PROJECT ECHO N.IRELAND
Extension of Community Healthcare Outcomes

Utilising technology to deliver specialist training and support to practitioners

Establishing communities of practice to shape the transformation of services

Increasing the knowledge and confidence of practitioners to manage patients in primary care

Improving the care delivered to patients
Supporting the localisation of care
Reducing demand on secondary care
Dermatology Project ECHO network

**Background:** One in four GP consultations are for dermatological conditions yet many GPs feel they enter general practice with limited dermatological knowledge; this mismatch between demand and capacity increases workload in primary care and waiting times in secondary care.

**Aim:** to enhance the quality of dermatological care and increase capacity in the primary care sector, thus reducing demand for secondary care referral.

- 9 ECHO sessions
- On average, 13 GPs participated
- 15 patient case presentations

**What benefits were reported by GPs?**

- 85% had increased clinical knowledge of dermatological conditions and treatments
- 85% had increased confidence in the clinical management of dermatological conditions
- 78% apply lessons learned from this network to patients in their care
- 78% agreed ECHO has enhanced their professional satisfaction
- 54% more likely to seek timely specialist advice from a dermatology specialist to assist them in managing individual patients
- 78% agreed that access to specialist expertise in dermatology benefited their clinical knowledge and practice
- 46% agreed that participation has helped reduce referrals to secondary dermatology care
- 100% would recommend ECHO to other professionals in their area

**Impacts on practice**

"Increased confidence in the diagnosis & treatment of skin conditions"

"Safer prescribing, better recognition"

"Confidence in my management plan with my patients"

"Improvement in dermatology management of patients"
Gastroenterology Project ECHO network

Background: Gastroenterology is one of the clinical areas under immense pressure in Northern Ireland. The waiting list far outstrips the ability of secondary care to meet the need for out-patient appointments and investigations.

Aim: To improve primary care knowledge and confidence in managing these conditions, and share information on new pathways for the management of gastroenterology patients

9 ECHO sessions On average, 12 GPs participated 15 patient case presentations

What benefits were reported by GPs?

- 100% had increased clinical knowledge of gastroenterological conditions
- 100% apply knowledge gained from this network to patients their everyday clinical practice
- 67% more likely to seek timely specialist advice from a gastroenterologist specialist to assist them in managing individual patients
- 100% agreed that learning through Project ECHO is an effective way to enhance their clinical knowledge and skills
- 100% had increased confidence in the clinical management of gastroenterological conditions
- 89% had improved understanding of the local referral processes for gastroenterology and the services available
- 100% would like to participate in future gastroenterology ECHO networks
- 100% would recommend ECHO to other professionals in their area

Impacts on practice

"awareness of the available tests and investigations to be done in practice and the appropriate referral pathways"

"I presented a case on IBD and I was able to apply advice from the consultant the following week when my patient presented with worrying symptoms"

"use of the ibd flare card & signposting patients to ibd nurses. - in ibs, use of the bda food facts sheet as first line advice"
Gynaecology Project ECHO network

Background: Elective care reform introduced for gynaecology services in Northern Ireland to reduce long waiting lists and improve patient access to services

Aim: build capacity of GPs to manage more patients with common gynaecological conditions in the community and provide higher quality of care through education and improved access to specialist gynaecology advice

9 ECHO sessions  On average, 19 GPs participated  19 patient case presentations

What benefits were reported by GPs?

- 89% had increased understanding of common gynaecological conditions
- 94% had increased confidence to treat common gynaecological conditions
- 100% apply lessons learned from this network to clinical practice
- 50% agreed ECHO has enabled them to reduce referrals to secondary gynaecological care
- 95% agreed ECHO enabled them to access education which they would have been unable to access due to timing or need to travel
- 39% felt their secondary colleagues were more approachable as result of participating in this network

What was most useful?

"Being able to access expert advice from consultants and also knowledge from peers simultaneously"

"Gaining knowledge without having to attend a specific course site"

"Specialist teaching with opportunities to discuss cases"
Musculoskeletal (MSK) Project ECHO network

**Background:** One in seven GP consultations are reported to be for MSK conditions, with a significant number referred to secondary care. This mismatch between demand and capacity is increasing workload in the primary care and waiting times in secondary care.

**Aim:** Enhance the quality of MSK care and increase capacity in the primary care sector thus reducing demand for secondary care referral.

9 ECHO sessions  
On average, 11 GPs participated  
16 patient case presentations

**What benefits were reported by GPs?**

- 90% had increased clinical knowledge of common MSK conditions
- Increased confidence in performing MSK examinations in all areas assessed (pre- and post- ECHO)
- Increased confidence in injecting common joint areas e.g. knee and shoulder (pre- and post- ECHO)
- Increased confidence in using the Northern Spinal Pathway (pre- and post- ECHO)
- 90% reported improved understanding between primary, secondary care and allied health professionals taking part
- Increased confidence in diagnosing fibromyalgia, chronic musculoskeletal (pre- and post- ECHO)
- Increased confidence in treating patients with MSK complaints, osteoporosis, rheumatological complaints, and concussion (pre- and post- ECHO)

**Impacts on practice**

"Increased confidence talking to patients about the benefits of lifestyle changes to improve their condition"

"Improved confidence in managing MSK conditions in primary care; better aware of local pathways to treat common MSK conditions"

"New knowledge/improved confidence. Seeing what others do in practice Improving my referrals to secondary care"
Neurology Project ECHO network

Background: Neurology service model largely focused on outpatient delivery; 13,522 people on waiting list for first outpatient appointment (March 2017) with 5055 waiting more than one year

Aim: to build the capacity of GPs to manage more patients within the community and provide higher quality of care through education and improved access to specialist neurological advice

9 ECHO sessions
On average, 19 GPs participated
14 patient case presentations

What benefits were reported by GPs?

- 100% agreed their clinical skills in neurology had increased
- 100% apply lessons learned from this network to patients in their care
- 82% agreed that case-based learning was an impactful way of learning
- 100% agreed ECHO enhanced their professional satisfaction
- 100% agreed their confidence to manage neurological conditions increased
- 73% felt connected to and respected by the specialists who were part of the network
- 91% agreed didactic sessions were an effective way to develop knowledge and clinical skills

Impacts on practice

"I am more confident in making sure I have checked for important symptoms or signs to rule out red flag presentations"

"I know my management of neurological conditions has improved"

"I am now more confident in requesting advice from consultants or managing patients myself rather than referring early"
Community Pharmacy & Impact Agewell
Project ECHO network

Background: Education for the community pharmacy network was needed to deliver quality improvements in Medicines Optimisation.

Aim: To support the isolated community pharmacy network who have no protected time for training, find it difficult to access web based and peer supported training that is relevant to their area of practice, and which could help them deliver quality improvements in their commissioned services.

8 ECHO sessions
10 participants on average
11 patient case presentations

Evaluation findings

93% found participation in this ECHO network was enjoyable
79% included learning from the ECHO sessions in their CPD
93% would recommend this ECHO network to other community pharmacists
36% experienced barriers to participation to include timing of sessions, and work commitments

What was most useful?

"Access to expert opinion in context of real-life case examples"
"The agenda was specific to our needs as we had designed it ourselves."
"Convenience and being able to participate from office desk"
"To see at first hand how the technology can be used to support networking & learning across a geographical area"
"Isolated community pharmacists can use ECHO to communicate and engage in CPD"
Paediatric Palliative Care Project ECHO network

Background: Children’s palliative care is not a discrete speciality, but delivered by a multi-professional team of health and social care practitioners within primary, secondary and tertiary care, and with involvement from statutory and voluntary organisations. Co-ordination of care across such interfaces is often problematic.

Aim: to develop the knowledge, skills and understanding of children’s palliative care within a diverse workforce.

9 ECHO sessions 33 participants on average 9 patient case presentations

What benefits were reported?

78% agreed that participation helped to develop their clinical knowledge in paediatric palliative care

67% had improved confidence in relation to managing the complex symptoms of children requiring palliative care

67% agreed that participation enhanced their professional satisfaction.

94% agreed that case-based learning as the focus for discussion was an impactful way of learning

83% agreed that participation helped to develop their clinical skills in paediatric palliative care

78% agreed they would use the knowledge gained from participation in the network in the next three months.

67% agreed that session format enables them to translate knowledge from practice more than other teaching sessions that had been involved in

100% would recommend ECHO to others

Impacts on practice

“Increased clinical knowledge and professional networking”

“It is a service to hear and learn from life experience from other health professional. The fact you may find yourself in the same situation as some of the topics that had been discussed may help you with your decision making and choices of treatments”

“Sharing of experiences is a beneficial way to develop knowledge and confidence in Children’s Palliative Care”
Palliative Care Pharmacy Project ECHO Network

Background: Community pharmacists have a vital role in the safe use and supply of palliative care medicines and are the most accessible healthcare providers in the community. The Macmillan Palliative Care Pharmacy Service Improvement Project was a 2-year initiative designed to develop palliative care pharmacy services across Northern Ireland.

Aim: to develop the knowledge, skills and self-efficacy of the community pharmacy palliative care network.

- 9 ECHO sessions
- On average, 8 community pharmacists participated
- 13 patient case presentations

What benefits were reported?

- 92% agreed that participation helped develop their clinical knowledge in palliative care
- 92% reported improved confidence in dealing with end of life care scenarios
- 100% agreed they were likely to use the new information that they had learned in the next 3 months
- 100% agreed that participation has helped improve the service they provide to palliative care patients and their carers
- 67% agreed the session format enables them to translate knowledge from practice more than other teaching sessions they have been involved in
- 100% agreed that learning through Project ECHO is an effective way to enhance their clinical knowledge and skills
- 100% found participation enjoyable
- 83% agreed that Project ECHO has given them access to education that would have been hard to access due to geography

100% would recommend to other community pharmacists

Impacts on practice

- “Better communication with palliative care patients and their families”
- “I have set up a palliative file with easily accessible information that I’ve been able to access when dealing with other health care professionals”
- “A more informed and confident approach to palliative patients in terms of offering advice and when dealing with problems they present with”
Palliative Care: Community District Nurses

Background: Community district nursing teams within South Eastern Health and Social Care Trust have a pivotal role in the care of people with palliative and end of life needs within their own homes. District nurses are the key worker for palliative patients, and facilitate and co-ordinate their care, and work in partnership with the wider community multidisciplinary team.

Aim: to enable district nurses to build on their expertise to safely manage patients with complex conditions.

What benefits were reported?

- 100% agreed that participation helped develop their clinical knowledge in palliative care
- 100% agreed they were likely to use the new information that they had learned in the next 3 months
- 67% agreed the session format enables them to translate knowledge from practice more than other teaching sessions they have been involved in
- 100% found participation enjoyable
- 100% would recommend to other district nurses
- 100% reported improved confidence in dealing with end of life care scenarios
- 100% agreed that participation has helped improve the service they provide to palliative care patients and their carers
- 100% agreed that learning through Project ECHO is an effective way to enhance their clinical knowledge and skills
- 75% agreed that Project ECHO has given them access to education that would have been hard to access due to geography

Impacts on practice

"Being able to discuss case studies has gave me new ideas on how to manage patient's care and different approaches to take"

"ECHO has given me confidence through discussions with my peers in the community. I have enjoyed the variety of learning that is not available on study days."

"It keeps us up to date with current practice and is a great support for staff"
Cardiology Project ECHO network

**Background:** Heart Failure (HF) teams are under-resourced, and access is limited and inequitable. Only a minority of inpatients hospitalised because of HF are reviewed by a Cardiologist. Patients with HF also have limited access to Specialist Palliative Care (SPC).

**Aim:** increase GP's capacity to manage patients in the community, build expertise in HF management within SPC, and improve the skills of HF specialists in assessing palliative care needs and communication.

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9 ECHO sessions  
13 participants on average  
16 patient case presentations

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**What benefits were reported?**

- 100% had improved understanding of the role of cardiac devices in the management of HF
- 82% had improved understanding of how to diagnose HF
- 91% had an increased ability to manage symptoms experienced by patients with advanced HF
- 82% more confident in managing patients with advanced HF
- 81% more likely to seek timely specialist advice from a cardiologist to help them to manage a patient
- 73% more likely to seek advice from a palliative care specialist
- 91% had improved knowledge of the implications and management of atrial fibrillation in the context of HF
- 91% had improved knowledge regarding the escalation of pharmacological treatments for patients with progressive HF
- 100% have applied knowledge gained to their everyday clinical practice
- 91% increased confidence in the ability to rationalise medications for patients with advanced HF
- 91% felt more confident having conversations with patients, at or near ceilings of care, regarding this and their preferences for care