



HEALTH | CHOICE



Mountain ECHO:
Implementing Tele-mentoring
to Increase Access to
Medication Assisted Treatment

Rose Planteen, MPH

November 7, 2018

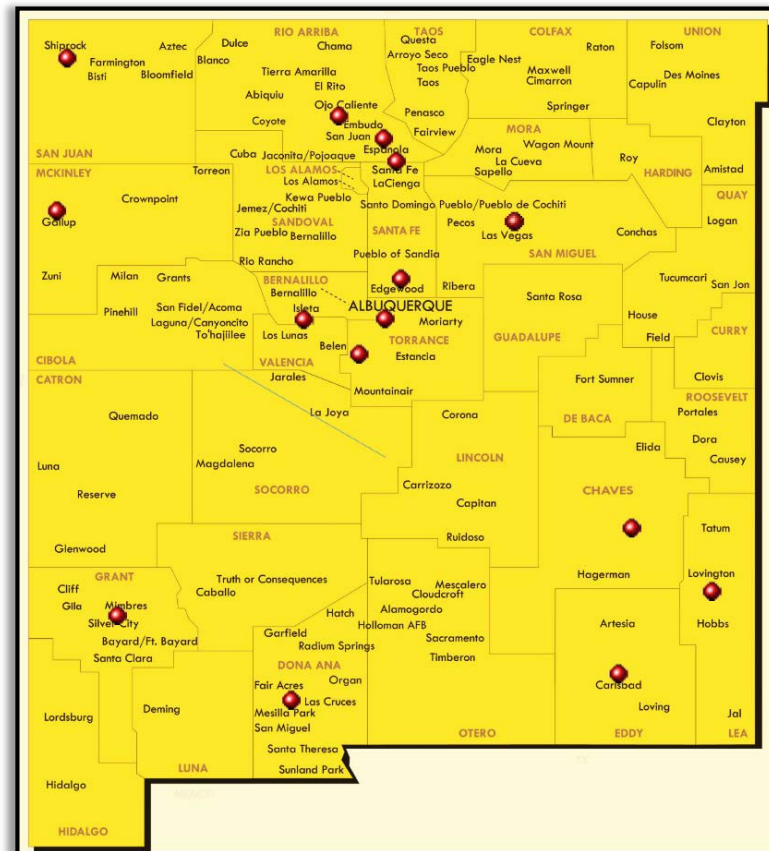
Project ECHO[®]

Dr. Sanjeev Aurora, a liver disease specialist at the University of New Mexico, launched Project ECHO[®] (Extension for Community Healthcare Outcomes) in 2003.

At the time, limited access to care for Hepatitis C in New Mexico.

Provided tele-mentoring to primary care clinicians throughout New Mexico.

Treatment for hepatitis C is now available across New Mexico.

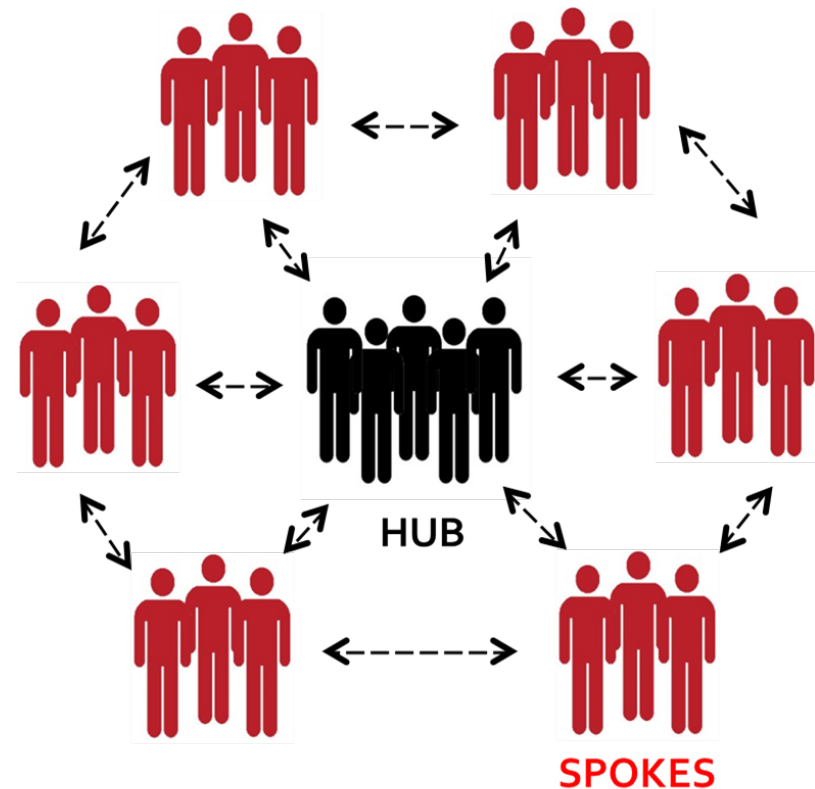


Project ECHO[®]

A 2011 study published in the *New England Journal of Medicine* showed that the quality of hepatitis C care provided by Project ECHO-trained clinicians was equal to that of care provided by university-based specialists.

This sparked a movement for other diseases and a model that could be used worldwide.

Today, Project ECHO operates more than 190 hubs for more than 65 diseases and conditions in 23 countries.



Mountain ECHO: The Idea

- HCIC Medical Directors and Clinical Team had developed interest in ECHO through attendance of other programs.
- Northern Arizona impacted in the national opioid epidemic.
- Encountering stigma and gaps in service due to lack of knowledge.
- Other barriers to OUD treatment were lack of providers and providers who were waived but were not prescribing.
- In August 2017, when HCIC received notification that it was receiving funds as part of the State Targeted Response (STR) to the Opioid Epidemic grant, we decided to use some of these funds to implement an ECHO Hub.

Our Goals

As funding to implement our project was obtained from the STR grant, our primary goal was aligned with that of the grant:

Increase access to Medication Assisted Treatment

In order to increase access to MAT, we planned to:

- Provide education to reduce the stigma associated with OUD and MAT, and
- Support rural health providers working with OUD population through case-based learning.

Planning Phase

September – October 2017

- Started attending other OUD ECHOs
- Recruited hub members
- Completed project planning for ECHO Institute

November 2017

- Four hub members attended ECHO Immersion training at ECHO Institute in Albuquerque
- Assigned responsibilities to each hub member role

December 2017

- Established launch date

January – February 2017

- Started mock ECHOs
- Created all forms
- Pre-launch survey
- Marketing
- Managed waitlist



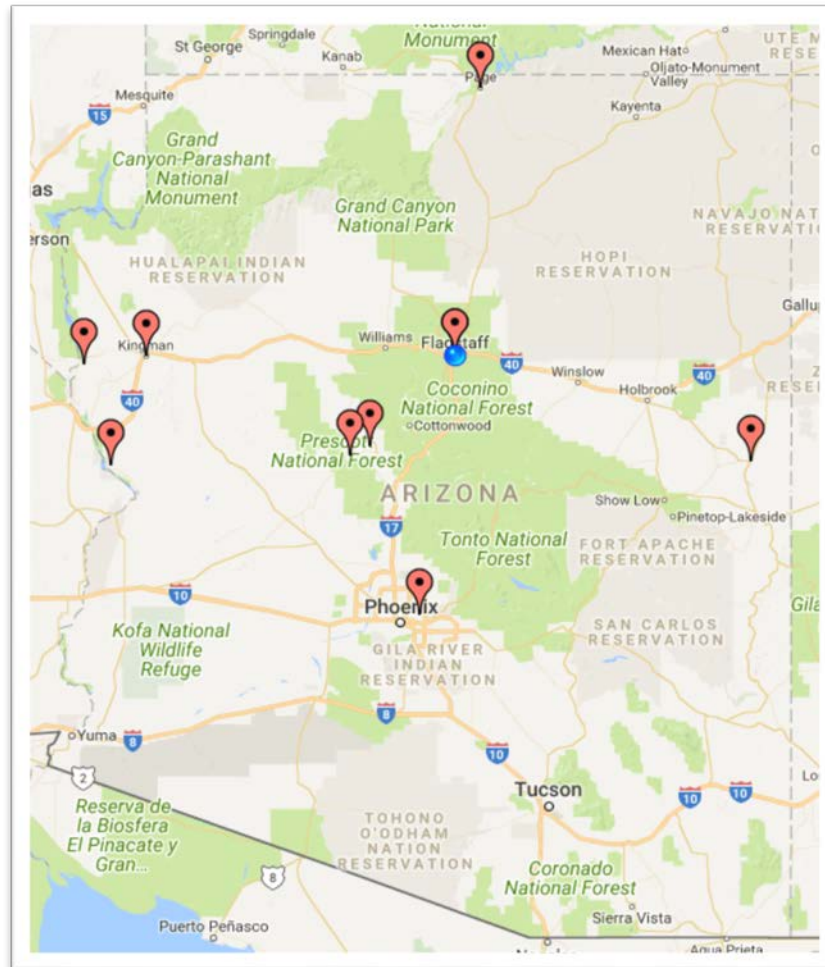
Mountain ECHO Launch

Mountain ECHO launched on March 5th, 2018!

- 3.5 months after the initial Hub team attended Immersion at the ECHO Institute. Typically, an ECHO hub takes 6-12 months from Immersion to launch.
- 39 participants on launch day
- Participants from Primary Care, Drug Courts, Behavioral Health, Pain Management, including Providers, Peer Supports, Administration, Case Managers, Therapists, and more!



Launch Day Reach



What is an ECHO Session Like?


1200	Welcome & Introductions
1210	Reminders about PHI, ECHO etiquette
1212	Brief Lecture
1230	Questions about the lecture
1235	Patient Case Presentation
1240	Hub facilitator summarizes presentation
1243	Clarifying questions about the case
1250	Recommendations/interventions from participants
1257	Hub facilitator summarizes recommendations
1259	Reminders about survey and certificates of participation
1300	Session concludes; hub team remains on Zoom
1300	Debrief; Hub team reviews and comments on the flow and facilitation of the session

Brief Lecture Topics

Session Date	Lecture Topic	Presenter
03/05/2018	<i>Understanding AZ's Opioid Guidelines</i>	Rose Planteen/HCIC
03/19/2018	<i>Screening, Brief Intervention & Referral to Treatment (SBIRT)</i>	John Gould/HCIC
04/02/2018	<i>Medication Assisted Treatment Overview</i>	Sunshine Coffman/HCIC
04/16/2018	<i>Buprenorphine Part 1</i>	Dr. Sara Gibson/LCBHC
05/07/2018	<i>Buprenorphine Part 2</i>	Dr. Sara Gibson/LCBHC
05/19/2018	<i>Trauma and Opioid Use Disorder</i>	Turiya Coll/SPW
06/04/2018	<i>Motivational Interviewing</i>	Lauren Lauder/SBHS
06/18/2018	<i>Peer Support and Opioid Use Disorder</i>	Veronica Welch/HCIC
07/02/2018	<i>Methadone Programs and Outcomes</i>	Michael White/CMS
07/16/2018	<i>Naltrexone</i>	Dr. Sara Gibson/LCBHC
08/06/2018	<i>Methadone</i>	Dr. Aaron Goldman/SBHS
08/20/2018	<i>Medication First</i>	Sunshine Coffman/FSS

Case Presentation

- Demographics
- Medical and Behavioral Health Diagnosis
- Current Medications
- Substance Abuse History
- Stage of Change
- Treatment History
- Recovery Environment
- Current Services
- Barriers to Treatment
- Presenting Question



Mountain ECHO
Medication Assisted Treatment for Opioid Use Disorder
Case Presentation Form

PRESENTER INFORMATION:
Presenter Name & Title Email
Agency Name & City

CLIENT INFORMATION:
Client AHCCCS ID (if applicable)* Age
Race/Ethnicity Gender Identity
Biomedical Diagnoses
Behavioral Diagnoses
Current Medications
Substance Use History (substances used, age at first use, most recent pattern of use, etc.)

Stage of Change
Past Drug Treatment History (periods of sobriety, community support group participation, etc.)

Recovery Environment (living situation, employment status, legal history, education, social supports, etc.)

Current Services/Treatment

Barriers to Treatment


What is your main question about this patient/client?

*Case presentation data may be tracked for future research, including analysis of outcomes data.

PLEASE NOTE: Project ECHO® case consultations do not create or otherwise establish a provider-patient relationship between any participating clinician and any patient whose case is presented in a Project ECHO® setting.

Written Recommendations

- Presenting Question
- Additional Identified Concerns
- Pharmacological Recommendations
- Clinical Recommendations

	ECHO ID _____ Date _____ Presenter _____
	Mountain ECHO Case Presentation Follow-up Recommendations
Presenting Question: _____	
Additional Identified Concerns: _____	
Pharmacological Recommendations: _____	
Non-Pharmacological Recommendations: _____	
We recommend that you present a follow up to this case in: _____	
<small>PLEASE NOTE: Project ECHO® case consultations do not create or otherwise establish a provider-patient relationship between any participating clinician and any patient whose case is presented in a Project ECHO® setting.</small>	

Evaluation



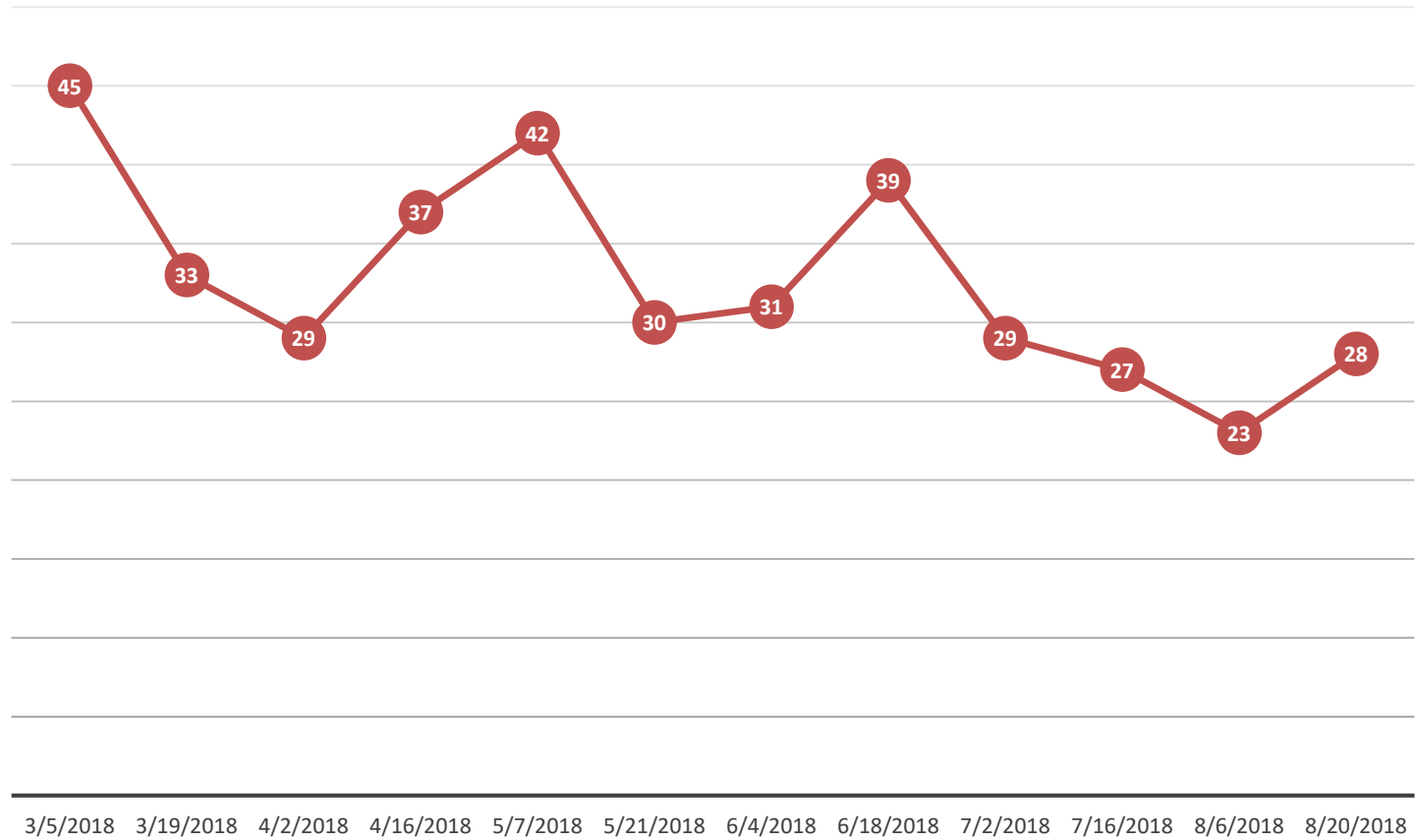
Think about level

Moore's levels of outcomes for medical education

<u>Level</u>	<u>Outcome</u>	<u>Definition</u>
1	Participation	Attendance
2	Satisfaction	Satisfaction
3A	Learning: declarative	Knows (what)
3B	Learning: procedural	Knows how
4	Competence	Shows how
5	Performance	Change in practice
6	Patient health	Change in patient health
7	Community Health	Change in population health

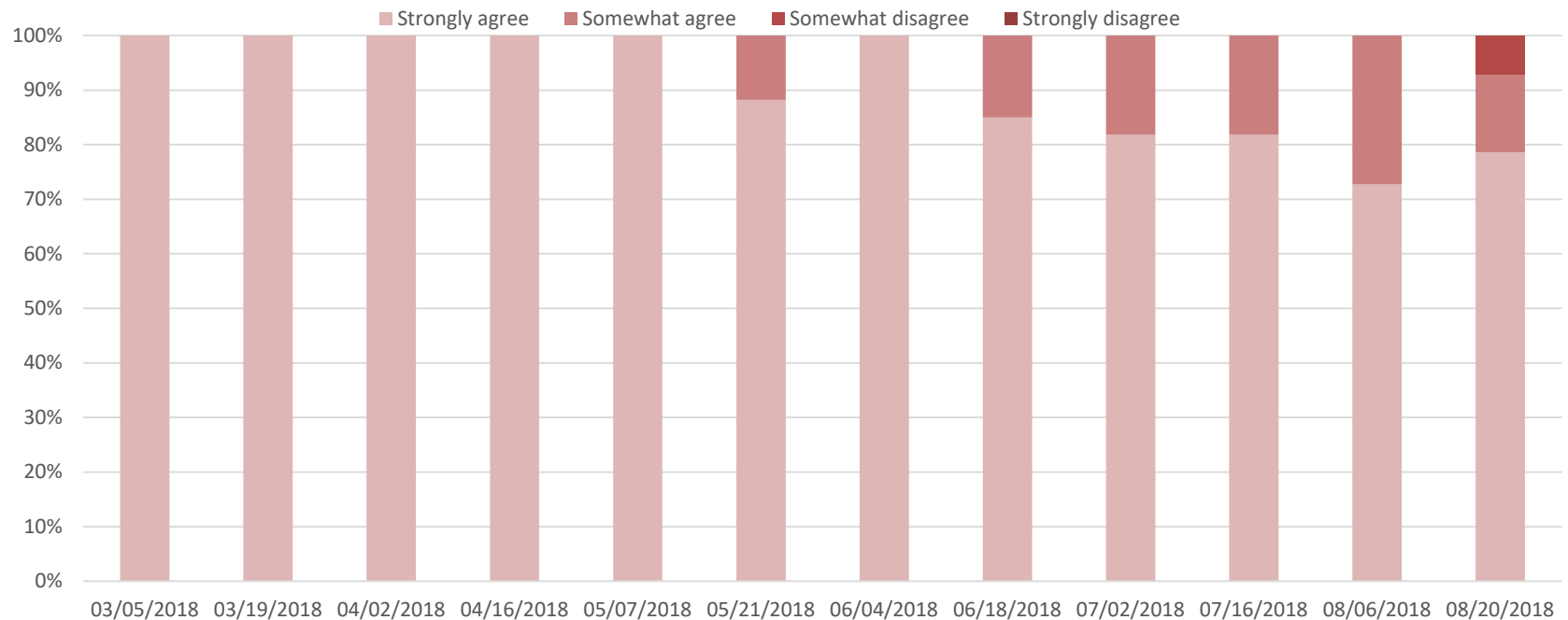
Cost effectiveness ROI

Session Attendance



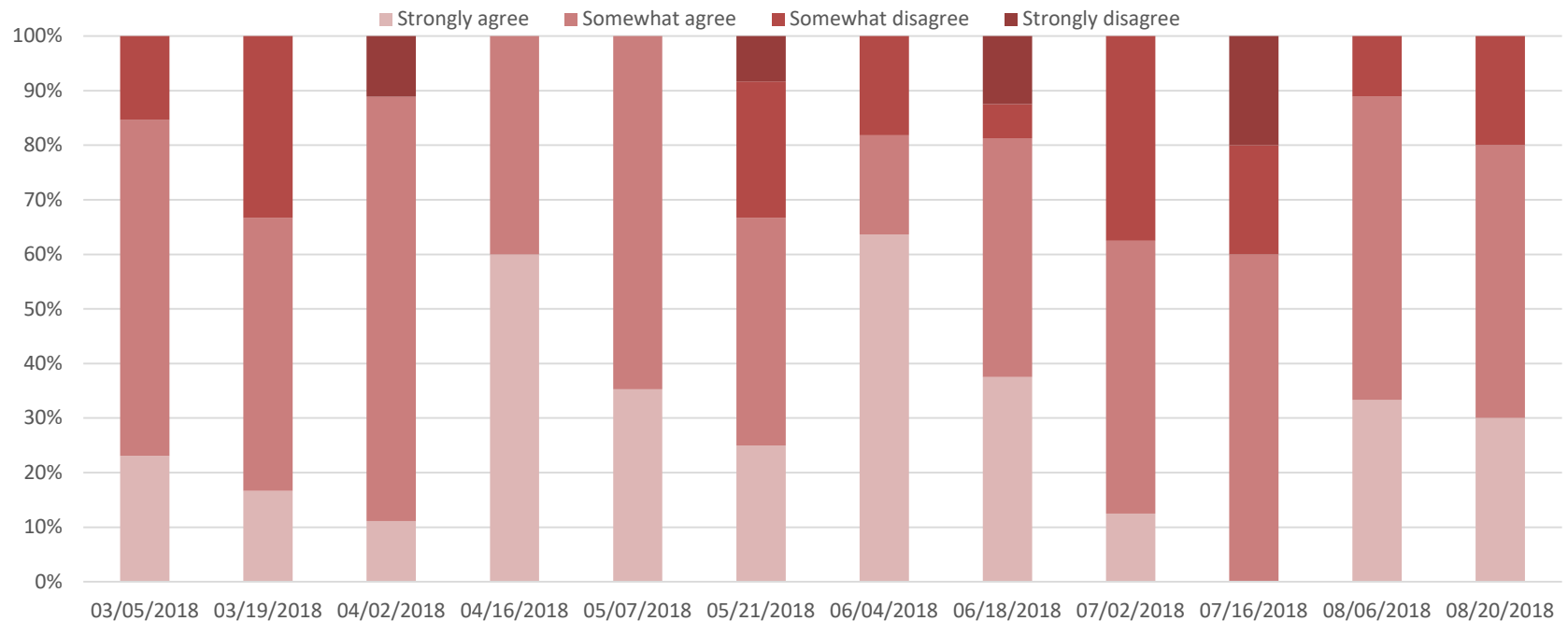
Survey Results

Likely to Attend Again (Q5)



Survey Results

Likely to Change My Practices (Q8)



Future Plans – ECHO 2.0

- Mountain ECHO 1.0 ended on August 20th, 2018, after a 12-session run.
- ECHO 2.0 began on November 5, 2018. It, too, will run for 12-sessions.
- Some curricula will be repeated.
- Case presentations may include updates on those who were presented in ECHO 1.0
- In order to elicit more participation, a new priority ranking will be established for participants.

ECHO 2.0 Priority Ranking:

- 1 – CONTINUING & Presented during 1.0
- 2 – CONTINUING & Willing to present during 2.0
- 3 – NEW & Direct care staff from health homes
- 4 – NEW & Health home other staff
- 5 – NEW & Community members w/in SHCA area
- 6 – All others, including SHCA employees NEW & CONTINUING/Unwilling to present

- ECHO 3.0?!

Meet the Mountain ECHO Hub Team



Sunshine Coffman
Former Program Manager



Rose Planteen/SHCA
Current Program Manager



Jennifer Pierce/SHCA
Information Technology/Clinic Coordinator



Ryan Kivela/SHCA
Research Consultant



Dr. Sara Gibson/LCBHC
Medical Consultant



Lauren Lauder/TGC
Subject Matter Expert



“It has been a pleasure participating in Mountain ECHO. I am involved in three other Project ECHOs and am even in the process of becoming an ECHO educator in the areas of criminal justice and integration. I am pleased to say that Mountain ECHO is by far the best run ECHO I have seen. I have already noticed a shift for the participants. That is something we continue to struggle with in other ECHOs, and I was losing faith in the ECHO idea.

I would say the last two case studies hit on very important preconceived ideas and old standards of thought when supporting this population. I am seeing little things as a future instructor and participant that I can do differently to encourage and promote self-realization around some of these issues and not force feeding it, which I think your team has down to a science.”

Mountain ECHO Participant

April 5, 2018

Thank you!

For additional information about ***Mountain ECHO***, contact:

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<https://www.stewardhealthchoiceaz.com/providers/project-echo/>