



PROJECT ECHO N.IRELAND

Extension of **C**ommunity **H**ealthcare **O**utcomes



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



Scan here





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% had increased confidence in the clinical management of gastroenterological conditions



100% apply knowledge gained from this network to patients their everyday clinical practice



89% had improved understanding of the local referral processes for gastroenterology and the services available



67% more likely to seek timely specialist advice from a gastroenterologist specialist to assist them in managing individual patients



100% would like to participate in future gastroenterology ECHO networks



100% agreed that learning through Project ECHO is an effective way to enhance their clinical knowledge and skills



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 gynecological 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



90% reported improved understanding between primary, secondary care and allied health professionals taking part



Increased confidence in performing MSK examinations in all areas assessed (pre- and post- ECHO)



Increased confidence in diagnosing fibromyalgia, chronic musculoskeletal (pre- and post- ECHO)



Increased confidence in injecting common joint areas e.g. knee and shoulder (pre- and post- ECHO)



Increased confidence in treating patients with MSK complaints, osteoporosis, rheumatological complaints, and concussion (pre- and post- ECHO)



Increased confidence in using the Northern Spinal Pathway (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% agreed their confidence to manage neurological conditions increased



100% apply lessons learned from this network to patients in their care



73% felt connected to and respected by the specialists who were part of the network



82% agreed that case-based learning was an impactful way of learning



91% agreed didactic sessions were an effective way to develop knowledge and clinical skills



100% agreed ECHO enhanced their professional satisfaction



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



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



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



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



67% agreed that participation enhanced their professional satisfaction.



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



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



100% would recommend ECHO to others



Impacts on practice



"Increased clinical knowledge and professional networking"

"Inter-agency working"

"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.



8 ECHO sessions



On average, 13 district nurses participated



10 patient case presentations

What benefits were reported?



100% agreed that participation helped develop their clinical knowledge in palliative care



100% 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



75% 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 district nurses



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.



9 ECHO
sessions



13 participants
on average



16 patient case
presentations

What benefits were reported?



100% had improved understanding of the role of cardiac devices in the management of HF



91% had improved knowledge of the implications and management of atrial fibrillation in the context of HF



82% had improved understanding of how to diagnose HF



91% had improved knowledge regarding the escalation of pharmacological treatments for patients with progressive HF



91% had an increased ability to manage symptoms experienced by patients with advanced HF



100% have applied knowledge gained to their everyday clinical practice



82% more confident in managing patients with advanced HF



91% increased confidence in the ability to rationalise medications for patients with advanced HF



81% more likely to seek timely specialist advice from a cardiologist to help them to manage a patient



91% felt more confident having conversations with patients, at or near ceilings of care, regarding this and their preferences for care



73% more likely to seek advice from a palliative care specialist