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Project ECHO

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AHRQ telehealth project helps address mental health needs among rural elderly in New York state

AHRQ, University of Rochester Medical Center

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Health IT

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Telehealth sessions based on the AHRQ-funded [Project ECHO®](#) model helped New York State primary care clinicians provide mental health treatment to elderly patients in rural areas, according to staff at the University of Rochester Medical Center (URMC). The initiative reduced emergency department (ED) visits by 20 percent and cut costs by 24 percent since 2014, according to Michael J. Hasselberg, Ph.D., assistant professor of psychiatry and clinical nursing at URMC and director of Project ECHO Geriatric Mental Health model (GEMH).

Project ECHO, which stands for Extension for Community Healthcare Outcomes, is a telehealth distance-learning model that helps rural clinicians acquire new expertise and provide evidence-based health care to underserved patients by consulting with experts in major cities. The model, which connects rural clinicians to URMC specialist mentors via virtual clinics, was created by AHRQ grantee Sanjeev Arora, M.D., a professor of medicine at the University of New Mexico, where it was first used to improve care for rural patients with hepatitis C.

URMC used Project ECHO to develop its GEMH model. The hospital's geriatric care consultations have corresponded with the reduction in costs associated with ED use based on claims data, Dr. Hasselberg said. Those results are shown in a study published online January 20, 2017, in *Population Health Management*.

Project ECHO GEMH focuses on patients with dementia or mental disorders living in remote or medically underserved areas of New York. As of November 2016, more than 500 community-based clinicians across the State had received clinical guidance on treating such patients.

"The Project ECHO model is fantastic because the use of videoconferencing technology allows you to reach so many more patients than anyone could in person," Dr. Hasselberg said. "And, there's a growing recognition of the importance of incorporating behavioral health into primary care work, in areas such as screening, diagnosis, and management of depression, for example."

During 90-minute videoconferencing sessions held every other week, primary care clinicians from across New York present patient scenarios and seek advice about appropriate care. Members of URMC's geriatrics specialist team—which includes a geriatric psychiatrist, geriatrician, psychologist, psychiatric nurse practitioner, pharmacist, and social worker—answer questions, offer guidance, and ultimately provide treatment recommendations.

Dr. Hasselberg said the telehealth sessions have increased collaboration among rural clinicians. In addition, URMC expanded its telehealth sessions in 2015 to include long-term care clinicians caring for this vulnerable population.

"Project ECHO promotes the forming of knowledge networks, which also allows community-based clinicians in similar settings to participate in the case discussions. Through a shared learning process, these clinicians become expert resources to their colleagues in their region of the State," Dr. Hasselberg said.

Demand for mental health care services will continue to grow, according to the New York State Office of Mental Health. The number of adults age 65 or older will almost double from 2.5 million in 2016 to 4 million by 2030, and the number of elderly patients with mental illness is expected to rise from 495,000 to 772,000 by that time.

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