

# Project ECHO®

## Rural/Frontier Care Transitions

*An Example of Technology Transforming Health Care*

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# A Patient Experience

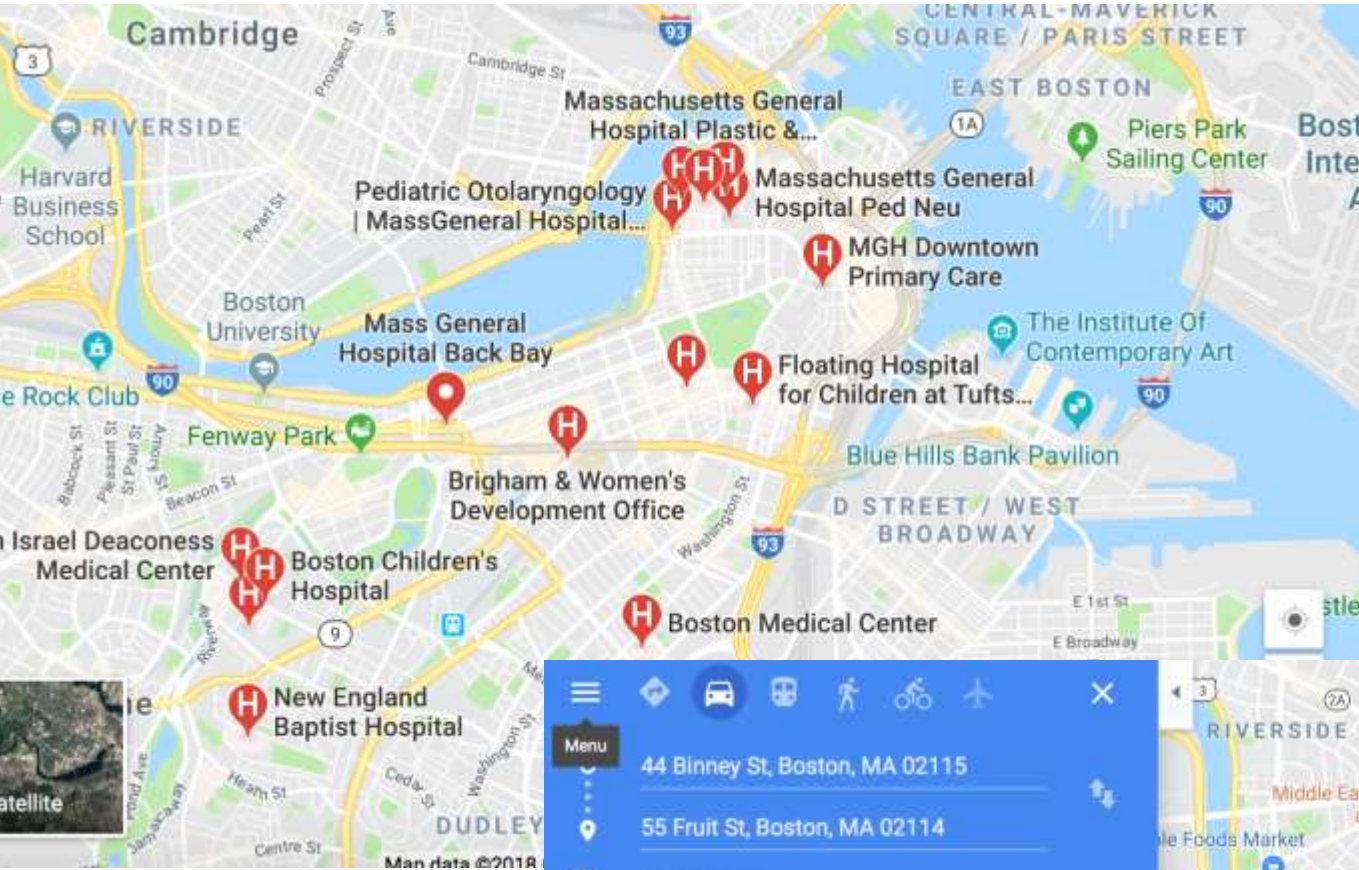
I have a lot of experience in improvement science and patient and family centered care, but the most valuable experience I have to offer you is my experience as a cancer patient.

# Advice



- Get a second opinion
- Get a third opinion
- Choose a doctor who does this operation at least ten times a week

# Options for Me



Navigation interface showing a list of destinations:

- 44 Binney St, Boston, MA 02115
- 55 Fruit St, Boston, MA 02114
- Add destination

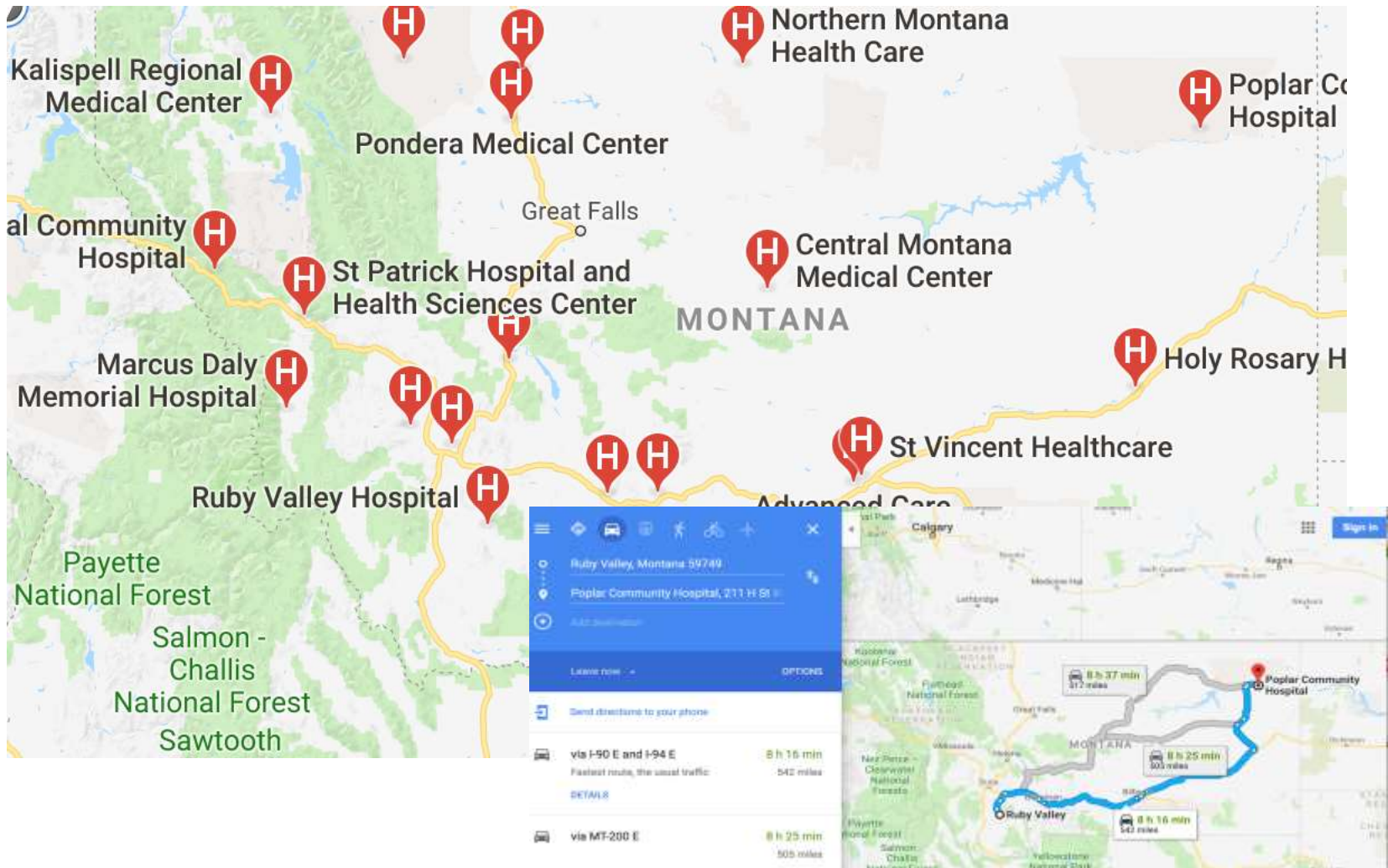
Buttons: Leave now, OPTIONS, Send directions to your phone



Navigation interface showing a route:

- via Storrow Dr 13 min
- Fastest route, light traffic, then usual

# Options for Montana





# Project ECHO<sup>®</sup>

Project ECHO (Extension for Community Healthcare Outcomes) is a collaborative model of medical education and care management that empowers clinicians everywhere to provide better care to more people, right where they live.

# How it Works

The ECHO model does not actually “provide” care to patients. Instead, it dramatically increases access to specialty treatment in rural and underserved areas by providing front-line clinicians with the knowledge and support they need to manage patients with complex conditions



# The Hub and Spoke Model



- Everyone is equal
- The Hub is stable
- Spokes support one another
- High efficiency

**ECHO is:**

The ***DEMONOPOLIZATION*** of  
knowledge.

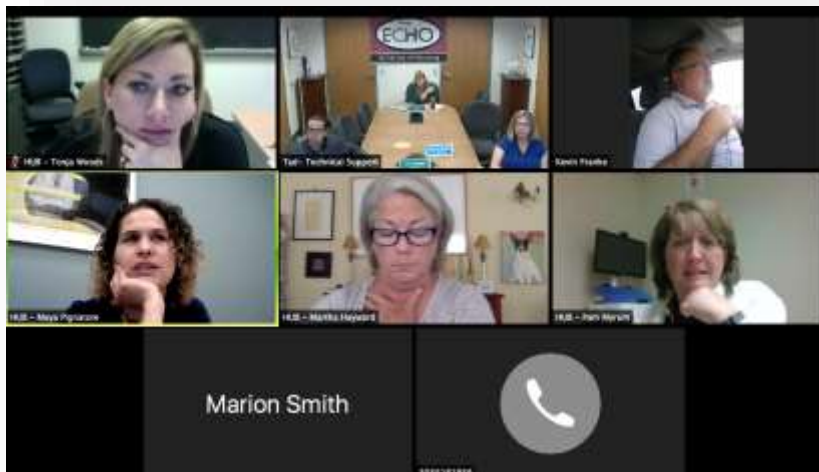
Project

**ECHO**<sup>®</sup>

**University of Wyoming**

# 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 members

# The IT Superhero



# The Need

- Wyoming and Montana are vast, rural states with many medically underserved areas/populations or Health Professional Shortage Areas (HPSAs)
- Wyoming and Montana are aging at a faster rate than other parts of the country
- Older adults face multiple chronic conditions and an increased need for coordinated care



# The Challenge

“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.”<sup>1</sup>



<sup>1</sup> U.S. Department of Health & Human Services. (2008, July 31). Tom Morris, Acting Associate Administrator Office of Rural Health Policy, HRSA on Aging in Rural America: Preserving Seniors' Access to Healthcare before Special Committee on Aging, U.S. Senate. Retrieved from <http://www.hhs.gov/asl/testify/2008/07/t20080731f.html>.





# The Challenge

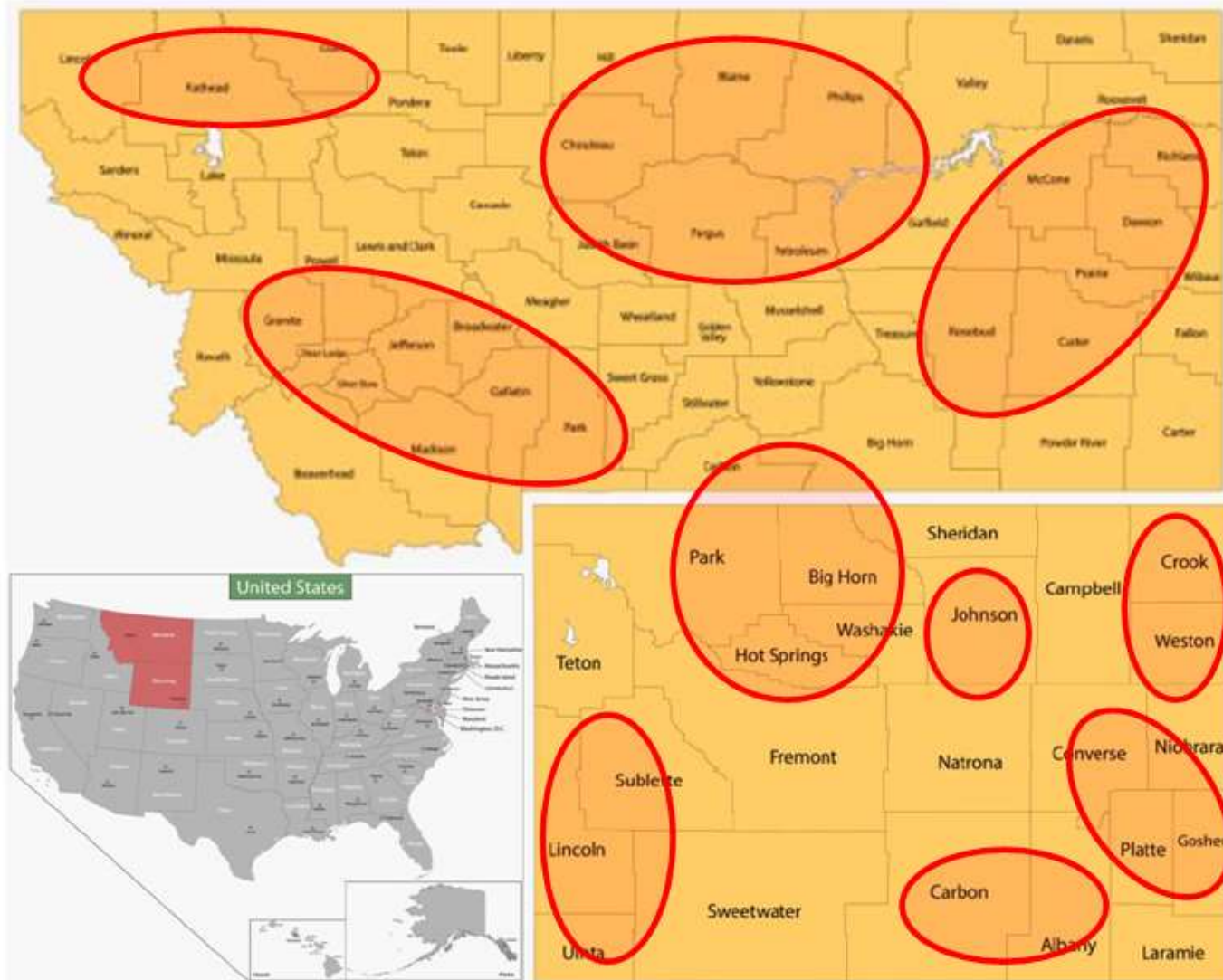
Patients and providers in rural locations face additional barriers to coordinated health care

- 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

# A Collaborative Approach



# Areas of Recruitment in Montana and Wyoming



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

## Network Info

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

# What Will You Do with IT?

What can you do?

# Discussion

So. What will you do?



# THANK YOU!

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