmacists, pharmacy interns
- Social Workers: social workers, iCMP social workers, social work interns
- Nurse Practitioners: NPs from pilot practices, psych NPs, pain NPs
- Other: BH Coaches, project specialists, community resource specialists, program leadership with regular attendance

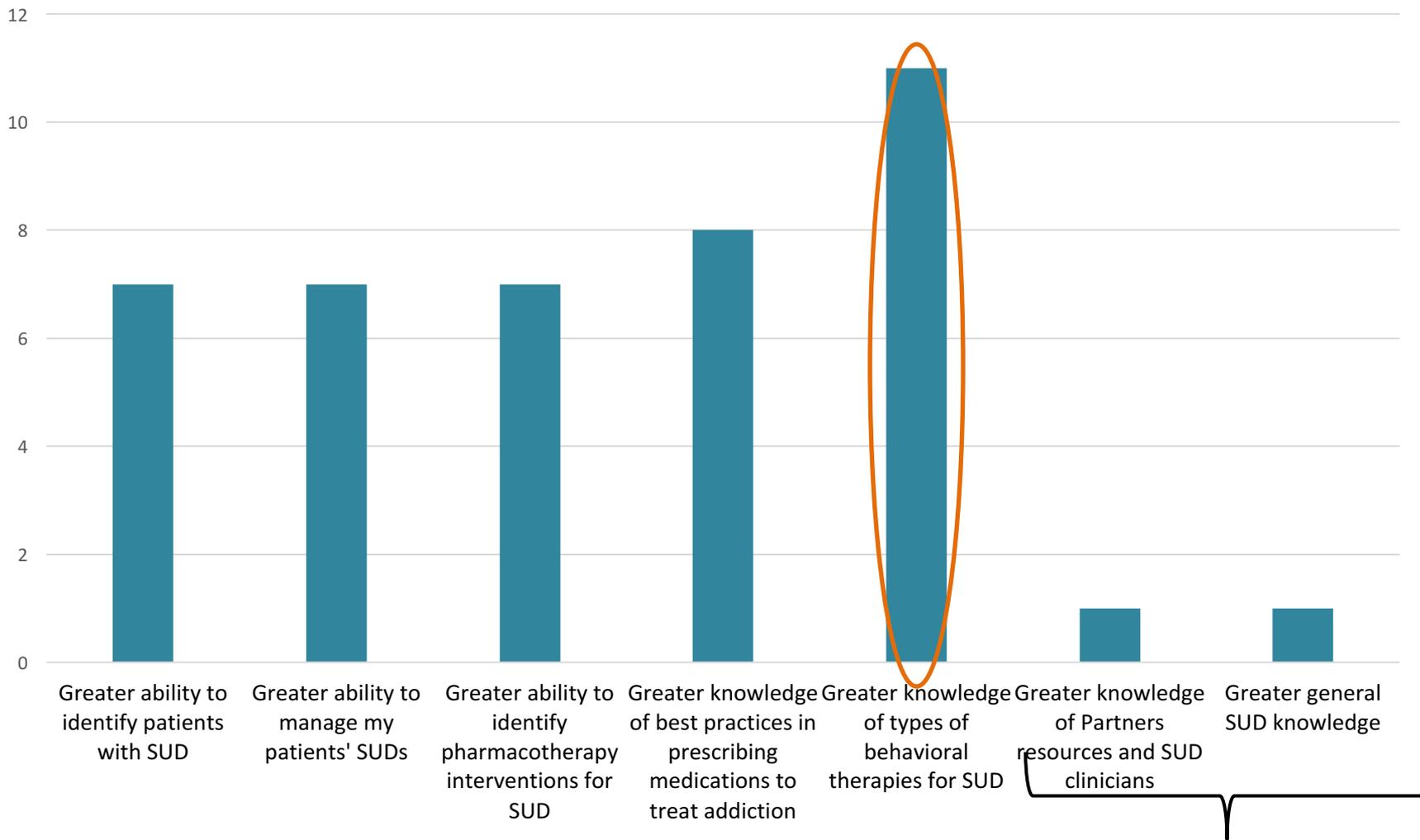
What Do You Like About ECHO?



n=19

- 95% found case discussion valuable
- 74% identified value in the didactics and connecting with specialists

Because of ECHO I Have.....



n=19

Write-in responses from participants



Pilot Outcomes Project Echo



- Technology can be finicky
- Include cost/need for laptops
- Sound/hearing can be compromised
- Providers uncomfortable with presenting via virtual technology

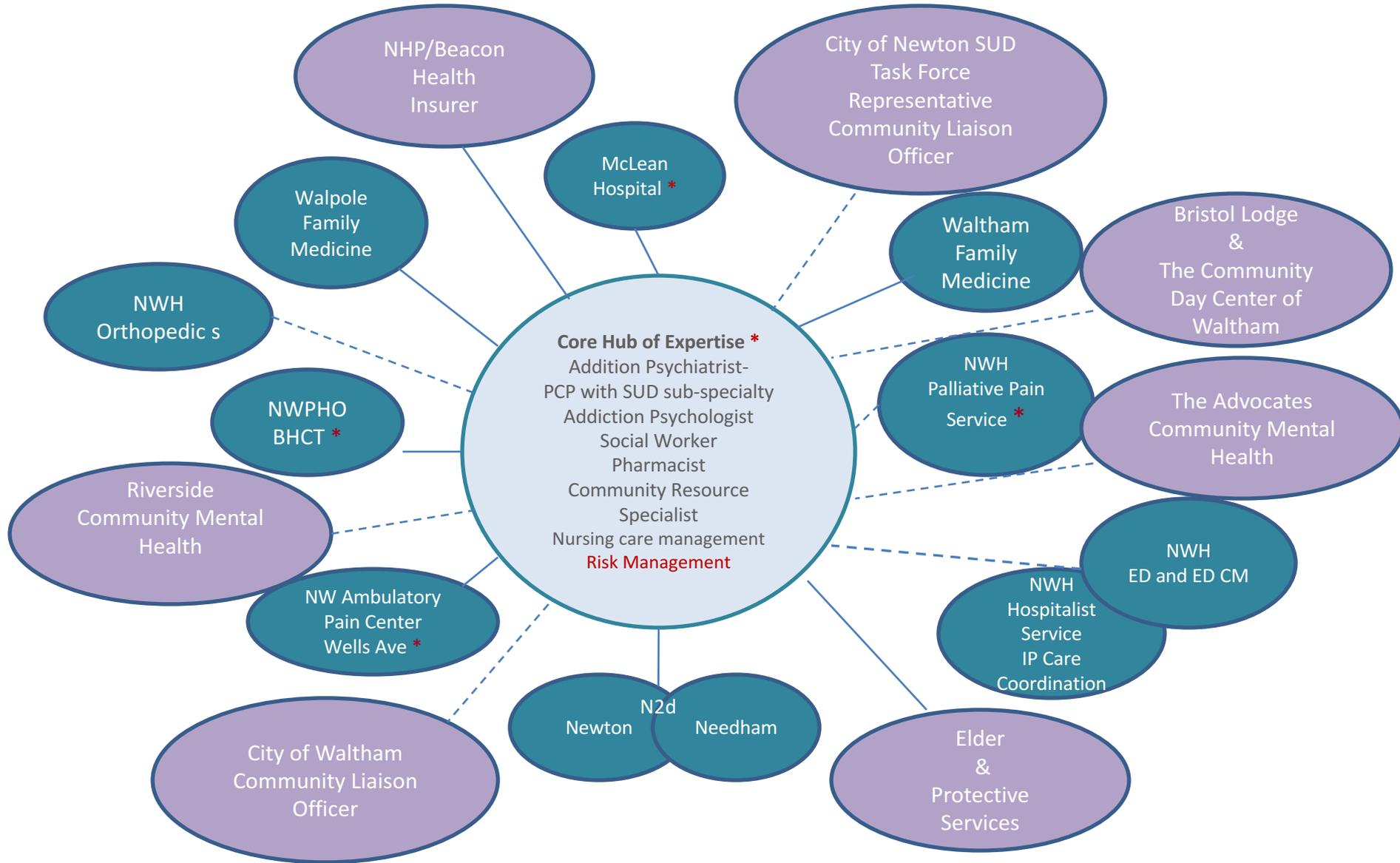
- Low cost
- Spread knowledge and expertise to the participating spokes
- CEUs available
- Promotes professional development
- Multidirectional learning
- Spokes are empowered to provide feedback on similar cases
- Improve healthcare delivery
- Improve patient outcomes



Our Vision
Targeted Expansion
Join With Others
Use The Technology!



Our Future Vision *Long Term Goal* Evolve, Sustain & Promote Meaningful Engagement



* Identifies Expertise



Local Connections

ECHO Hub	ECHO focus
Beth Israel Deaconess Medical Center	Gerontology
Fenway Health	Transgender Health
UMass Memorial Medical Group	Hepatitis C
UMass Memorial Medical Group	Medication Assisted Treatment
Partners HealthCare	Substance Use Disorders

National Connections

<http://echo.unm.edu/locations-2/echo-hubs-superhubs-united-states/>

Mailing Address: 1 University of New Mexico MSC07 4245 Albuquerque, NM, 87131

Physical Address: 1650 University Blvd NE Albuquerque, NM, 87102

Phone: (505) 750-3246 (ECHO)

Fax: (505) 272-6906 IT: (505) 750-4897

E-mail: echo@salud.unm.edu



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Additional Materials



Date: _____ Presenter: _____ ECHO ID: _____ Gender: M ___ F ___

Case: New ___ Follow-up ___ Collaborative Care Patient: Y ___ N ___ iCMP Patient: Y ___ N ___

TYPE OF SUD

- Alcohol Use Disorder
- Cannabis Use Disorder
- Opioid Use Disorder
- Stimulant/Cocaine Use Disorder
- Sedative/Hypnotic Use Disorder
- Tobacco Use Disorder
- Other Drug Use Disorder

BRIEF HISTORY OF THE PRESENT ILLNESS:



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Substance Use Disorders Clinic
Patient Recommendation Form

Date: _____ ECHO ID: _____ Presenter: _____

Case: New ___ Follow-up ___

After review of information provided and discussion of this patient's case, the following recommendations have been made:

Differential Diagnosis/Further Work-Up: _____

Non-Pharmacological: _____

Pharmacological: _____



STABLE RESOURCE TOOLKIT

The Patient Health Questionnaire (PHQ-9)

Patient Name _____ Date of Visit _____

Over the past 2 weeks, how often have you been bothered by any of the following problems?	Not At all	Several Days	More Than Half the Days	Nearly Every Day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed or hopeless	0	1	2	3
3. Trouble falling asleep, staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself - or that you're a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed. Or, the opposite - being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead or of hurting yourself in some way	0	1	2	3

Column Totals _____ + _____ + _____

Add Totals Together _____

10. If you checked off any problems, how difficult have those problems made it for you to Do your work, take care of things at home, or get along with other people?

Not difficult at all Somewhat difficult Very difficult Extremely difficult

1. Kroenke K, Spitzer R, Williams W. The PHQ-9: Validity of a brief depression severity measure. JGIM, 2001, 16:606-616



Generalized Anxiety Disorder 7-item (GAD-7) scale

Over the last 2 weeks, how often have you been bothered by the following problems?	Not at all sure	Several days	Over half the days	Nearly every day
1. Feeling nervous, anxious, or on edge	0	1	2	3
2. Not being able to stop or control worrying	0	1	2	3
3. Worrying too much about different things	0	1	2	3
4. Trouble relaxing	0	1	2	3
5. Being so restless that it's hard to sit still	0	1	2	3
6. Becoming easily annoyed or irritable	0	1	2	3
7. Feeling afraid as if something awful might happen	0	1	2	3
<i>Add the score for each column</i>	+	+	+	
Total Score (add your column scores) =				

If you checked off any problems, how difficult have these made it for you to do your work, take care of things at home, or get along with other people?

- Not difficult at all _____
- Somewhat difficult _____
- Very difficult _____
- Extremely difficult _____

Source: Spitzer RL, Kroenke K, Williams JBW, Lowe B. A brief measure for assessing generalized anxiety disorder. *Arch Intern Med.* 2006;166:1092-1097.



Assessment Tools

AUDIT-C Questionnaire

Patient Name _____ Date of Visit _____

1. How often do you have a drink containing alcohol?

- a. Never
- b. Monthly or less
- c. 2-4 times a month
- d. 2-3 times a week
- e. 4 or more times a week

2. How many standard drinks containing alcohol do you have on a typical day?

- a. 1 or 2
- b. 3 or 4
- c. 5 or 6
- d. 7 to 9
- e. 10 or more

3. How often do you have six or more drinks on one occasion?

- a. Never
- b. Less than monthly
- c. Monthly
- d. Weekly
- e. Daily or almost daily



Echo 'Box' Online Library

Project ECHO logo | Search: rep | Upgrade | Navigation icons

All Files > Project ECHO Resource Library

Upload | New | ... | [Icon] [Icon]

Welcome to this collaborative library of replication resources! See the Welcome to Box folder for an introduction.

- ALL TeleECHO Clinic Materials** Owned by Project ECHO - University of New... Shared [Icon] [Icon]

Updated today by Dan Threlkeld 1019
Share your materials with the broader metaECHO community in this collaborative folder! Includes ECHO Institute and non-ECHO Institute TeleECHO Session Materials.
- MetaECHO Community: Articles, Newsletter, Monthly Session Archive, & Program Information** Owned by Project ECHO - University of New... Shared [Icon] [Icon]

Updated Aug 18, 2016 by Andrea 812
This folder contains ECHO-related articles, MetaECHO Newsletter archive, presentations from the monthly sessions, partner lists, and programs and information. Subscribe to the newsletter here: <http://eepurl.com/ZqcaH>
- Outreach, Recruitment, and Promotional Materials** Owned by Project ECHO - University of New... Shared [Icon] [Icon]

Updated Aug 16, 2016 by Felipe Amaral 71
Q&A Fact Sheets, Flyers, Infographics, Presentations, Videos (including Dr. Arora's Introduction), Talking Points, and Powerpoints designed to promote ECHO
- Replication-Related Resources** Owned by Project ECHO - University of New... Shared [Icon] [Icon]

Updated Aug 18, 2016 by Felipe Amaral 70
This library is a compilation of materials to facilitate replication of the ECHO model related to getting started, building support, budgets, recruitment, incentivizing participation, evaluation, hub development, and more.
- Welcome to Box** Owned by Project ECHO - University of New... Shared [Icon] [Icon]

Updated Aug 11, 2016 by Tracy Smith 7
This folder contains guidelines for using box, such as document naming conventions, and other logistical details.
- 100M Change Draft High Level Outline 2016-07-03.docx** Share [Icon] [Icon]

Uploaded Jul 6, 2016 by Christine Weisz 15.2 KB 21
- TICAL2016 SOS Telemedicina Versión I.docx** Shared [Icon] [Icon]

Uploaded Jun 30, 2016 by hector.archedera@gmail.com 478.6 KB 9
- TranslationHTN.docx** Shared [Icon] [Icon]

v75 Updated Jul 6, 2016 by Naranjargal 62.6 KB 6

Collaborators

- Tracy Smith
Owner
- Alanna Sieck
Editor
- kkutemeyer@
Co-owner
- Frank Royba
Co-owner
- Soleille Lope
Co-owner
- +605 People
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