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Title

Project ECHO Rheumatology – Rationale and Results from a Multi-Method Study to Capture Impact

Priority 1 (Research Category)

Musculoskeletal and rheumatology

Presenters

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Abstract

CONTEXT: Project ECHO (Extension for Community Healthcare Outcomes) is a virtually-delivered health professions education model, designed to improve patient care by enhancing primary care capacity in specialty topics. Launched in 2017, Project ECHO Rheumatology ('ECHO') has welcomed over 500 primary care clinicians provincially to learn about rheumatic disease diagnoses and management. Qualitative and quantitative data pertaining to provider self-efficacy, satisfaction, knowledge, and practice change have been rigorously collected since its inception. Owing to the protean clinical presentations, heterogeneous diagnoses discussed in each patient case presented, and varied management approaches, capturing impact regarding clinical outcomes has proven challenging.

OBJECTIVES: To evaluate ECHO impact on clinicians by 1) exploring experiences in ECHO and its impact on rheumatic disease management and 2) assessing the impact of ECHO on clinicians' self-efficacy and knowledge.

METHODS: We adopted a multi-method study design, where qualitative and quantitative components of this study were conducted. Descriptive statistics, paired samples t-tests, and effect sizes were calculated from pre-post questionnaire results. The qualitative descriptive approach was used to analyze focus group discussions.

RESULTS: Through analysis of both qualitative and quantitative components, ECHO impacted clinicians in multiple ways: clinicians increased in self-efficacy in managing rheumatic conditions (p<.001), perceived increases in knowledge, benefited from ongoing mentorship and a supportive community of practice, and integrated teachings from weekly sessions into their clinical practice. Clinicians from rural and Northern Ontario particularly benefited as access to specialists in their areas was sparse to none. Clinicians also increased in their awareness of interprofessional rheumatic management, utilizing

pharmacy, nursing, occupational therapy, and physiotherapy to their full potential. Ultimately, primary care clinicians were able to better manage rheumatic conditions within primary care, using specialists and the larger health care system more wisely.

CONCLUSION: The burden of rheumatic disease is rising. ECHO is a promising education model that builds capacity within primary care to manage rheumatic conditions more adeptly and wisely. The multimethod research approach permitted a wholistic analysis and synthesis of rich qualitative and quantitative data.

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