



THE TRANSFORMATIVE MODEL IN MEDICAL EDUCATION AND CARE DELIVERY

Project ECHO® (Extension for Community Healthcare Outcomes) helps democratize medical knowledge and develops specialty care capacity in underserved communities.

Using a revolutionary model of telementoring, collaborative medical education and care management, Project ECHO empowers front-line primary care professionals to provide the right care, in the right place, at the right time.



HIGH IMPACT OUTCOMES



“One to Many” – Leveraging a proven model to significantly increase access to specialty care for common complex conditions

Hubs & Spokes - ECHO provides front-line providers with the knowledge and support they need to care for complicated patients they would otherwise refer out. ECHO links expert specialist teams at an academic ‘hub’ with primary care providers in local communities – the ‘spokes’ of the model.

Together, they participate in weekly teleECHO™ clinics, which are like virtual grand rounds, combining patient case presentations with didactic learning and mentoring.

WHY ECHO?

THE UNDERSERVED PATIENTS



PROBLEM:

Underserved patients have limited access to quality specialist care for common complex conditions.

SOLUTION:

A model that expands access to care by leveraging telementoring and guided practice to build system capacity by empowering primary care providers to care for complex conditions at their local clinic.

WHY ECHO? THE PROVIDER



PROBLEM:

- Want to advance their skills, career and professional relationships.
- Lack access to knowledge and training to provide specialty care for their patients.
- Providers often feel socially and professionally isolated.

SOLUTION:

- Providers engage in a community with like-minded fellow providers and specialists from academic centers.
- Develop specialized knowledge.
- Provide specialty care for common complex conditions.
- Receive free CME/CE credits.

Providers participating in ECHO in New Mexico: felt their professional isolation diminish, professional satisfaction and self-efficacy for treating hepatitis C increase.¹

In New Mexico:

More than **76k** free CME/CE credits issued.

1. Arora S, Kalishman S, Thornton K, Dion D et al: Hepatology. 2010 Sept;52(3):1124-33

WHY ECHO? THE FQHCs



PROBLEM:

- Limited ability to provide specialty care for common complex conditions.
- Difficulties recruiting and retaining community providers.

SOLUTION:

Primary care providers acquire new skills and competencies, expanding access to care. They become part of a community of learners, increasing their professional satisfaction while their feelings of professional isolation decrease.

Through ECHO, FQHCs have a way to expand access to care for complex chronic conditions and serve more patients, while keeping treatment dollars in the community. They also acquire a new tool for recruiting and retaining providers.

A provider in an FQHC in California saw an increase of 38 new HCV patients in one year as a result of participating in ECHO.



HOW IT WORKS

ECHO connects providers with specialists through ongoing, interactive, telementoring sessions.

ECHO creates ongoing knowledge networks by linking primary care providers at numerous locations with a team of expert inter-disciplinary specialists, to mentor them to treat their patient cases. These specialist teams use low-cost, multi-point videoconferencing technology to conduct weekly teleECHO clinics with community providers. Specialists serve as mentors, training community providers to provide care in clinical areas that previously were outside their expertise.

INSPIRED FROM A GLOBAL PROBLEM



Launched in 2003, Project ECHO grew out of one doctor's vision. Sanjeev Arora, M.D., a social innovator and liver disease specialist at the University of New Mexico Health Sciences Center in Albuquerque, was frustrated that he could serve only a fraction of the HCV patients in his state who needed treatment. He wanted to serve as many patients with HCV as possible, so he created a free, virtual clinic and mentored community providers across New Mexico in how to treat the condition.

Today, dozens of teleECHO clinics addressing much more than HCV take place every week—and their reach extends far beyond New Mexico.

Project ECHO currently has over 80 hubs sites globally, operating in over 20 states and 13 countries for over 40 distinct common complex conditions.



FOR PROVIDERS

How to get started:

1. Connect with ECHO Institute™ or local ECHO hub.
2. Schedule a quick call with an ECHO representative.
3. Join a teleECHO clinic that suites your needs.

Once you connect, you will be able to:

- Gain experience in treating patients with common complex conditions
- Use the latest best practices
- Treat patients in the community, closer to home
- Share knowledge with others

Contact us at echoreplication@salud.unm.edu or [ECHO hub contact info]



FOR FQHCs

How to get started:

1. Connect with ECHO Institute™ or local ECHO hub.
2. Schedule a quick call with an ECHO representative.
3. Join a teleECHO clinic that suites your needs.
4. Clinic leadership will protect providers' time for participation.

Once you connect, FQHCs will have:

- Increased ability to offer specialty care for common complex conditions
- Better retention of providers
- Reduced feelings of isolation for provider staff
- Use of the latest best practices

Contact us at echoreplication@salud.unm.edu or [local hub contact info]

THE IMPACT

Replication of the ECHO model is achieved through the creation of ECHO 'hubs' or regional centers, in which partner sites or 'spokes' connect via low cost video conferencing through teleECHO clinics. With ongoing mentoring, these spokes gain specialty expertise and knowledge. Since its initial expansion, the ECHO model has been successfully replicated across the United States and around the globe.

76,000+

CME/CE CREDITS
PROVIDED FOR
FREE IN NEW
MEXICO

80+

HUB PARTNERS

40+

HUB PARTNERS
IN THE US

10+

HUB PARTNERS
GLOBALLY

40+

COMPLEX
CONDITIONS
COVERED



WANT TO BE PART OF ECHO?

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