

2017-2018

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GENERAL DISCLOSURES

The University of Washington School of Medicine also gratefully acknowledges receipt of educational grant support for this activity from the Washington State Legislature through the Safety-Net Hospital Assessment, working to expand access to psychiatric services throughout Washington State.



SPEAKER DISCLOSURES

✓ Any conflicts of interest? NO



OBJECTIVES

- 1. Describe the UW PACC model
- 2. Review current evidence base
- 3. Review feedback from past UW PACC sessions
- 4. Discuss updates/revision to UW PACC 2017-2018
- 5. Develop understanding of how to benefit



PROJECT ECHO

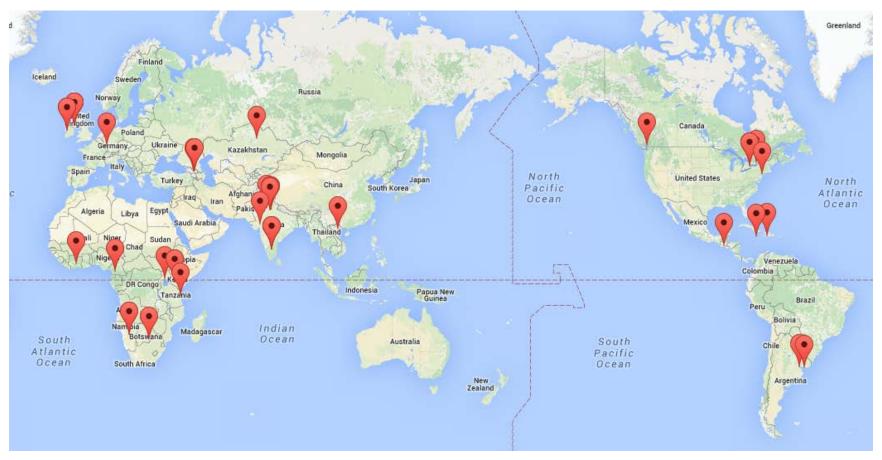
(EXTENSION FOR COMMUNITY HEALTHCARE OUTCOMES)

- 2003 developed to expand treatment of HCV
- Develop capacity for safe and effective treatment of chronic, common, and complex conditions
 - Link specialty care with primary care
- Now includes:
 - Pain, HIV, HCV, Bone Health, Rheumatology, Epilepsy, Endocrine, TB, Heart Failure, Autism, Geriatrics, HTN, Childhood Obesity, Palliative Care, Dementia, Pediatric ADHD, Hepatology, Nephrology, MS, Pulmonary



PROJECT ECHO: LOCATIONS

(EXTENSION FOR COMMUNITY HEALTHCARE OUTCOMES)



http://echo.unm.edu/locations/



DEVELOPING CAPACITY

- Train and support community providers
 - Collaborative practice model
 - Development of Network
 - Case-Based Learning loops
 - Hub→Community
 - Community Community
 - Community→Hub
 - Short didactics



Means: Increase knowledge and self-efficacy around best practices



DOES IT WORK?

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Outcomes of Treatment for Hepatitis C Virus Infection by Primary Care Providers

Arora et al, 2011

Univ of New Mexico vs ECHO + PCP treatment (21 sites)

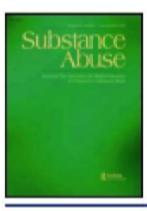
Outcomes: cure rates

• UNM: 84 of 146 (57%)

• **PCP + ECHO**: 152 of 246 **(58%)**

**Those at PCP sites had lower rates of serious event: 6.9% vs 13.7%





Substance Abuse



ISSN: 0889-7077 (Print) 1547-0164 (Online) Journal homepage: http://www.tandfonline.com/loi/wsub20

Project ECHO: A new model for educating primary care providers about treatment of substance use disorders Komaromy M, et al

- > 950 cases presented 2008-2015
- Increase in Buprenorphine waivered physicians

2006: 36 (ranked 13th)

• 2015: 375 (ranked 3rd)

More rapid growth in waivered physicians in traditionally-underserved areas



Volume 00, Number 00, 2017 @ Mary Ann Liebert, Inc. DOI: 10.1089/pop.2016.0087

Telementoring Primary Care Clinicians to Improve Geriatric Mental Health Care

Elisa Fisher, MPH, MSW, Michael Hasselberg, PhD, RN, PMHNP-BC, 2,3 Yeates Conwell, MD, Jeremy Donath, and José A. Pagán, PhD1,9,10

- New York State
 - 54 Primary care and case management sites
- 33 sessions from 2014-2016
- Results
 - 26 Interviews suggest an improvement in knowledge and treatment practice
 - Claims data → ER costs decreased by 24% for patients with mental health diagnosis over 6 months



EMPIRICAL REPORT

Building Provincial Mental Health Capacity in Primary Care: An Evaluation of a Project ECHO Mental Health Program

Sanjeev Sockaling am^{1,2} • Amanda Arena³ • Eva Serhal^{1,3} • Linda Mohri³ • Javed Alloo³ • Allison Crawford^{2,3}

- Ontario Province, CA
- Pre and Post multiple choice questions
- Results
 - Knowledge test performance and self-efficacy improved significantly
 - Self-efficacy approached significance
 - Satisfaction ratings high



UW PACC FEEDBACK DO YOU AGREE? STRONGLY=5

- 4.64/5-enhanced current knowledge
- 4.89/5-free of commerical bias
- 4.57/5-information that was new and usuable
- 4.57/5-addressed competencies



INTEND TO CHANGE

- Improve suicide assessment and safety planning
- Take a more harm reduction approach
- Use Gabapentin more
- Start using Suboxone
 - "May consider getting trained" GREAT!
- Diagnosing PTSD
- Using sleep meds less and behavioral strategies more
- More carefully consider a patients cannabis use
- More accurate diagnosis
- Better understanding around use of psychiatric medications
 - Less polypharmacy
 - Less benzodiazepine use
 - Improved patient education



HOW WILL CHANGES AFFECT PATIENT OUTCOMES?

• "Remains to be seen, but I am optimistic..."



HOW COULD WE IMPROVE?

- Improve audience participation
- Tech problems
- Vary the day
- Access to past presentations/slides
- Time of sessions—too long
- More therapy
- Introductions could be faster
- The multitasking dilemma
- Reduce lecture time, less discussion during lectures
- Be more supportive in recommendations
- More discussion from community
- More cases, related cases if possible, get to them sooner



UW PACC GOAL

 To increase patient access across the state to effective and evidence based psychiatric and addiction care through increasing the knowledge and self-efficacy of all interested health providers within an intentionally supportive virtual community.



INCREASE KNOWLEDGE

- Weekly succinct, evidence based presentations
 - Focus on keeping them to 30min or less!!!
 - Some newish topics and some repeat
- Expert Opinion
 - Regular panelists, visiting panelists
- Community
 - Give time for people at the spokes to participate
 - Solicit engagement

INCREASE SELF-EFFICACY

- More cases presented
 - 2016-2017: 51 total case presented (48 sessions)
 - 2017-2018: let's go for a personal record!
- How to facilitate
 - Finish didactics on time
 - Timing of the case discussions?
 - Proactive scheduling of cases
 - 2 a year-a sign-up list w
 - More is always welcome



SPECIAL HONORARY MENTION

- Most Cases Submitted to PACC
 - Howard Walsh!
 - 6 cases submitted!!!

- Most Relevant Didactic (Q1-3)
 - Sleep Disorders: non-med interventions 4.92/5
- Best Quality Didactic
 - How to start using Buprenorpine-Nal for OUD
 4.72/5



HOW TO BENEFIT

- Participation is key
 - Presenting cases
 - Participation in discussions
 - Tell us who you are and where



- The longer the better
 - ≥ 1 year associated with higher self-reported knowledge and competencies
 - Helps develop collaborative relationships, develop confidence





SUMMARY OF ENHANCEMENT

- Keep didactics succinct → 30min max
- Schedule out at least one case a week
- Give time for participant discussion
- More cases
- More cases

