



NORTHWEST AIDS EDUCATION AND TRAINING CENTER

Introduction to HIV Telehealth

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Mission

- Build capacity to maximize treatment of chronic HIV infection in underserved areas, monitoring outcomes
- Catalyze knowledge sharing between clinicians developing treatment expertise across the Pacific Northwest region
- Disseminate treatment innovations quickly across a network of clinicians
- Maximize HIV care in local communities, treating patients locally with expert knowledge

History of ECHO and Telehealth

2002 – Frustration

- 30,000 patients → 6 month wait

2002-2008 – Roll-Out

- Ashoka Changemakers Award
- AAMC Spencer Foreman Award for Outstanding Community Service

2009 – Expansion

- UW, U of Chicago, Harvard

2011 – Research

- Landmark NEJM Article



Evidence Supporting Telehealth

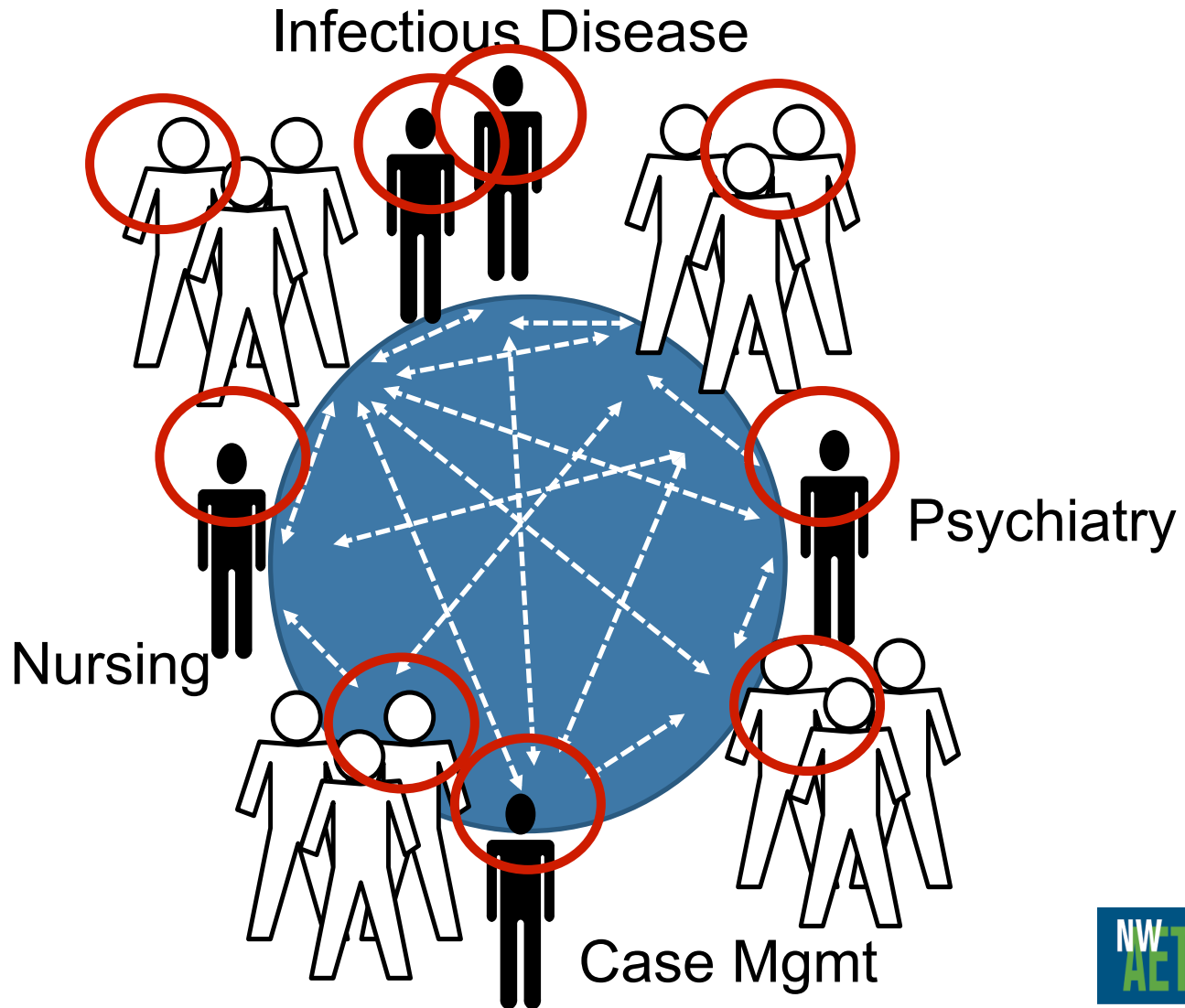
Table 2. Sustained Virologic Response According to Genotype and Site of Treatment.*

HCV Genotype	ECHO Sites	UNM HCV Clinic	Difference between ECHO Sites and UNM HCV Clinic	P Value
	<i>no. of patients with response/total no. (%)</i>		<i>percentage points (95% CI)</i>	
All genotypes	152/261 (58.2)	84/146 (57.5)	0.7 (–9.2 to 10.7)	0.89
Genotype 1	73/147 (49.7)	38/83 (45.8)	3.9 (–9.5 to 17.0)	0.57
Genotype 2 or 3	78/112 (69.6)	42/59 (71.2)	–1.5 (–15.2 to 13.3)	0.83

* The rates of sustained virologic response are not reported separately for six patients with genotype 4 or genotype 6. ECHO denotes Extension for Community Healthcare Outcomes, HCV hepatitis C virus, and UNM University of New Mexico.

* More minorities treated in ECHO group

Interactive Learning Environment



Interactive Learning Environment

Infectious Disease

Decrease Professional Isolation

Increase Knowledge

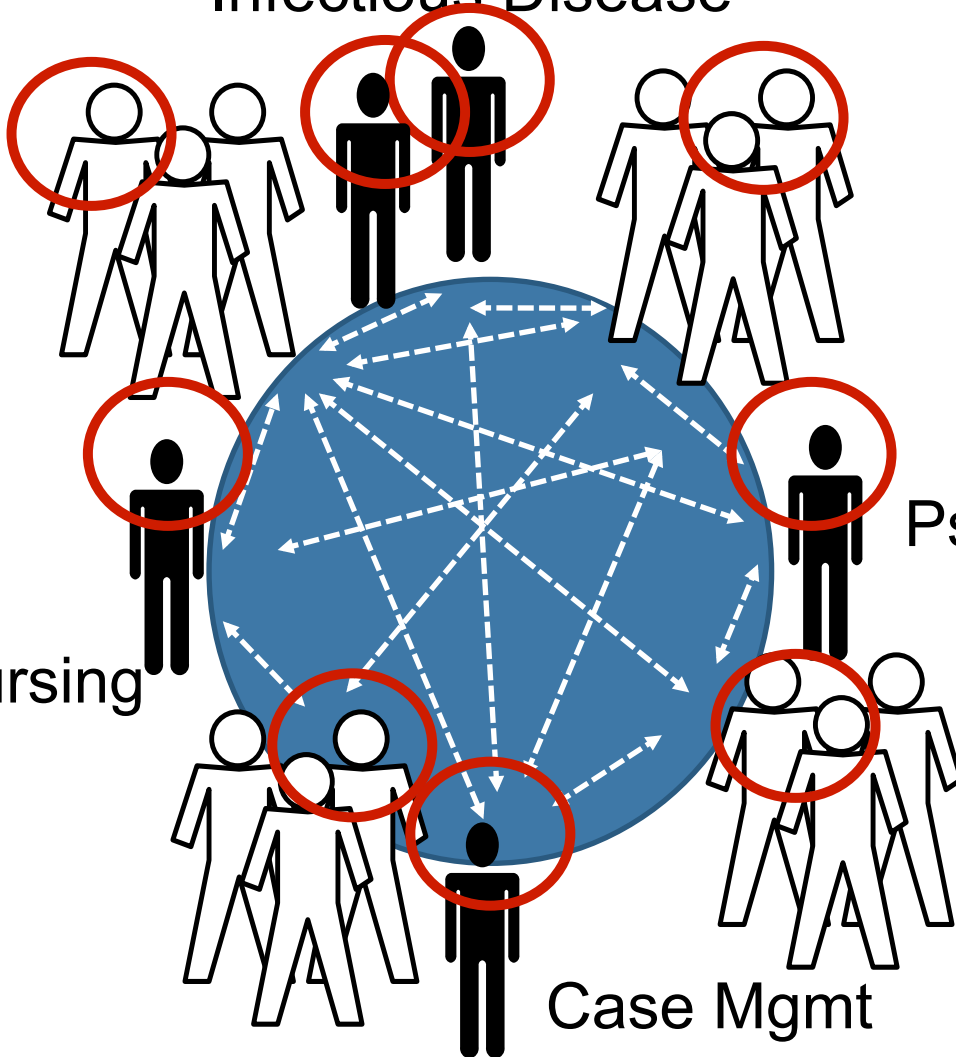
Increase Self-Efficacy

Arora et al. 2010

Psychiatry

Nursing

Case Mgmt



Project ECHO Sites



Project ECHO Washington Sites

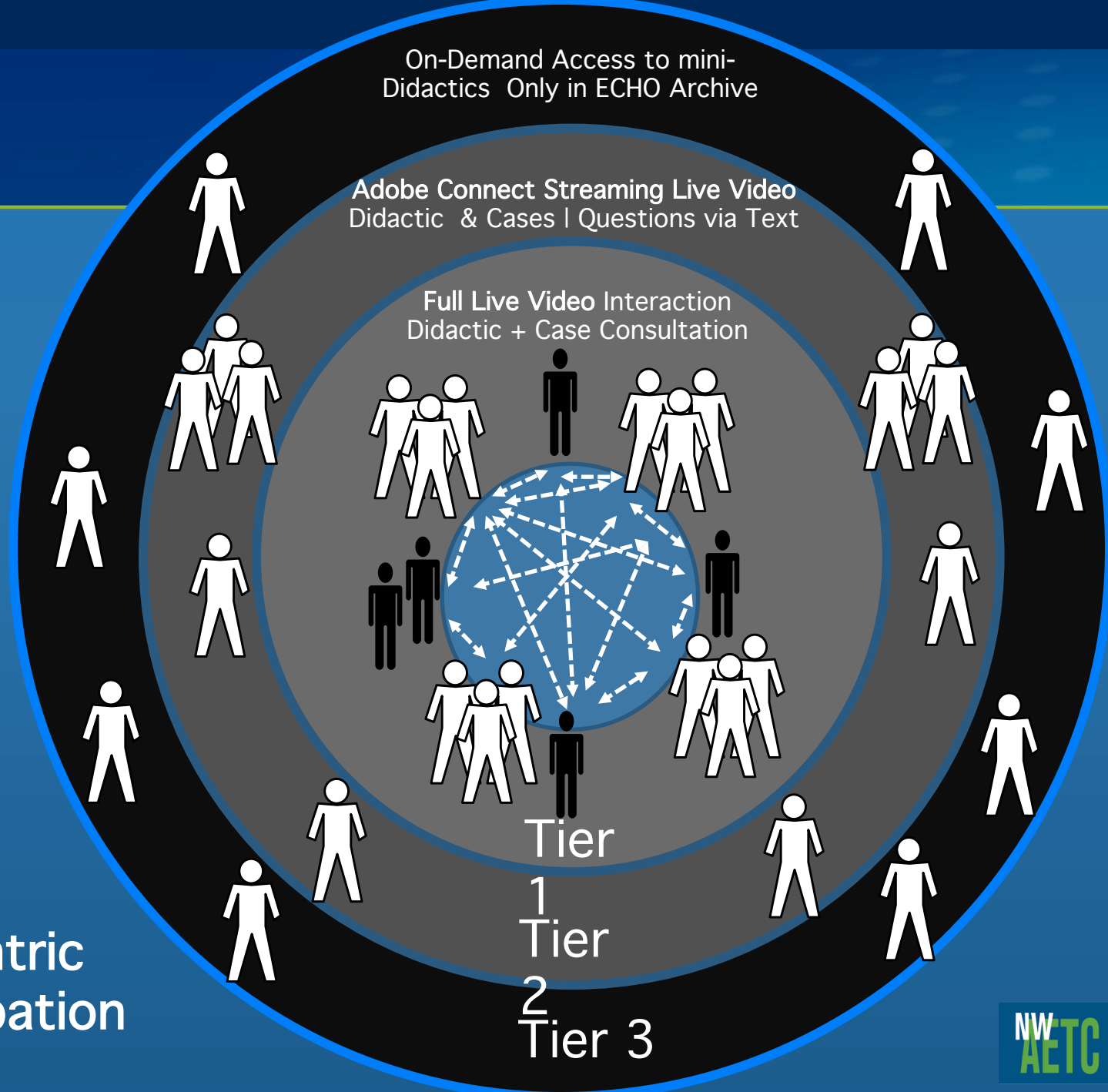




Northwest AIDS Education and Training Center

Strengthening HIV care through integrated distance learning and clinical consultation.

Tiered Concentric Participation Model



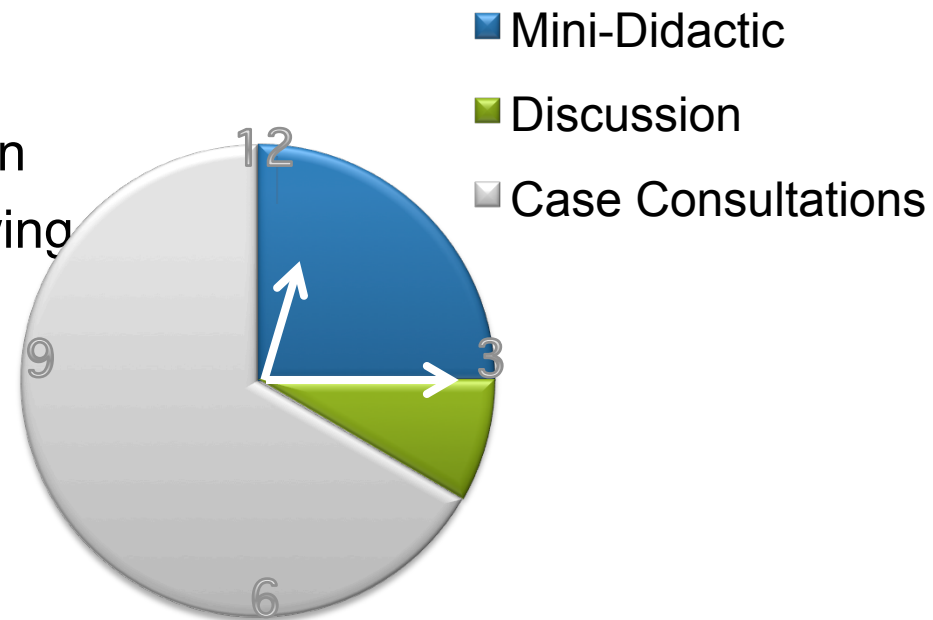
Mechanics of Telehealth Sessions

- Mini-Didactics

- Focused clinical topic
- First 15 minutes of each session
- Additional 5 minutes for discussion
- Recorded/archived for future viewing

- Case consultations

- Remainder of session
- Goal 3-4 cases per session
- Each site should contribute at least one case per month



Telehealth Etiquette

- Technical:
 - Video: mute microphone
 - Phone: use only when necessary, 'mute' rather than 'on hold'
 - Email or text with major issues
- Educational:
 - Positive learning environment
 - Minimize side conversations
 - Target is the 'low-volume provider'
 - Plenty to learn from everyone!!
- Metaphysical
 - New, innovative medium (tolerate some glitches)
 - Treating HIV is more like soccer (team) than golf (individual)



‘A União Faz a Força’

When listening to cases, think about ideas, strategies, resources that might help that clinician/clinic team with:

- Clinical assessment & diagnosis
- Treatment decisions
- Case management
- Patient communication & support
- Organization of clinic processes

Share them:

- “speak up” during the videoconference
- Send email to Christian afterwards (ramers@uw.edu)

Case presentations

- ECHO ID: 'SEA-CBR-1'
- ECHO Fax: **206.543.0813**
- Faxed in by close of business on Tuesday
- What makes a good case?
 - Anything important in **your** clinical HIV practice!
 - Our goal is to grow as a network and share best practices
- Expectation to present at least 1 case/month

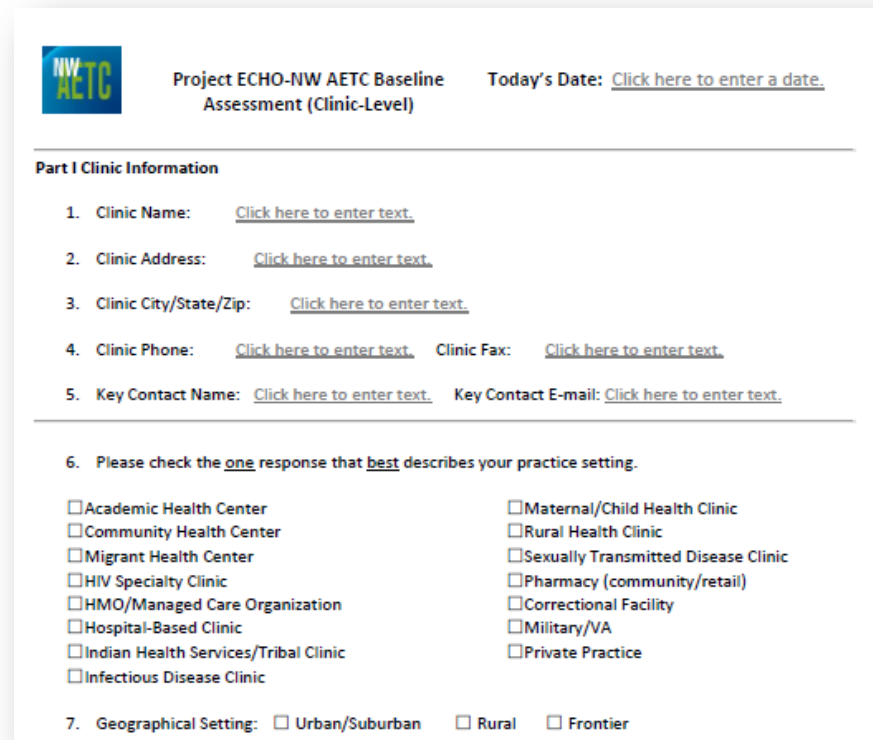
NW AETC | echo Initial Patient Case Consultation Form— Fax to 206-543-0813

Echo ID # _____ Date _____

Age	Race/s	History	Check	Comments	HIV Ab Test at first diagnosis
	<input type="checkbox"/> AI/AN	Currently on ARV?	<input type="checkbox"/> Y <input type="checkbox"/> N		Date of 1 st Ab Test (mm/yy) _____
	<input type="checkbox"/> Asian	If female, pregnant?	<input type="checkbox"/> Y <input type="checkbox"/> N		Date First Started ARV meds _____
	<input type="checkbox"/> Black / African American	If female, had child?	<input type="checkbox"/> Y <input type="checkbox"/> N		Date (mm/yy) _____
	<input type="checkbox"/> Native Hawaiian	Last Pap smear _____			HIV Risk Factor (check): <input type="checkbox"/> MSM
	<input type="checkbox"/> /Pacific Islander	ETOH screen done?	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> IDU <input type="checkbox"/> Hetero <input type="checkbox"/> Perinatal
	<input type="checkbox"/> White	Depression screen done?	<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Occupational <input type="checkbox"/> Unknown
	<input type="checkbox"/> Mixed race	Substance abuse screen?	<input type="checkbox"/> Y <input type="checkbox"/> N		Initial Viral Load _____
	<input type="checkbox"/> Other (Mestizo, Creole)	IDU Hx	<input type="checkbox"/> Y <input type="checkbox"/> N		Copies per ml _____
	<input type="checkbox"/> Unknown	Smoker	<input type="checkbox"/> Y <input type="checkbox"/> N		Date (mm/yy) _____
	<input type="checkbox"/> Declined	Transmission Prevention Plan In Place (describe)			Initial CD4 Count _____ cells/ml
	Ethnicity				Date (mm/yy) _____
	<input type="checkbox"/> Hispanic / Latino				CD4 Percent _____ %
	<input type="checkbox"/> Not Hispanic/Latino				Lowest CD4 Count
	Gender				CD4 Count _____ cells/ml
	<input type="checkbox"/> Male	Issues from substance and mental health screens (describe):			Date (mm/yy) _____
	<input type="checkbox"/> Female				CD4 Percent _____ %
	<input type="checkbox"/> Transgender M2F				Most Recent CD4 count
	<input type="checkbox"/> Transgender F2M				CD4 Count _____ cells/ml
	Medical Co-morbidities				Date (mm/yy) _____
					CD4 Percent _____ %
					HAV Vaccine Doses Rec'd (check)
					Vaccine Doses Received <input type="checkbox"/> 1 <input type="checkbox"/> 2
					HBV (check) <input type="checkbox"/> HbsAg+
					<input type="checkbox"/> HbcAB+ <input type="checkbox"/> HbsAb+

Program Evaluation

- **Clinic Level Assessment**
 - Q12 months
 - Clinic goals
 - Standard clinical quality measures
- **Provider Level Assessment**
 - Q6 months
 - Individual provider goals
 - Knowledge
 - Self-Efficacy
 - Community of Practice
- **Within-Session Tracking**
 - Case presentations, Participation
 - Recommendations and peer-to-peer



The screenshot shows a web-based assessment form titled "Project ECHO-NW AETC Baseline Assessment (Clinic-Level)". At the top left is the NW AETC logo. To the right of the logo, the title "Project ECHO-NW AETC Baseline Assessment (Clinic-Level)" is displayed. Further right, it says "Today's Date: [Click here to enter a date.](#)". Below the title bar, the form is divided into sections. The first section is "Part I Clinic Information", which contains five numbered items, each with a text input field and a "Click here to enter text." link: 1. Clinic Name, 2. Clinic Address, 3. Clinic City/State/Zip, 4. Clinic Phone and Clinic Fax, and 5. Key Contact Name and Key Contact E-mail. The second section, starting with item 6, asks the user to "Please check the one response that best describes your practice setting." and lists 15 options in two columns, each preceded by an unchecked checkbox: Academic Health Center, Community Health Center, Migrant Health Center, HIV Specialty Clinic, HMO/Managed Care Organization, Hospital-Based Clinic, Indian Health Services/Tribal Clinic, Infectious Disease Clinic, Maternal/Child Health Clinic, Rural Health Clinic, Sexually Transmitted Disease Clinic, Pharmacy (community/retail), Correctional Facility, Military/VA, and Private Practice. The final item, 7, is "Geographical Setting:" followed by three radio button options: Urban/Suburban, Rural, and Frontier.

Resources for Participants

- Mini-Didactics (live or archived)
- **Presenting Cases!!!**
- Availability of NW AETC ECHO Specialists 24/7
 - ramers@uw.edu, Office: 206.685.0599, Cell: 206.450.8266, Pager: 206.540.1980
- Additional resources via email
 - Hot topics
 - Articles of interest
- Website: www.nwaetcecho.org
 - Streaming archive of videos (additional topics!)
 - Necessary Forms
 - Contact info
 - Curriculum, Upcoming session information



Northwest AIDS Education and Training Center

Educating health care professionals to provide quality HIV care

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What We Do

Faculty and Staff

Curriculum and CME

Streaming Videos

Contact Us



Northwest AIDS Education and Training Center

Strengthening HIV care through integrated distance learning and clinical consultation.

In September 2011, the Northwest AIDS Education and Training Center (NW AETC) was one of three organizations funded to develop an AETC Telehealth Training Center Program. We looked to the [University of New Mexico's Project ECHO](#) as a framework for developing this HIV telehealth program, given its immense success in bringing high quality specialty care and training to rural and underserved areas. *NW AETC ECHO* aims to build the confidence and skills of rural, low-volume health care providers (HCP) and clinics in the Northwest region to provide high quality HIV care to patients. In line with the White House's National HIV/AIDS Strategy, this program will increase access to care and reduce HIV-related health disparities by supporting HCP to take on HIV care in their rural primary care clinic settings.

Using interactive video, *NW AETC ECHO* offers weekly online clinics, providing just-in-time clinical consultation between community providers and a multidisciplinary panel of HIV experts (Infectious Disease, Psychiatry, Family Medicine, Pharmacy, Nursing, Case management). In each clinic session, HIV experts provide a short clinical HIV update and in-depth case consultations initiated by community clinicians from their community-based panel of HIV patients. Using this model, *NW AETC ECHO* fosters mentoring relationships between the HIV expert panel and participating HCP, as well as developing a peer learning and support network in the region.

If interested, please contact:

Dr. Christian Ramers, NW AETC ECHO Medical Director
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or

Kent Unruh, PhD, ECHO Administrator, Informatics Specialist
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NW AETC ECHO Sites

