



Title: Project ECHO – Extension for Community Healthcare Outcomes - for projects 3ai and 4aiii

Date Created: 12/6/2016

Date Modified:

Date Approved by Board of Directors:

Policy# CGC-CG-35

Purpose:

To promote and introduce Project ECHO as one of the available resources across the PPS to support our clinicians in primary care, psychiatry, geriatric mental health, dementia care and palliative care throughout the state of NY.

Project ECHO clinics is free. It is a simple web based videoconferencing for case-based educational collaboration to share and learn best practices especially in the rural region across the state.

Definitions: The scope and mission of Project ECHO is pulled directly from their website.

The Extension for Community Healthcare Outcomes (ECHO[®]) is an innovative model that was developed at the University of New Mexico by Dr. Sanjeev Arora to improve access to complex chronic disease and specialty care in underserved communities through the use of videoconferencing technology. By providing community-based clinicians with skills and knowledge to treat complex patients in their own practices, ECHO[®] aims to improve health outcomes while also reducing the cost of care through a multidisciplinary team-based approach.

About URMCC Project ECHO[®]

The University of Rochester Medical Center has applied the ECHO[®] model to support general psychiatry, geriatric mental health and dementia care, and palliative care delivered by community-based clinicians throughout New York State. Project ECHO[®] (Extension for Community Healthcare Outcomes) utilizes simple, widely available, and inexpensive web-based videoconferencing technologies to remove geographic barriers and reduce disparities in care.

TeleECHO® clinics are case-based educational experiences in which community clinicians develop “knowledge networks,” learning best practices through a combination of short didactic presentations and case-based discussions with content experts.

Mission

The mission of ECHO® is to improve the care received by adults across the lifespan in underserved, rural areas of NYS. The primary objective is the establishment of the TeleECHO® clinic to connect “hub” (specialist team members) and “spoke” (rural clinicians) sites using web-based videoconferencing technology. Through this technology, ECHO® aims to provide these community-based clinicians with knowledge, decision support and specialty consultation services.

Who can Participate in Project ECHO®?

Primary and long-term care clinicians at all levels that desire to participate are invited to attend. Continuing Medical Education (CME/CE) credits are included for Project ECHO® clinics.

Continuing Medical Education (CME)

Continuing Medical Education (CME/CE) credits will be provided to participating partners for each hour of participation. Upon completing the Project ECHO® Clinic Evaluation form, which is sent out to participants prior to each session, participants are eligible for CME/CE credits.

-) Non-URMC participants will need to create a profile with a username and password if they don't already have one, at www.cme.urmc.edu.

CME/CE credits for each series will be awarded quarterly, and will subsequently appear on your transcript.

Source URL: <https://www.urmc.rochester.edu/project-ECHO.aspx>

HEALTHCARE INFORMATICS

As published on the Healthcare Informatics Magazine

November 29, 2016 - The U.S. Senate today passed the Expanding Capacity for Health Outcomes (ECHO) Act, which is legislation that aims to increase access to healthcare in rural areas by authorizing the U.S. Department of Health and Human Services (HHS) to study the Project ECHO model.

The Senate passed the bill by a vote of 97-0. Introduced by U.S. Senators Brian Schatz (D-Hawaii) and Orrin Hatch (R-Utah), the bill, [S. 2873](#), proposes to expand New Mexico's Project ECHO as a national model for using telehealth for rural care.

<http://www.healthcare-informatics.com/print/news-item/telemedicine/senate-passes-bill-use-project-echo-nationwide-telehealth-model>

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When PPS clinical protocols and pathways are developed through the Clinical Governance Committee(s) of the PPS and approved by the CCN Board of Directors and are applicable to Partner Organization's delivery of health care services and project participation, such protocols and pathways shall not (1) override the professional judgment of Partner Organization and its licensed health care professionals in treating patients in individual cases or (2) interfere with the governing body/established operator of any licensed health care facility or its medical staff in overseeing the provision of clinical services to patients and the quality of care

Policy Board Approval History:

Policy Revisions:

Date	Revision Log	Updated by
12/6/2016	Initial	B. Rosetti

This Policy and Procedure shall be reviewed periodically and updated consistent with the requirements established by the Board of Directors, Care Compass Network’s senior management, Federal and State law(s) and regulations, and applicable accrediting and review organizations.