TeleHealth ROCKS

ECHO Participant Guide

Extension for Community Healthcare Outcomes (ECHO)

"Move Knowledge, Not People"
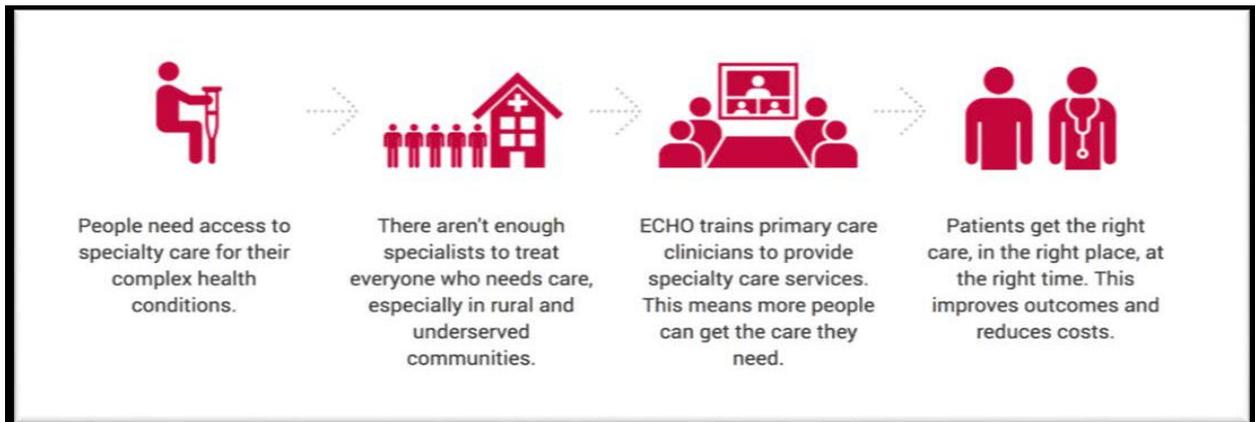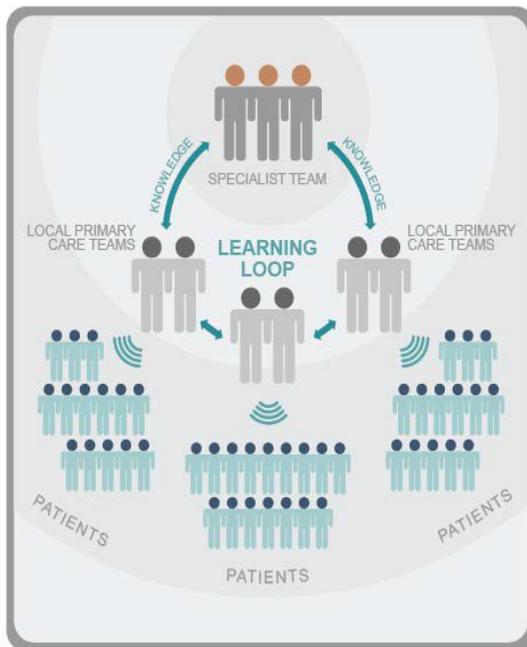
People need access to specialty care for their complex health conditions.

There aren't enough specialists to treat everyone who needs care, especially in rural and underserved communities.

ECHO trains primary care clinicians to provide specialty care services. This means more people can get the care they need.

Patients get the right care, in the right place, at the right time. This improves outcomes and reduces costs.

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OVERVIEW

What is Project ECHO®

Project ECHO® (Extension for Community Healthcare Outcomes) offers a lifelong learning and guided practice model that revolutionizes education and increases workforce capacity by sharing knowledge across distance. Specialists at the "hub" site meet regularly with professionals in local communities via videoconferencing to train in the delivery of specialty care services. Using video conferencing technology, participants connect with a webcam and microphone, a tablet, or a smartphone - from their workplace. This linkage creates a virtual learning collaborative made up of an interdisciplinary "hub" team sharing their best-practice expertise and mentoring with participants in different communities.

The ECHO model™, developed at the University of New Mexico Health Sciences Center, does not actually provide care directly to patients. Instead, it provides front-line professionals with the knowledge and support they need to manage complex conditions in local communities. This dramatically increases access to specialty treatment, particularly in rural and underserved areas.

Since the start of Project ECHO in 2003, the model has greatly expanded and has been implemented by over 110 partners - both in the U.S. and internationally - covering more than 55 complex conditions and problems. Project ECHO has also broadened from its initial focus on medical and primary care, to education, mental health, and a variety of other fields.

Telehealth ROCKS ECHO is part of the HRSA-funded project. It is designed to provide "telementoring" to assist local community professionals such as the medical, mental and behavioral health fields, nursing, school personnel, and other professionals in developing expertise in developmental and behavioral disorders to increase their capacity to identify and treat disorders in local settings. The ECHO telementoring model bridges the gap between healthcare knowledge and local providers using established adult learning principles and practice change strategies.

Core Principles of Project ECHO

The ECHO model develops knowledge and capacity of community clinicians through ongoing telementoring and education. Its core principles are:

- Use *technology* to leverage scarce resources

- Share ``*best practices*'' to reduce disparities

- Use *case-based learning* to master complexity

- *Monitor outcomes* using a Web-based database

When all principles are applied, a learning *community* in which **All Teach, All Learn**, comes together.

How Does Telehealth ROCKS ECHO Work?

A Telehealth ROCKS ECHO session is modeled after a virtual grand rounds, when community, health/healthcare, and school-based providers from multiple locations connect at regularly scheduled times with a specialist or team of specialists through video conferencing. During these ECHO sessions, participants present de-identified student/patient case examples to a specialist or expert teams who mentor the participants to manage students with complex conditions. These case-based discussions are supplemented with short didactic presentations from the hub team of experts to improve content knowledge and share evidence-based practices.

As a participating professional working with children in the **Function Fridays For Better Behavior ECHO series**, you may:

- Present and discuss your challenging cases

- Enhance your ability to extend specialty care to children in your care

- Reduce your families′ travel time and wait time for specialty care

How are the Function Fridays ECHO Sessions Structured?

- ECHO sessions take place via real-time, interactive videoconferencing, using a computer, laptop, tablet, or smartphone equipped with a webcam, and a versatile, user-friendly, HIPAA- complaint, cloud-based software application called Zoom. Zoom is available at no cost to participants.

- Sessions are held on a bi-monthly basis, on the second and fourth Fridays, from 9:00AM-10:00AM CST, beginning January 10, 2020 through April 24, 2020, for a total of 8 sessions.

- 9:00 - 9:10 am - Each session begins with introductions of all participants and check-in.

- 9:10-9:25 am - Within each session, there is a short 15-20 minutes formal didactic PowerPoint presentation on a scheduled topic.

- 9:25-9:35 am - Participants will present pre-submitted cases for discussion by the entire group. All cases must be **DE-IDENTIFIED**, no protected health information (PHI) is shared with the community of learning. An electronic *Case Presentation Form* is used for entering pertinent medical and behavioral information. This is an opportunity to receive help from a team of specialists concerning challenging cases.

- 9:35-9:55 am - All participants are encouraged to contribute actively to the case discussion.
  - Follow-up and clarifying questions
  - Suggestions

- 9:55-10:00 am - Recommendations are summarized verbally at the end of a case presentation and later transcribed and forwarded in writing to the presenter whose case was discussed.

Curriculum

The formal didactic curriculum for the **Function Fridays For Better Behavior ECHO series** was developed by our hub experts:

- Skylar Bellinger, PhD, Licensed Psychologist, Assistant Professor
- Leni Swails, PhD, Licensed Psychologist, Assistant Professor
- Katy Tepper, PhD, Nationally Certified School Psychologist, Postdoctoral Fellow
- Alice Zhang, PhD, Licensed Behavior Analyst, Postdoctoral Fellow

Agenda topics include:

- Introduction and discussion about data collection and frequency, duration and intensity

- Overview of functions of challenging behaviors

- Functional Behavioral Assessment (FBA) Antecedents

- FBA Consequences

- Prevention: Visual supports; Timer/Transitions; Relationship building

- Interventions based on function to acquire attention/tangible items

- Interventions based on function to escape/sensory needs

- Crisis Planning

Participants will be able to view the PowerPoint slides on screen during the didactic presentation. In addition, an online link to the PowerPoint slides will be included in the pre-session email announcement. Please note that all ECHO sessions may be recorded for educational and quality improvement purposes, however only the didactic portion may be shared online. By participating in the ECHO session, you are consenting to be recorded.

Evaluation Process

It is critically important for us to evaluate the effectiveness of our curriculum and program; thus, we ask ECHO participants to complete a short pre- and post-skills assessment survey before and after completion of the series as well as periodic program evaluations throughout the year. The surveys will be sent to the email address provided at the time of registration.

CASE PRESENTATIONS

What Case Should I Present?

To maximize this community of learning, the **Function Fridays For Better Behavior ECHO series** supports all participants with the opportunity to present a de-identified case. The submission of cases for presentation and discussion is a key component in the Project ECHO model and critically important for knowledge-building and sharing. During the first introductory session, instructions will be shared regarding selecting a date to present a case involving common behavioral scenarios as well as difficult, complex or challenging aspects. This is a great opportunity to share a case that has been challenging and obtain feedback for new strategies.

What Information Should Be Included in a Case Presentation?

The *Case Presentation Form* will solicit demographic and relevant clinical information about the patient, and can be accessed through this link: https://redcap.kumc.edu/surveys/?s=JMNYRN7HMJ

It is absolutely critical to preserve student/patient confidentiality at all times during case presentations. **NO HIPAA IDENTIFIERS MAY BE MENTIONED OR SHOWN DURING CASE PRESENTATIONS**. In addition, no other information which might identify the patient (i.e., social

history details, particularly when referring from small communities) may be mentioned.

Complete the *Case Presentation Form* with as much information as possible to assist the specialist with addressing concerns and questions. When all information is not known or available, please complete as thoroughly as possible.

How to Present a Case

The details of scheduling a case presentation and the expectations will be discussed during the first session of the **Function Fridays For Better Behavior ECHO series**

- Complete the *Case Presentation Form* via a REDCap link:
  https://redcap.kumc.edu/surveys/?s=JMNYRN7HMJ

- On the Case Presentation form, there is a field to enter a **Unique Patient/student Identifier (your choice)** which is to be used when referring to your case, and an option to select preferred dates to present a case.

- The presentation of your case will be scheduled based on a first-come, first served basis. We will coordinate and confirm the date of your case presentation via email at least one week prior to your scheduled presentation. We will strive to schedule you on the preferred date that you have indicated on the Case Presentation Form.

- During the ECHO session, the session Facilitator will call on you to present your case and scroll through your *Case Presentation Form* on screen as you present your case. All videoconferencing participants will be able to see the 3-page de-identified portion of the form. Please verbally summarize your case within 5-10 minutes.

- The session Facilitator will then promote discussion among all participants, starting with clarifying questions for the case presenter. At the conclusion of the discussion, the session Facilitator will summarize recommendations from all participants.

- The Hub Team will email the summarized recommendations back to the presenter within two days of the teleECHO session

- UNM's Project ECHO has created the following short videos on The Correct and Incorrect Ways to Conduct an ECHO Patient Presentation. Please take a few minutes to view these:

  ○ YouTube The Correct Way to Conduct an ECHO Patient Presentation
     https://www.youtube.com/watch?v=IUKGkoevTso&feature=youtu.be

  ○ YouTube The Incorrect Way to Conduct an ECHO Patient Presentation
     https://www.youtube.com/watch?v=Cghbvf-JeDw&feature=youtu.be

LOGISTICS

How Do I Sign Up?

You should have received confirmation of your attendance to **Function Fridays For Better Behavior ECHO series** with a link to register online. Make sure you complete all fields. If there are several people participating from your site location, please have each individual complete their own registration form. You will be contacted via email prior to the start of each session with more information and regular announcements about upcoming sessions. Project ECHO learning collaboratives function best when there is a consistent group of participants each week- allowing participants to get to know each other and build off previous discussions. Therefore, we ask that if there are multiple people from your site connecting each week, ensure at least one person is consistently attending.

How Do I Get Zoom?

Zoom is the electronic platform used for each ECHO session.

- You may download the free version of the Zoom client for PC or Mac by visiting https://zoom.us/download and selecting *Zoom Client for Meetings*.
- If your computer doesn't have a built-in camera and/or microphone, a simple USB webcam, such as a Logitech HD Pro Webcam C920, will fulfill this purpose if one is available. **A camera is not required for participation, however it is strongly encouraged to build and engaging community of practice**
- You may also consider the use of a headset instead of your devices′ speakers and/or microphone. A headset may improve your overall audio experience, particularly if there are background noises in your local environment.
- Instructions for downloading and the basic operations of Zoom are also included in the attachment portion of this ECHO Participation Guide. .

Connecting to an ECHO Session

• You will receive an email notification several days before the start of each ECHO session announcing the date, time, and the title of the topic for that week′s didactic presentation.

• One the date of the session, please join the session a few minutes prior to the scheduled start time (9:00 AM/CST) using Zoom. This will give you enough time to confirm you have a stable internet connection, test your audio and video, and get comfortably situated at your site's location. The hub site hosting the Zoom session will initiate the meeting room connection approximately 15-20 minutes prior

to the start time.

How Can I Receive Technical Support?

For questions about Zoom, preparing for an ECHO session, or to schedule a time for testing, please contact Michele Utt at mutt@kumc.edu

CONTACT INFORMATION

- For registration information, please contact Robert Stiles at rstiles4@kumc.edu
- For case presentation and evaluation questions, please contact Alice Zhang at ezhang@kumc.edu

APPENDIX

RESOURCES, INFORMATION AND MATERIALS

1. Videoconferencing Etiquette
2. Setting up a Videoconferencing Location
3. Joining a Meeting with Zoom
4. HIPAA Identifiers Sheet
5. Circle of Trust® Touchstone from the Center for Courage & Renewal, http://www.couragerenewal.org/touchstones/

Video Teleconferencing Etiquette

Recommended Practices:

For the organizer/facilitator:
- Test the equipment at least 40 mins. before the video teleconference
- Prepare and distribute the agenda well before the teleECHOTM session
- Start and end on time
- Eliminate or reduce environmental distractions (i.e. turn off cell phones, avoid paper shuffling, turn off loud fans or other intrusive noise, etc.)
- Open the video and telephone links 5-10 minutes before you start, and welcome early arrivers as they sign on
- Have each attendee introduce herself/himself and identify participants as they sign in late
- Establish and communicate ground rules (i.e., hand signals, written signs, etc.)
- Remind all participants about confidentiality at each session
- Make eye contact with the camera when speaking
- Speak clearly and in a conversational tone
- Limit distracting body movements and broad gestures
- Dress professionally and appropriately; avoid bright colors and ``loud″ clothing
- Provide adequate time for people to respond to questions; it often takes several seconds for someone to decide to talk, and several more seconds for them to unmute their microphone
- Facilitate the discussion and be vigilant about the participants who wish to make a comment and queue them up in order
- Use gentle, supportive approaches to correct misinformation
- Encourage all participants to take part in the discussion
- Use ``gentle nudges″ to help people discover and learn
- Excuse yourself, leave the room if you need to have a side conversation or take a phone call
- Use respectful and appropriate language
- Use gentle redirection when someone dominates time or is critical or confrontational
- Remember to request feedback or contributions from participants by phone or videoconference

For the attendee/participants:
- Eliminate or reduce environmental distractions (i.e. turn off cell phones, avoid paper shuffling, turn off loud fans or other intrusive noise, etc.)

• Join the meeting with your video and leave only one speaker unmuted to avoid feedback

• Make eye contact with the camera when speaking

• Speak clearly and in a conversational tone; start with your name to identify yourself as the speaker

• Provide adequate time for other people to respond to questions

• Try to take part in the discussion; use respectful and appropriate language

• Limit distracting body movements and broad gestures

• Dress professionally and appropriately; avoid bright colors and ``loud″ clothing

• Excuse yourself and leave the room if you need to have a side conversation or take a phone call

• If someone is speaking, let them finish, or signal your wish to talk to the facilitator

Avoid...

• Disclosing protected health information (PHI) or personally identifiable information (PII)

• Criticizing or reprimanding participants, even if they are incorrect

• Engaging in side conversations, whispering to others in the room

• Talking over other people and not waiting for your turn

• Rude comments, behavior, and gestures

• Making extraneous noise such as rustling papers; conference microphones are very sensitive

Setting up a Videoconferencing Location

• Join the video call from a quiet location with minimal background/ambient noise and little or no chance of interruption.

• Position yourself and your video camera so that you are well lit. Avoid backlighting situations, such as having a bright light source or window behind you.

• Keep in mind that others on the video call will be able to see everything that is your camera′s field of view. Ideally, position your camera to minimize any potential visual distractions. A solid background is optimal, though this is not always possible to achieve.

• Positioning your PC/Mac/smartphone/tablet in a stationary location, such as on a table or desk (using props, if needed), will give other viewers the best viewing experience of you, unless you specifically need to move the camera around to show something to the group. This will also generally provide better audio performance. Subtle movements generated by holding a device, such as a smart phone or tablet, can be distracting.

• If you are videoconferencing as a solo participant, position yourself relative to your device′s camera so the camera is capturing a relatively close-up view of you. Position yourself within the camera frame so that the area from the top of your head to around mid-chest level can be seen.

• Position your device′s camera as close to eye level as possible. If feasible, look toward the camera when speaking. This gives the other callers the best view of you while you are communicating with them and gives the appearance that you are making eye contact.

• Please fill in your name when joining the call via Zoom. You can do this by viewing the participant list at the bottom of the screen and editing your name. Your entry in the list will have ``**Me**″ next to it and options for **Mute/Unmute** and **Rename** will appear. You can also right-click on your name in the box where your self-image is and edit from there. This is the name that the group will see. You can also add your healthcare center or location if you so choose (Example: Jane Doe - Yuma Regional).

• Test your audio and video prior to the start of the session.

Joining a meeting with Zoom

Downloading Zoom

You can download Zoom by going to https://zoom.us/download and download the
Zoom Client for Meetings. Once Zoom is downloaded,
please click on **Join a Meeting**.

Joining a meeting

Please enter the clinic's meeting ID (provided by your clinic coordinator) and click **Join**.

Connecting Audio

Once you join the meeting, a window will appear asking you to **Join Audio by Computer**.
  • Check the box to Automatically Join audio by Computer when joining a meeting in the bottom left
  corner of the Audio window.

Selecting "Automatically Join audio by Computer when joining a meeting" allows your audio connection to be automatically established the next time you join a Zoom meeting from your computer.

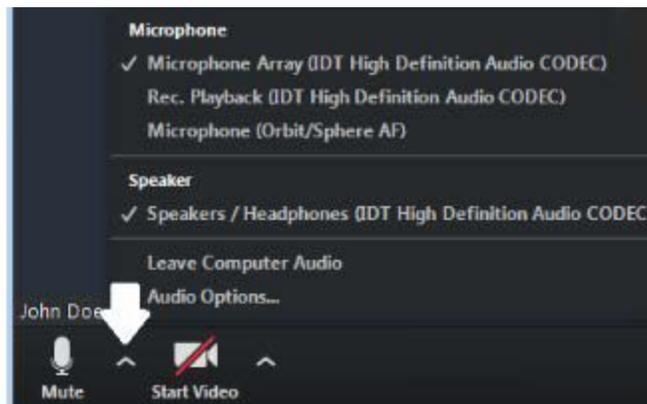- Click the Join Audio Computer button.

• After clicking on ``Join Audio by Computer'', you will see a message confirming that you're using the audio connection on your computer.
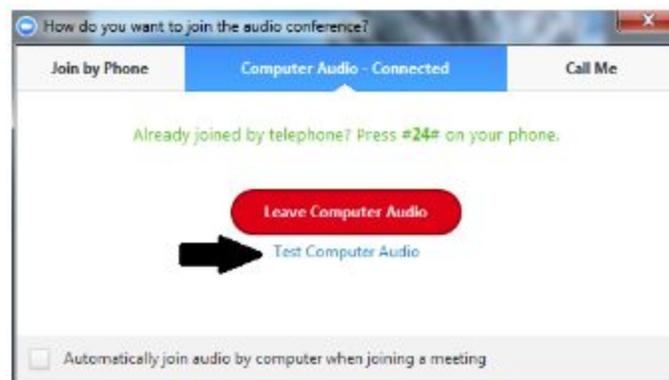
Testing Audio

Before the session begins, please test your microphone and speakers by clicking on the arrow pointing upward to the right of the microphone and selecting **Audio Options**.


Click on **Test Computer Audio** on the next Screen.

The **Test Speaker** button plays a sound to let you know the speaker is working. If you don't hear anything, make sure your speakers are turned on. You can also select different speakers by clicking on the field next to the **Test Speaker** button.

The **Test Mic** button starts recording once you click it. It records a few seconds of audio and will play back the recording to let you know the microphone is working. If you don't hear anything, try selecting a different microphone by clicking on the field next to the **Test Mic** button.
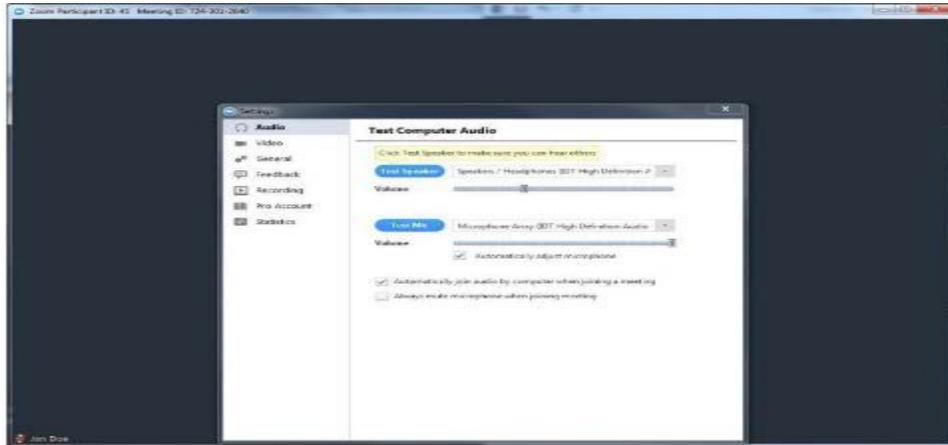
General reminders

- Remember to *mute your microphone* when you're not speaking. You can mute yourself by clicking on the microphone icon in the bottom left corner of the screen

- Zoom has two viewing options that can be toggled in the top right corner
  - **Gallery view** allows you to see all participants in the meeting
  - **Speaker view** allows you to view only the person that is speaking

HIPAA (Health Insurance Portability and Accountability Act) IDENTIFIERS

Regarding the safeguarding of protected health information (PHI) whether written, orally stated, or in electronic format, ECHO complies with State and federal guidelines.

When presenting your patient, please use the ECHO ID number you're provided and refrain from providing information containing names, initials, living location, place of work, birth date, or any specific information about the patient that helps identify them as this is considered *"protected health information."* It is our responsibility to ensure that the privacy of protected health information is not disclosed.

HIPAA PHI: List of 18 Identifiers and Definition of PHI

1. Names;

2. All geographical subdivisions smaller than a State, including street address, city, county, precinct, zip code, and their equivalent geocodes, except for the initial three digits of a zip code, if according to the current publicly available data from the Bureau of the Census: (i) The geographic unit formed by combining all zip codes with the same three initial digits contains more than 20,000 people and (ii) The initial three digits of a zip code for all such geographic units containing 20,000 or fewer people is changed to 000.

3. All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date, date of death; and all ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older;

4. Phone numbers;

5. Fax numbers;

6. Electronic mail addresses;

7. Social Security numbers;

8. Medical record numbers;

9. Health plan beneficiary number

10. Account numbers;

11. Certificate/license numbers;

12. Vehicle identifiers and serial numbers, including license plate numbers; device identifiers and serial numbers;

13. Web Universal Resource Locators (URL);

14. Internet Protocol (IP) address numbers;

15. Biometric identifiers, including finger and voice prints;

16. Full-face photographic images and any comparable images; and

17. Any other unique identifying number, characteristic, or code (NOTE: this does not mean the unique code assigned by an investigator to code the data).

There are also additional standards and criteria to protect an individual's privacy from re-identification. Any code used to replace the identifiers in data sets cannot be derived from any information related to the individual and the master codes, nor can the method to derive the codes be disclosed. For example, a subject's initials cannot be used to code their data because the initials are derived from their name.

Additionally, the researchers must not have actual knowledge that the research subject could be re-identified from the remaining identifiers in the PHI used in the research study. In other words, the information would still be considered identifiable if there were a way to identify the individual even though all the 18 identifiers were removed.

Circle of Trust® Touchstones

developed by Parker J. Palmer and the Center for Courage & Renewal
www.couragerenewal.org

Give and receive welcome.

People learn best in hospitable spaces.
In this circle we support each other's learning
by giving and receiving hospitality.

Be present as fully as possible.

Be here with your doubts, fears and failings
as well as your convictions, joys and successes,
your listening as well as your speaking.

What is offered in the circle is by invitation, not demand.

This is not a "share or die" event!
Do whatever your soul calls for, and know
that you do it with our support. Your soul
knows your needs better than we do.

Speak your truth in ways that respect other people's truth.

Our views of reality may differ, but speaking
one's truth in a Circle of Trust does not mean
interpreting, correcting or debating what
others say. Speak from your center to the
center of the circle, using "I" statements,
trusting people to do their own
sifting and winnowing.

No fixing, saving, advising or correcting.

This is one of the hardest guidelines for
those of us who like to "help." But it is
vital to welcoming the soul, to making
space for the inner teacher.

Learn to respond to others with honest, open questions...

instead of counsel or corrections. With such questions,
we help "hear each other into deeper speech."

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Learn more about Circles of Trust® at **www.couragerenewal.org/approach**

When the going gets rough, turn to wonder.

If you feel judgmental, or defensive, ask yourself, "I wonder what brought them to this belief?" "I wonder what they're feeling right now?" "I wonder what my reaction teaches me about myself?" Set aside judgment to listen to others—and to yourself—more deeply.

Attend to your own inner teacher.

We learn from others, of course. But as we explore poems, stories, questions and silence in a Circle of Trust, we have a special opportunity to learn from within. So pay close attention to your own reactions and responses, to your most important teacher.

Trust and learn from the silence.

Silence is a gift in our noisy world, and a way of knowing in itself. Treat silence as a member of the group. After someone has spoken, take time to reflect without immediately filling the space with words.

Observe deep confidentiality.

A Circle of Trust depends on knowing that whatever we say will remain with the people to whom we choose to say it — whether in small groups or in the large circle — and will never be passed on to others without our explicit permission.

Know that it's possible...

to leave the circle with whatever it was that you needed when you arrived, and that the seeds planted here can keep growing in the days ahead.

Facilitators of Courage & Renewal programs use these Touchstones to define clear boundaries in a Circle of Trust, the kinds of boundaries that create safe space for the soul. While these Touchstones define how we relate in a retreat, they can be adapted to support workplaces, schools, communities, and other groups—any place where we want to honor the integrity of the individual and build relational trust.