

Expanding health care provider capacity to treat mental health disorders via interactive tele-education

Christina Choate, B.S.
University of Utah Health

WHAT IS PROJECT ECHO®?

Project ECHO® brings together health care providers of all levels via interactive videoconferencing to discuss best practices for treating complex patients. It provides an opportunity to present difficult cases to specialists for recommendations and group discussion.

BACKGROUND & SIGNIFICANCE

At least one-in-five patient visits to primary care has a mental health component.¹ Meanwhile, health care providers report a lack of resources and confidence in treating conditions such as depression, anxiety, sleep disorders, and addiction.²

BEHAVIORAL HEALTH ECHO OBJECTIVES

Behavioral Health ECHO at the University of Utah was created with the following objectives:

1. To provide a collaborative setting for providers throughout the Mountain West to discuss mental health treatments
2. To disseminate best-practice guidelines for treatment
3. To catalogue resources for providers
4. To provide a forum for case-based learning

MODULES DISCUSSED

Mental Health Interview in the Primary Care Setting – 3 sessions
Mood Disorders – 6 sessions
Anxiety Disorders – 7 sessions
Substance Use Disorders – 9 sessions
Child/Adolescent Disorders – 6 sessions

CASE-BASED LEARNING

12 cases were presented by **7 providers** in **3 states** (UT, MT, NV).

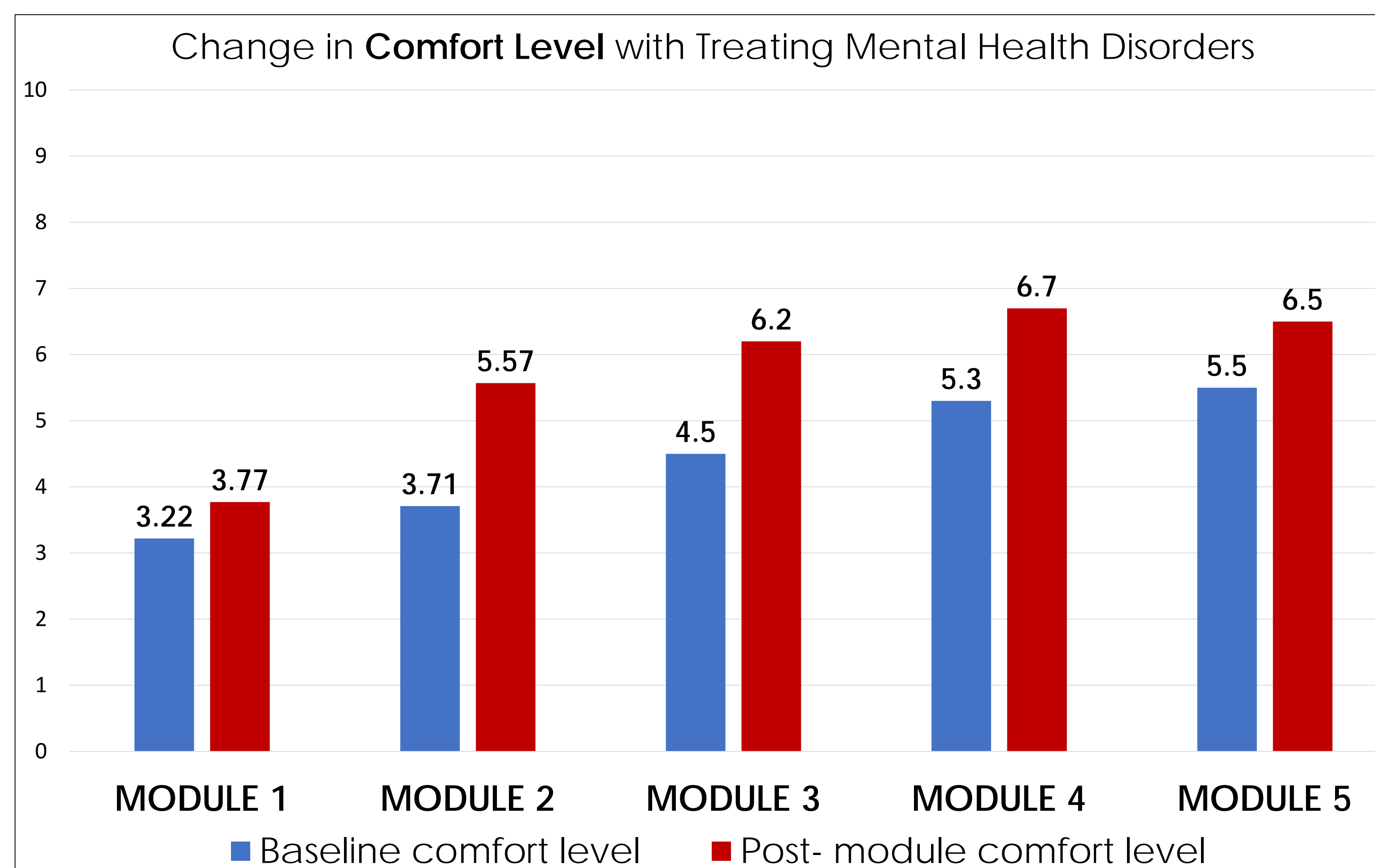
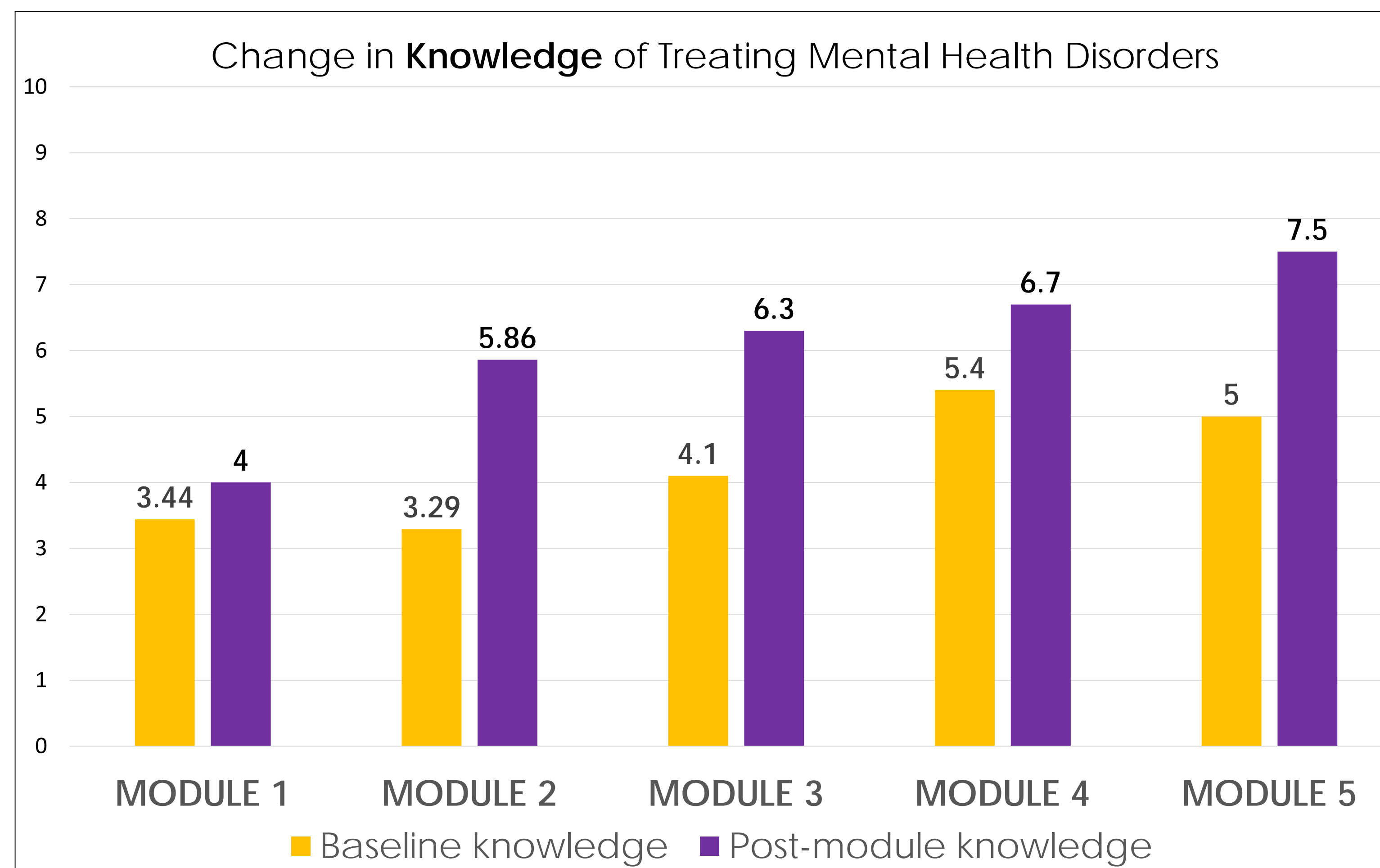
Patient cases were de-identified, and diagnoses included but were not limited to: Generalized Anxiety Disorder, Substance Use Disorder, Insomnia, Dementia, & Major Depressive Disorder.

PROGRAM IMPACT ON PROVIDERS

Post-module surveys measured a change in both knowledge and comfort level in treating mental health disorders.

35 survey responses were collected, showing a **41% overall increase in knowledge** of best practices for treating mental health disorders, and **32% overall increase in comfort level** with treating patients with mental health disorders after participating in the program.

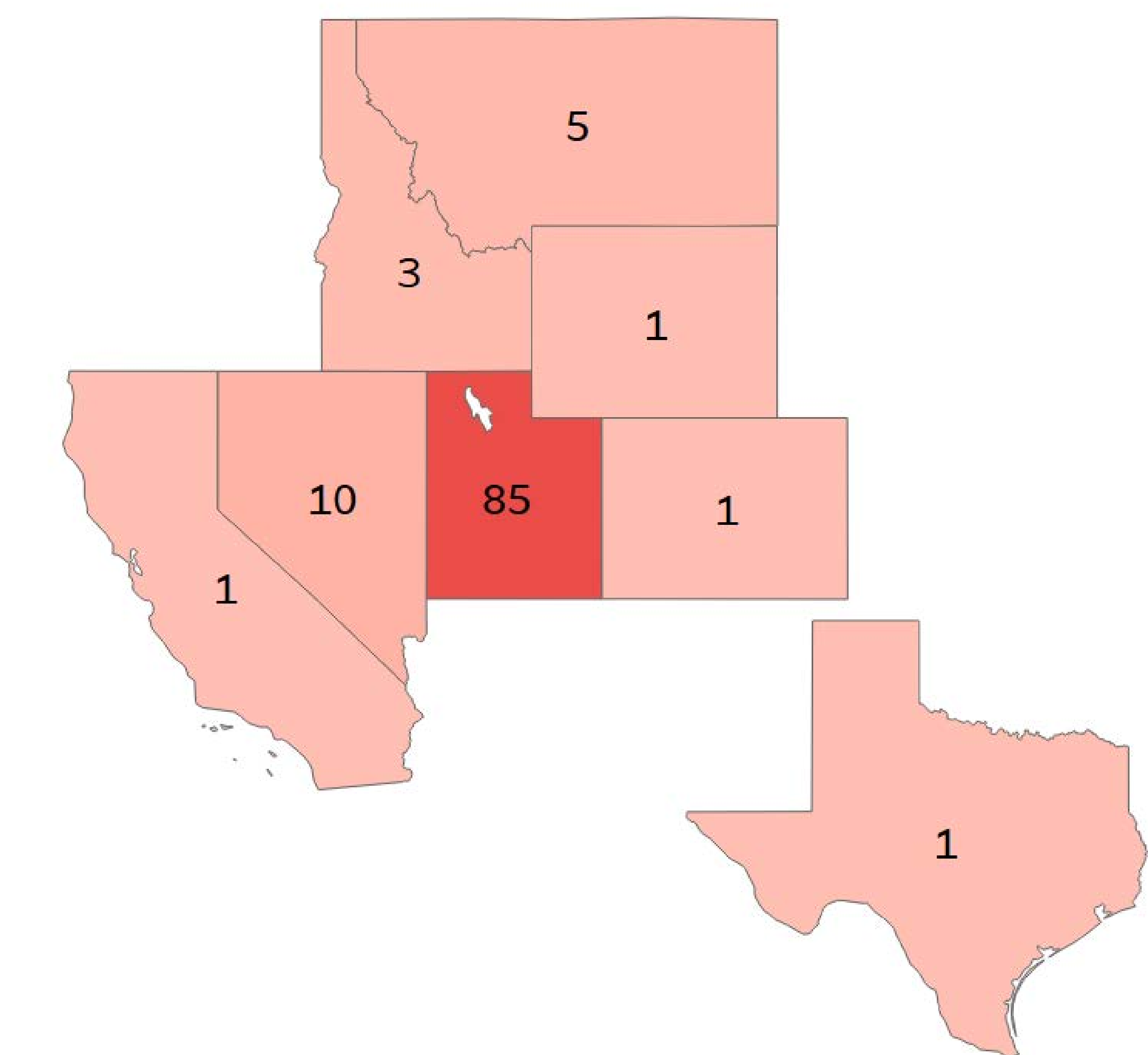
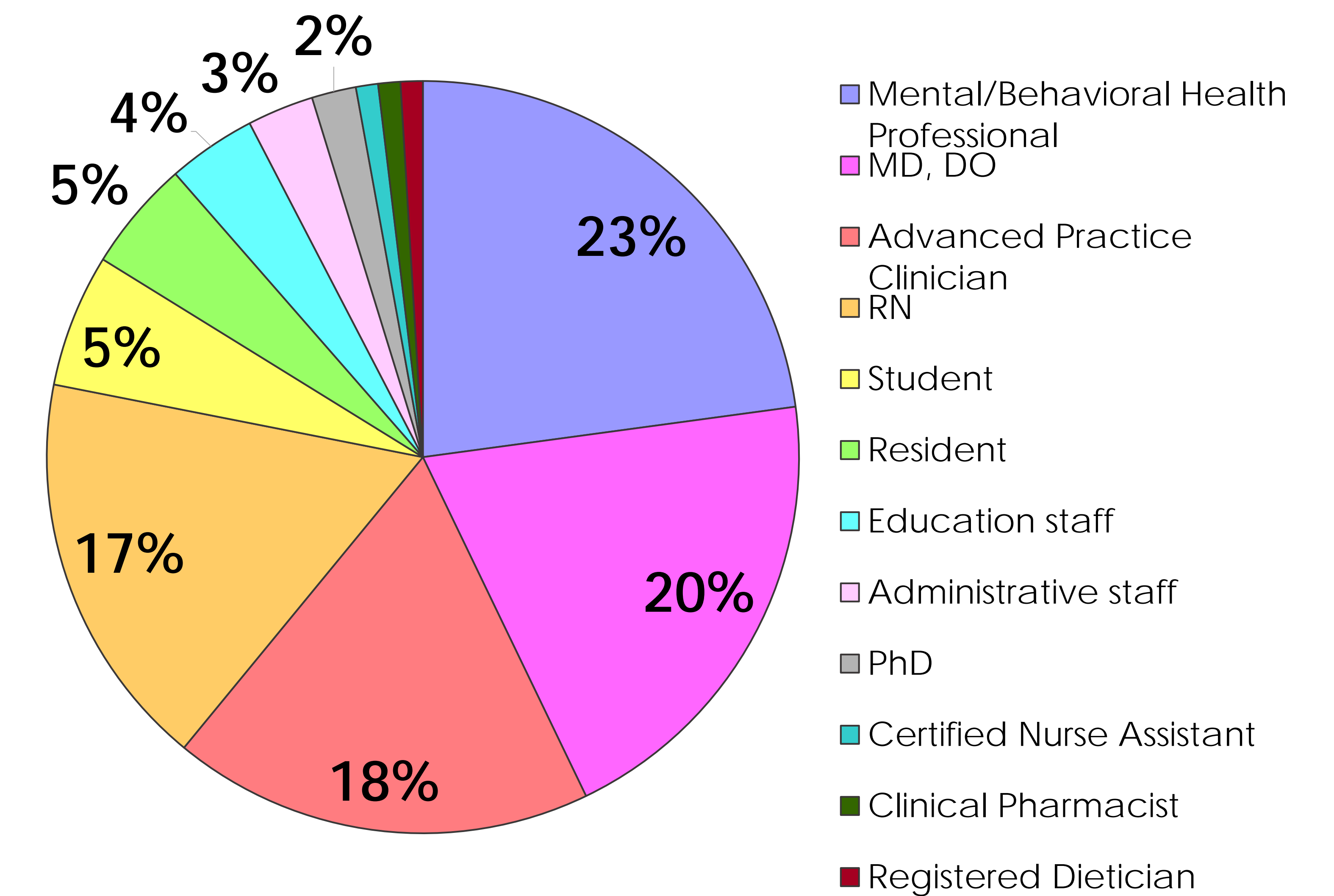
'**Module 2: Mood Disorders**' shows the largest increase in knowledge (78.2%) and comfort level (50.0%).



WHO ATTENDED?

105 individuals from 8 states participated in the program.

Representation from the following professional groups included: **mental health professionals (23%), MD/DO (20%), Advanced Practice Clinicians (18%), and Registered Nurses (17%).**



REFERENCES

- ¹ National Center for Health Statistics. "National Ambulatory Medical Care Survey, 2015." Centers for Disease Control and Prevention, 2015. <http://www.cdc.gov/nchs/ahcd.htm>. Accessed 31 Aug 2018.
- ² Loeb, Danielle F., et al. "Development and Initial Validation of Primary Care Provider Mental Illness Management and Team-Based Care Self-Efficacy Scales." *General Hospital Psychiatry*, vol. 45, 2017, pp. 44-50. doi:10.1016/j.genhosppsy.2016.12.005.