Project ECHO in the Cancer "Space": Key Informant Interviews

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Program: Project ECHO Cancer Initiative

- Five-year, $10 million grant from Bristol Meyers Squibb Foundation
  - Improving health equity and patient outcomes across cancer continuum.
  - Encourage replication of the ECHO model for cancer.

- Activities:
  - Training for ECHO replication – NM and South Africa
  - Cancer Collaborative
  - Technical Assistance ongoing, including evaluation
  - Relationship-building with key cancer organizations
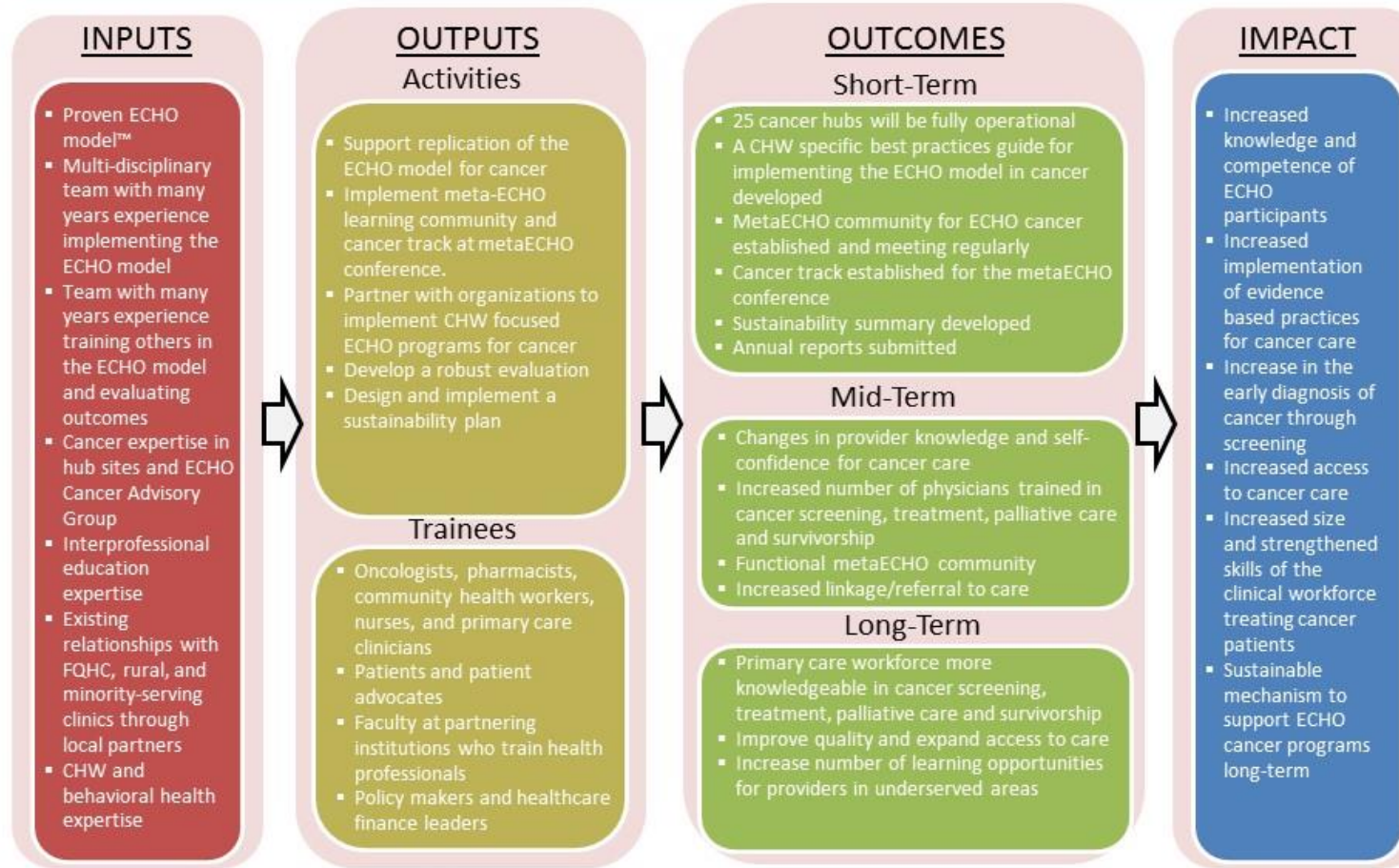
Evaluation Plan: Questions

- How effective is the ECHO model at **improving access** to the continuum of cancer care? …at generating a **paradigm shift** toward **best-practice cancer care**?

- Is the ECHO model having an impact on **rural and underserved communities** in this space?

- What are the **barriers and facilitators** of ECHO **replication** in the cancer space?

- Sub themes:
  - Leveraging community resources, building community networks
  - Culturally competent care
  - Program sustainability
  - Collaboration – participatory/empowerment evaluation

Evaluation Plan: Logic Model

Reducing Disparities in Cancer Care: Project ECHO

Goals: (1) increase access to best practice cancer care for vulnerable populations in the United States and around the world; (2) expand the ECHO footprint in cancer both domestically and internationally to overcome some of the health disparities in cancer care; and (3) for the ECHO model to become part of the fabric of cancer prevention, screening, treatment, palliation and survivorship in the U.S..

INPUTS

- Proven ECHO model™
- Multi-disciplinary team with many years experience implementing the ECHO model
- Team with many years experience training others in the ECHO model and evaluating outcomes
- Cancer expertise in hub sites and ECHO Cancer Advisory Group
- Interprofessional education expertise
- Existing relationships with FQHC, rural, and minority-serving clinics through local partners
- CHW and behavioral health expertise

OUTPUTS

Activities

- Support replication of the ECHO model for cancer
- Implement meta-ECHO learning community and cancer track at metaECHO conference.
- Partner with organizations to implement CHW focused ECHO programs for cancer
- Develop a robust evaluation
- Design and implement a sustainability plan

Trainees

- Oncologists, pharmacists, community health workers, nurses, and primary care clinicians
- Patients and patient advocates
- Faculty at partnering institutions who train health professionals
- Policy makers and healthcare finance leaders

OUTCOMES

Short-Term

- 25 cancer hubs will be fully operational
- A CHW specific best practices guide for implementing the ECHO model in cancer developed
- MetaECHO community for ECHO cancer established and meeting regularly
- Cancer track established for the metaECHO conference
- Sustainability summary developed
- Annual reports submitted

Mid-Term

- Changes in provider knowledge and self-confidence for cancer care
- Increased number of physicians trained in cancer screening, treatment, palliative care and survivorship
- Functional metaECHO community
- Increased linkage/referral to care

Long-Term

- Primary care workforce more knowledgeable in cancer screening, treatment, palliative care and survivorship
- Improve quality and expand access to care
- Increase number of learning opportunities for providers in underserved areas

IMPACT

- Increased knowledge and competence of ECHO participants
- Increased implementation of evidence based practices for cancer care
- Increase in the early diagnosis of cancer through screening
- Increased access to cancer care
- Increased size and strengthened skills of the clinical workforce treating cancer patients
- Sustainable mechanism to support ECHO cancer programs long-term

Rapid Cycle Improvement and Evaluation of Program to Identify and Implement Best Practices

Evaluation: 5 buckets

- Track movement data (internal ECHO data systems)

- Hub and spoke surveys to assess impact

- Patient stories/vignettes

- Track changes in screening rates via UDS metrics (HRSA – public)

- **Key informant interviews**

ECHO in the Cancer Space: 3 Groups targeted for key informant interviews

1

(Current and New)

2 Spokes
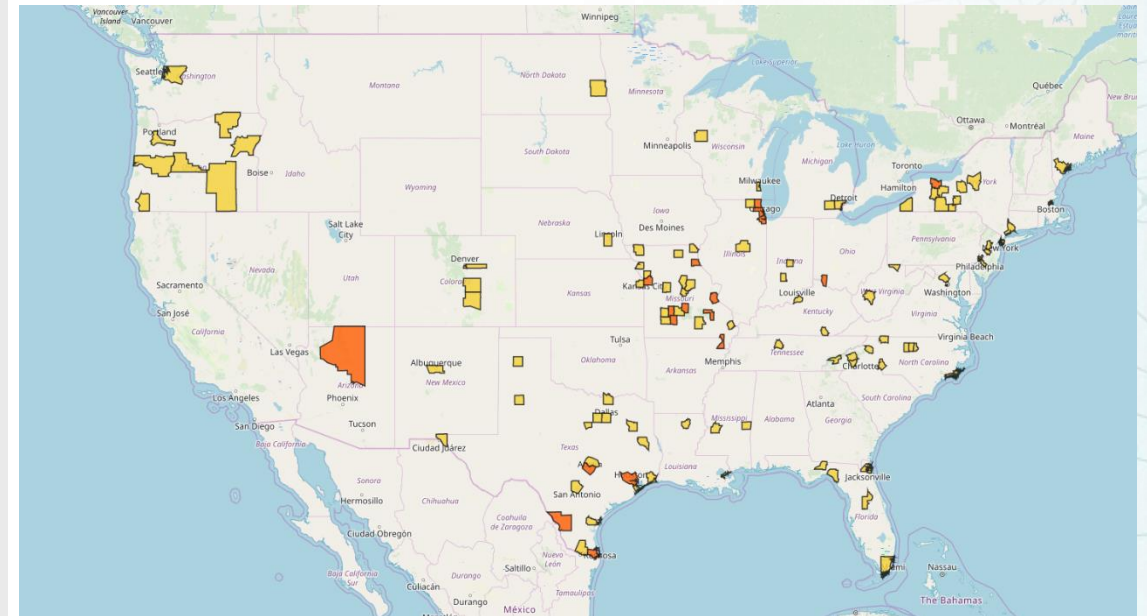
(CHWs, providers, nurses, medical assistants, etc.)

3 Leaders: Key cancer-focused organizations (Cancer Advisory Board) and policy-makers

Key informant interviews process

- Three years, 2019-2021

- Semi-structured interviews with "key" individuals with unique perspectives to help us understand cancer space.

- Contracted with Community Engagement Research Core (CERC) within UNMHSC to conduct interviews and help w/ analysis

- Pain points:
  - Getting community buy-in for evaluation process
  - Feedback/testing of interview guides.
  - We identify hubs and leaders – need hub help to identify spokes
  - Collaboration – how much is enough given limited resources?