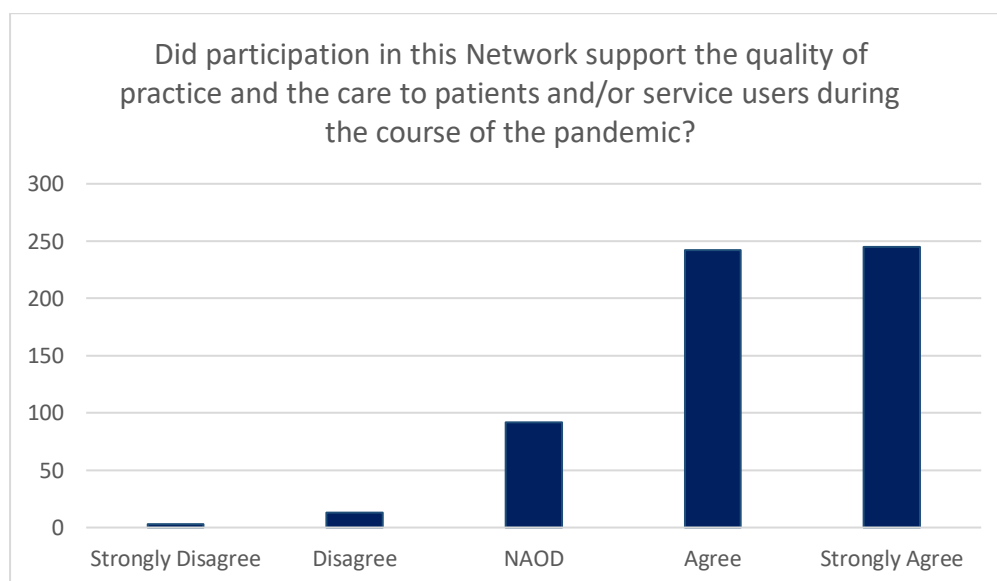


## Project ECHO and COVID-19: Preliminary Analysis

Project ECHO expanded significantly to meet demand during the COVID-19 pandemic. Approximately 15,000 participants took part in ECHO sessions between March 2020-March 2021 (against an anticipated number of 7,200) with a total of 350 ECHO sessions delivered (against 240 planned). The preliminary analysis of the impact of ECHO during COVID-19, involving survey responses from 595 ECHO participants across 21 networks<sup>1</sup>, focus group data from 21 networks and 21 in-depth surveys with network leads, indicates the significant benefit of ECHO for supporting healthcare providers during the pandemic. ECHO allowed connections and communities of practice to be developed and maintained when social distancing and remote working may have increased feelings of professional isolation. Participants stated that ECHO “was a brilliant experience to be able to feel supported” and that it was “a good way to keep up with other services and trusts”.

Networks that existed prior to COVID described how ECHO had prepared them for online working. Existing networks were already used to online and virtual spaces and were able to quickly adapt to use these to support their response to COVID-19. Participants stated that “ECHO was ahead of the pandemic, and in many ways it was great to know that I could already use the technology and feel confident” and that they “felt it was a real advantage to have involvement in ECHO pre-COVID so we could continue uninterrupted with our network despite the pandemic”.

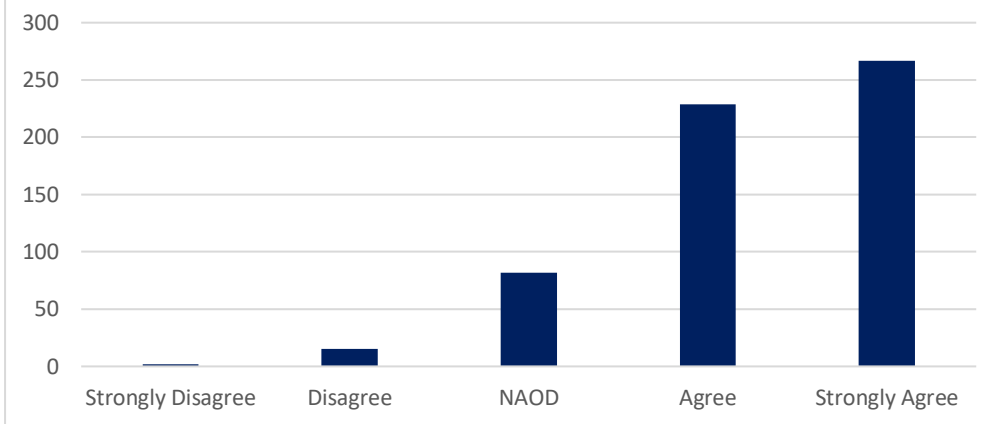
*\*\* Some questions have been skipped by participants, therefore, the total will not always reflect 595 participants who responded to the survey. \*\**



Strongly Disagree	Disagree	NAOD	Agree	Strongly Agree
3 (0.5%)	13 (2.2%)	92 (15.5%)	242 (40.7%)	245 (41.2%)

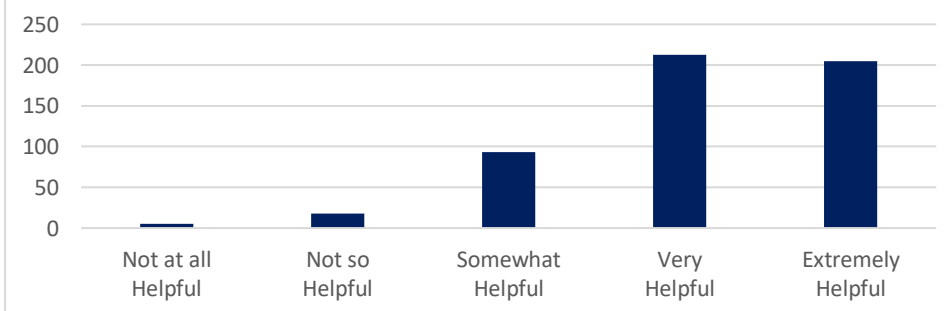
<sup>1</sup> SA = Strongly Agreement/Yes; A = Agree/Yes; NAOD = Neither Agree/Disagree; D = Disagree/No; SD – Strong Disagreement/No

Did participating in ECHO help improve your confidence in keeping up-to-date with the evolving guidelines, processes and changes to practice during the Pandemic?



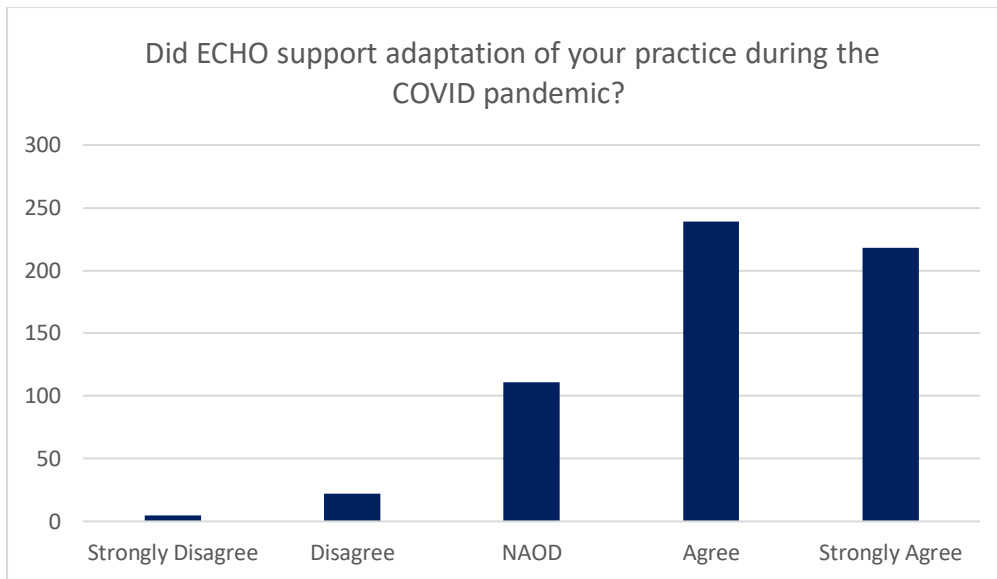
Strongly Disagree	Disagree	NAOD	Agree	Strongly Agree
2 (0.33%)	15 (2.5%)	82 (13.8%)	229 (38.5%)	267 (44.9%)

How would you compare ECHO to other online and virtual approaches to learning that you may have encountered during the course of the pandemic (e.g. webinars)



Not at all Helpful	Not so Helpful	Somewhat Helpful	Very Helpful	Extremely Helpful
1 (0.2%)	7 (1.2%)	81 (14%)	266 (45%)	217 (37%)

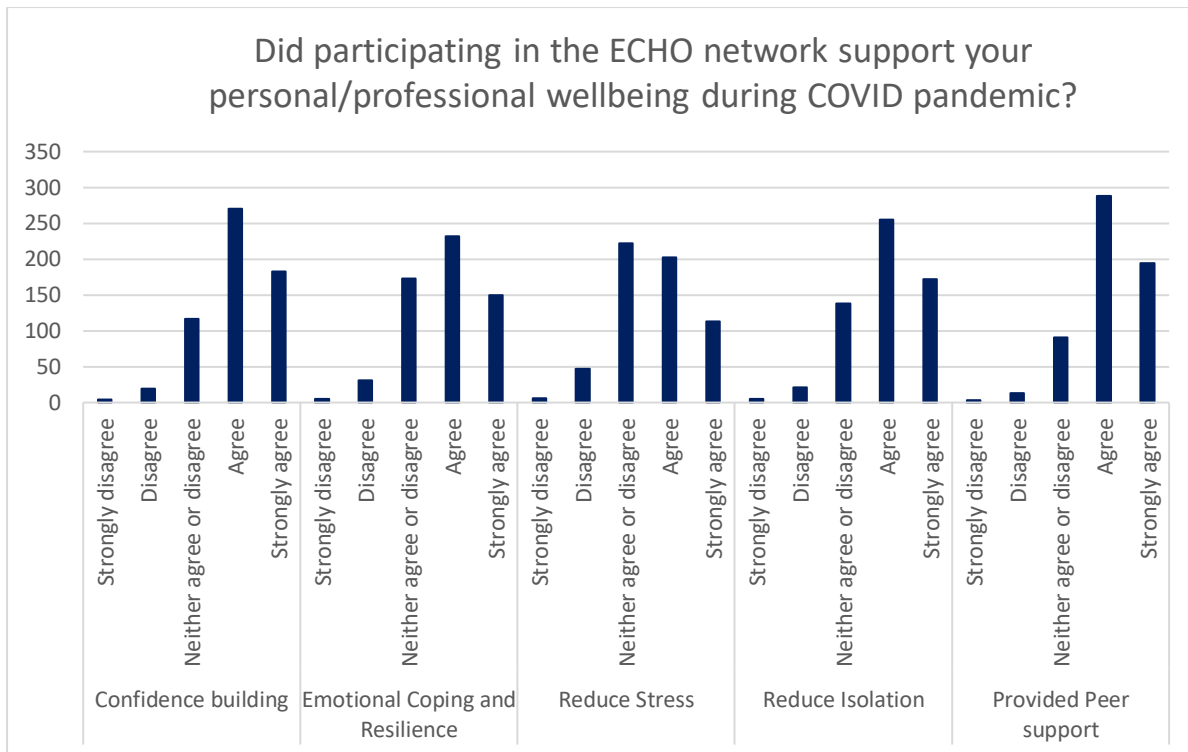
<sup>1</sup> SA = Strongly Agreement/Yes; A = Agree/Yes; NAOD = Neither Agree/Disagree; D = Disagree/No; SD – Strong Disagreement/No



Strongly Disagree	Disagree	NAOD	Agree	Strongly Agree
5 (0.8%)	22 (3.7%)	111 (18.7%)	239 (40.2%)	218 (36.7%)

There was variation across our sample within this preliminary analysis, suggesting the networks more directly affected by COVID benefited from it to a greater extent. The South Eastern Care Homes Network, for example, reported very strong results suggesting the benefit of ECHO, with 92% strongly agreeing/agreeing that ECHO supported quality of practice during COVID; 92% strongly agreeing/agreeing that ECHO supported confidence in keeping up-to-date with changing guidelines; 83% stating that it supported adaptation; and 100% stating that ECHO was more effective compared to other online training platforms.

<sup>1</sup> SA = Strongly Agreement/Yes; A = Agree/Yes; NAOD = Neither Agree/Disagree; D = Disagree/No; SD – Strong Disagreement/No



<b>Confidence building</b> (**593 responses)				
Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree
4 (0.7%)	19 (3.2%)	117 (19.7%)	270 (45.5%)	183 (31%)

<b>Emotional Coping and Resilience</b> (**591 responses)				
Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree
5 (0.8%)	31 (5.2%)	173 (29.2%)	232 (39.1%)	150 (25.3%)

<b>Reduce Stress</b> (**590 responses)				
Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree
6 (1%)	47 (8%)	222 (38%)	202 (34.2%)	113 (19.2%)

<b>Reduce Isolation</b> (**591 responses)				
Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree
5 (0.8%)	21 (3.6%)	138 (23.4%)	255 (49%)	172 (33%)

<b>Provided Peer support</b> (**589 responses)				
Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree
3 (0.5%)	13 (2.2%)	91 (15%)	288 (49%)	194 (33%)

<sup>1</sup> SA = Strongly Agreement/Yes; A = Agree/Yes; NAOD = Neither Agree/Disagree; D = Disagree/No; SD – Strong Disagreement/No

The challenges experienced by Health Care Providers during the Pandemic have been widely reported. This preliminary COVID evaluation has specified that ECHO had a strong influence in supporting staff during the pandemic, and provided Health Care Providers with an element of peer support especially in areas where staff have been working in isolation.

Recognising that many staff are ‘Working from Home’ or implementing ‘Remote Practice’ which will continue to evolve and develop for some time to come, this report highlights evidence that ECHO is supporting Practitioners, Health Care Providers & staff to build communities of best practice & shared learning during an unprecedented time when physically distanced from each other.

***“I felt isolated only knowing what was going on in my organisation.  
Echo has helped me connect with other managers and find out about their services/  
organisation / any relevant initiatives. “***  
**(NISCC ECHO Network participant – survey feedback 2021)**

Results were not as strong regarding the impact of ECHO in reducing stress or supporting emotional coping and resilience in its participants, possibly demonstrating the restrictions of ECHO in addressing the considerable stress that has occurred as a result of working during a Pandemic.

Additional investigation on the impact of ECHO supporting Health Care Providers during COVID-19 would be informative and beneficial. COVID-19 has highlighted the significance of having a flexible support system for Health Care Staff, and the importance of investing in a key supportive structure in advance of a crisis, rather in response to it.

Understanding variables between Networks and examining areas of development would also be of benefit, further necessitating a full review of the impact of ECHO during COVID-19.

Leanne McAuley  
Research Co-ordinator  
March 2022

Dr Chris Jenkins  
Evaluation Fellow

<sup>1</sup> SA = Strongly Agreement/Yes; A = Agree/Yes; NAOD = Neither Agree/Disagree; D = Disagree/No; SD – Strong Disagreement/No