Rural/Frontier Care Transitions
Project ECHO®

How the ECHO Model is being used to improve care coordination.
“Rural areas generally have a greater elderly population than urban areas... with physical access to care the greatest challenge that many elderly rural patients face.” ¹

The Need

• Wyoming and Montana are vast, rural states with many Medically Underserved Areas/Populations or Health Professional Shortage Areas (HPSAs)

• Nearly 75% of Wyoming counties are designated as “frontier” (5.5 people/square-mile)*

• The Wyoming growth rate for people over the age of 65 is much higher than the national average, with an anticipated growth rate of 97% from 2010 to 2030**

*United States Census Bureau, *American Community Survey* 2013
**United States Census Bureau, *American Community Survey* 2013
The Challenge

Patients and providers in rural locations face additional barriers to coordinated health care

- Distance to care and basic necessities - multiple sites of care
- Few safety net resources
- High turnover and shortages of providers and specialists
- Geography and weather
- Lack of infrastructure supporting collaboration
The DEMONOPOLIZATION of knowledge.
A Collaborative Approach
The mission of Project ECHO® is to expand the capacity to safely and effectively provide best practice care for chronic, common and complex diseases in rural and underserved areas and to monitor outcomes of this care.
How It Works

Project ECHO® uses a “learning by doing” and “guided practice” model. The model can standardize care by promoting and quickly disseminating best practices to isolated providers and practitioners.
RURAL/FRONTIER CARE TRANSITIONS – HOW THIS PROJECT WORKS
A System Focus

“In my experience there is far less substandard clinical care than there is unreliable care delivery process. Care delivery infrastructure is almost always the issue in care coordination gaps.”

- Jane Brock, MD, MSPH

Quality Innovation Network National Coordinating Center
Objectives

• Encourage best practices, increase knowledge and foster practice change in the field of care transitions

• Work to decrease hospital readmission and admissions as well as emergency department use

• Develop a community of Hub Team members and Spoke Sites to foster positive relationships and increase support for rural and frontier providers

• Increase provider participation in care coordination
**Rural/Frontier Care Transitions – Project ECHO®**

**Who**
- Broad spectrum of rural/frontier health care providers from Montana and Wyoming.
- From physicians, skilled nursing facilities, home health agencies to community-based organizations.

**When**
- Started March 2017. One hour session, every other week.
- 30 min. case presentation from spoke sites; 20 min. care coordination topic discussion with subject matter experts.

**Where**
- Virtually host at the University of Wyoming – Wyoming Center on Aging.
- Multi-site Hub Team members participate virtually from many locations.

**How**
- Virtual case presentation with didactic portion presented via Zoom.
- HUB Team members present and provide advice. Team members include an expert in patient engagement, care coordination, rural/frontier primary care physician, geriatric pharmacist, geropsychologist, discharge planning specialist and more.

**Incentives**
- CME/CEU offered.
- Participants receive evidence-based recommendations from the Hub Team and other network participants.
Recruited/Participating Sites in Montana and Wyoming
Partnering to Improve the Coordination of Care for Wyoming Patients

- University of Wyoming – Wyoming Center on Aging
- Wyoming Hospital Association/HEN
- Wyoming Primary Care Association
- Wyoming Department of Health – Rural Health / Public Health
- Wyoming Medical Society
- Long-Term Care Associations
The Hub Team

An interprofessional team of regional and national care coordination experts

- An expert in patient engagement
- An expert in care coordination
- A rural/frontier primary care physician
- A geriatric pharmacist
- A geropsychologist
- A discharge planning specialist
- Guest Hub experts
Commitment to Collaboration Form

Commitment to Collaboration – Community Partner

In the spirit of collaboration, (collaborating community partner) is committed to working with Project ECHO®. In this regard, this partner offers to:

1. Participate in bi-weekly Project ECHO® conferences by presenting cases, providing comments and asking questions. (We encourage participation by multi-level teams, including physicians, nurses, pharmacists, mental health professionals, CNAs, therapists and other team members, when possible.)
2. Provide clinical updates and de-identified outcome data on patients, as needed.
3. Fall out periodic surveys to help improve services to clinicians and other partners.

Please list the key community partners: staff members and their contact information. Please include anyone who will participate in or support Project ECHO® in Rural/Primary Care Transitions at your site. Staff members usually include a clinician (physician or mid-level provider), support staff (RN, MA or Community Health Workers), IT person and administrator(s).

<table>
<thead>
<tr>
<th>Name</th>
<th>Role/Title</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abby Run</td>
<td>Clinic Facilitator/Coordinator</td>
<td>(307) 766-2095</td>
<td><a href="mailto:arux1@uwyo.edu">arux1@uwyo.edu</a></td>
</tr>
<tr>
<td>Catherine Carrico, PhD</td>
<td>Project Manager</td>
<td>(307) 766-6687</td>
<td><a href="mailto:ccarrico@uwyo.edu">ccarrico@uwyo.edu</a></td>
</tr>
<tr>
<td>Kevin Frank, BSN</td>
<td>Mountain-Pacific Wyoming/Montana Project Coordinator</td>
<td>(307) 472-0507 ext 3</td>
<td><a href="mailto:kfranke@mpqph.org">kfranke@mpqph.org</a></td>
</tr>
<tr>
<td>Tad Johnson</td>
<td>Tech Support</td>
<td>(307) 766-3802</td>
<td><a href="mailto:tjohn@uwyo.edu">tjohn@uwyo.edu</a></td>
</tr>
</tbody>
</table>

Please have a representative of your organization sign below, indicating you agree to the terms in this statement of collaboration.

Please return forms to Abby Run
Email: arux1@uwyo.edu
Address: 1000 E. University Ave. | Laramie, WY 82071-2000
Fax: (307) 766-2763

Signature of Representative

Typed/Printed Name of Representative

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## Brochure

**UW ECHO in Rural/Frontier Care Transitions Network Curriculum**

~ Thursdays 12:00pm - 1:00pm (MST) ~

A bi-weekly case-conference plus educational presentation

Previous sessions available for viewing.
Please contact wycoa for your user name and password!

<table>
<thead>
<tr>
<th>DATE 2018</th>
<th>TOPIC/TITLE &amp; Objectives</th>
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<tbody>
<tr>
<td>May 17</td>
<td>Supporting End-of-Life in Rural Areas</td>
<td>Jessica Carrasquillo</td>
</tr>
<tr>
<td>May 31</td>
<td>Rural Palliative Care Model</td>
<td>TBD</td>
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<tr>
<td>June 14</td>
<td>Advanced Care Planning</td>
<td>Faith Jones</td>
</tr>
<tr>
<td>June 28</td>
<td>End-of-Life: The Family Connection</td>
<td>Martha Hayward</td>
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<tr>
<td>July 12</td>
<td>Advanced Planning Documents: Advanced Directives, Living Will, Power of Attorney, POLST, etc.</td>
<td>Maya Pignatore</td>
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<tr>
<td>July 26</td>
<td>New Approaches in Rural Communities to End-of-Life: Tele hospice/remote hospice</td>
<td>TBD</td>
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<tr>
<td>Aug 9</td>
<td>Chronic Care Management/Transitional Care Model</td>
<td>Faith Jones</td>
</tr>
<tr>
<td>Aug 23</td>
<td>Chronic Care Management: How you can get involved</td>
<td>Faith Jones/Catherine Carrico</td>
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### General Information:

**Goals/Objectives:**

- Demonstrate best practices, increased knowledge and practice change in the field of care transitions.
- Apply strategies to decrease hospital readmission and admissions as well as emergency department use.
- Develop a community of practice among team members and spoke sites to foster positive relationships and increased support for rural frontier providers.
- Exemplify and encourage increased provider participation in care coordination.

*Who is eligible to participate in the Network?*

Any provider or organization (including physicians, NPs, PAs, nurses, medical assistants, pharmacists, social workers, case managers, mental health staff, OT/PT/SLP, etc.) with an interest in care transitions. Participation is free.

### Continuing education details:

Continuing education will be available for interdisciplinary healthcare providers including: pharmacy, nursing, social work, psychology, and other healthcare professionals and social service providers.

### Requirements for participation:

- A one-time registration is required. Please call (307) 766-2829 or email wycoa@uwyo.edu.
- A case presentation from each site for 2018.
- A venue or room for participants at your site which has a PC with a webcam, IPad, or iPhone connected to the internet.
- A designee who is responsible for working with WyCOA and Mountain-Pacific on network details.
- All participants are asked to complete an evaluation for each session.

### Upon registration, each site will receive the information to log-on to each session.

For more information:
call (307) 766-2829, wycoa@uwyo.edu or visit www.uwyo.edu/wycoa
Outcomes

• Increase in knowledge of best practices for effective transitions of care
• Increase in intent to change practice and actual practice change
• Increase in comfort and self-efficacy in dealing with care coordination
• Decrease in unnecessary hospital readmissions and admissions
• Decreased emergency department (ED) use
• Increase in provider participation in coordination of care
• High provider satisfaction with participation in ECHO
• Increase in feeling of support among frontier providers
• Decrease in feelings of provider isolation
### Participation

#### Attendance
- Individual Attendees - **155**
- Total Attendance - **307**
- Average – **16 / session**
- Facilitators Involved - **4** individuals attending combined total of **19** times

#### Participant Info
- Medicine (MD, DO, PA-C) - **7**
- Pharmacy (PharmD, RPh) - **9**
- Nursing (RN, NP) - **51**
- Mental /Behavioral Health - **3**
- PT/OT - **4**
- Other - **81**

#### Network Info
- Number of Sessions - **19**
- Total Hours - **19**
- CME/CE (Regional) offered

#### States Represented
- Wyoming
- Montana
- South Dakota
- Colorado
- New Mexico
- Maryland

*ECHO Launch Date: March 2017 Clinic Report adapted from iECHO*
### TABLE 1. Satisfaction with training

<table>
<thead>
<tr>
<th>Question</th>
<th>Mea n</th>
<th>SD</th>
<th>Low (n/%)</th>
<th>2 (n/%)</th>
<th>3 (n/%)</th>
<th>4 (n/%)</th>
<th>5 (n/%)</th>
<th>Missing Data (n/%)</th>
<th>Total (n/%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>B1 – Overall Satisfaction with the Presenters</td>
<td>4.50</td>
<td>0.63</td>
<td>0 0</td>
<td>0 0</td>
<td>9 6.67</td>
<td>47 34.81</td>
<td>73 54.07</td>
<td>7 5.19</td>
<td>136 100</td>
</tr>
<tr>
<td>B2 - Satisfaction with your learning experience</td>
<td>4.48</td>
<td>0.63</td>
<td>0 0</td>
<td>0 0</td>
<td>9 6.67</td>
<td>49 36.30</td>
<td>70 51.85</td>
<td>8 5.93</td>
<td>136 100</td>
</tr>
<tr>
<td>B3 – Satisfaction with overall educational experience</td>
<td>4.49</td>
<td>0.64</td>
<td>0 0</td>
<td>0 0</td>
<td>6 4.44</td>
<td>28 20.74</td>
<td>45 33.33</td>
<td>57 42.22</td>
<td>136 100</td>
</tr>
</tbody>
</table>

### TABLE 2. Change in Practice Associated with Didactic and Case Presentations (n = 136)

<table>
<thead>
<tr>
<th>Question</th>
<th>Endorsed “Yes” (n/%)</th>
<th>Missing (n/%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I will seek additional training information on the didactic topic</td>
<td>91 (66.91%)</td>
<td>10 (7.35%)</td>
</tr>
<tr>
<td>The didactic presentation was relevant to my practice site</td>
<td>118 (86.76%)</td>
<td>9 (6.62%)</td>
</tr>
<tr>
<td><strong>I learned something new from the didactic</strong></td>
<td>113 (83.09%)</td>
<td>8 (5.88%)</td>
</tr>
<tr>
<td>I will seek additional training information on the case presentation topic</td>
<td>70 (51.47%)</td>
<td>35 (25.74%)</td>
</tr>
<tr>
<td>The case presentation was relevant to cases that I have seen in my own practice</td>
<td>80 (58.82%)</td>
<td>46 (33.82%)</td>
</tr>
<tr>
<td>I learned something new from the case presentation and discussion</td>
<td>82 (60.29%)</td>
<td>45 (33.09%)</td>
</tr>
<tr>
<td>I have interest in presenting a case through ECHO in the future</td>
<td>38 (27.94%)</td>
<td>16 (11.76%)</td>
</tr>
<tr>
<td><strong>After participating in this session, do you feel more connected to other providers in Wyoming?</strong></td>
<td>115 (84.56%)</td>
<td>8 (5.88%)</td>
</tr>
</tbody>
</table>
Survey results reported in December 2017 from participating spoke sites showed:

- Participant satisfaction: **4.45** out of 5
- Participant learning experience: **4.54** out of 5
- **91%** stated they learned something new;
- **80%** reported an increased connection with other providers
- **40%** reported intent to change their practice and improve communication with patients
- **35%** reported intent to improve patient education
Conclusions

This ECHO Network contributes significantly to providers’ sense of connection with other providers in the state. The experience has a significant impact on knowledge of care transitions and intent to improve practice.
Future Directions

• How could the ECHO model be applied to other projects?
• How do you think the ECHO model could be used to improve patient care in Wyoming?
Thank you!

QUESTIONS?

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