

Background

Baycrest Health Sciences, in partnership with North East Specialized Geriatric Centre, has been leading “**Project ECHO Care of the Elderly**” (ECHO COE), building the capacity of over 100 primary care providers (PCPs) and community partners since January 2018.

Goals:

- Equip PCPs to provide more comprehensive care for their complex aging patients
- Utilize existing telehealth and tele-education services to facilitate geriatrics training to PCPs across Ontario, particularly in remote, underserved areas
- Meet the demand for care of Ontario’s aging population by expanding the reach of our expertise in care of the elderly

About ECHO COE

- Cycles run either 10 or 15 weeks with closed participation
- Day and time varies by cycle
- Sessions are 60-90 minutes
- Minimum 40 sessions per year

Topics are all geriatric focused and were chosen based on needs assessments of our learning partners (spokes). Topics include:

- | | | |
|-------------------------|--------------------------|--------------------|
| • Dementia | • Advanced care planning | • Bone health |
| • Responsive behaviours | • Mood disorders | • Pain |
| • Incontinence | • Sleep disorders | • Delirium |
| • Driving | • Polypharmacy | • Medical cannabis |
| • Frailty | • Movement disorders | • Falls |
| | | • Nutrition |

Each cycle includes flex sessions so learners can identify topics of interest that arise during the first few weeks of the cycle.

ECHO COE Team

What makes us unique? Our **Dual Hub Collaboration**. We share responsibility for facilitation, project coordination & management, recruitment of spokes and research across both Hubs. Partnership with NESGC helps increase exposure of ECHO COE across North Eastern Ontario



Image 1: Baycrest Hub Team



Image 2: NESGC Sudbury Hub Team

<https://baycrest.echoontario.ca/>

Impact

Pilot Findings

- Overall, 26/34 registrants attended at least 6/10 sessions. Analysis included these 26 participants
- Both physicians and other health professionals showed a significant increase in self-efficacy ($p=0.001$ and $p=0.009$, respectively) (Fig. 1, Fig 2)

- Change in knowledge was noted for both groups with larger changes among the physicians compared to other health professionals

Cycle 1 Findings

- Both physicians and other health professionals showed an increase in knowledge (statistically significant) and self-efficacy (statistically significant for non-physicians) (Fig. 3, Fig. 4)
- Statistically significant improvements were noted in comfort level working with older adults
- Overall, participants were satisfied with the program (4.4 / 5)

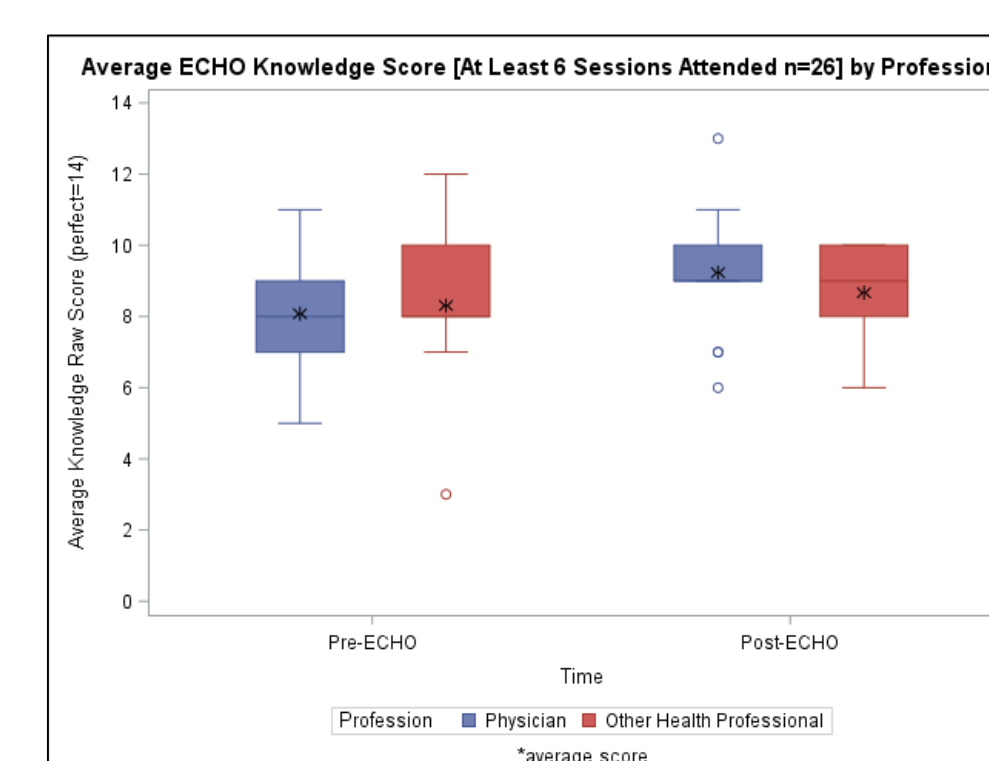


Figure 1. Pre-Post Knowledge Scores for Pilot Participants; n=26

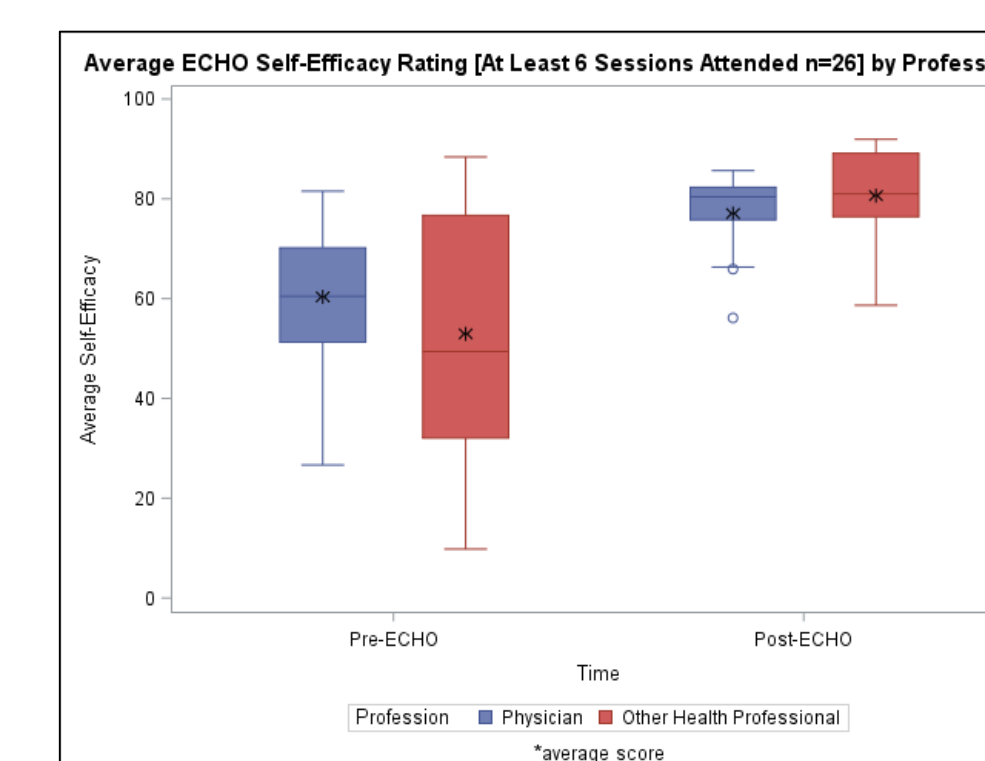


Figure 2. Pre-Post Self-Efficacy Scores for Pilot Participants by Profession; n=26; Scale (0-100) where 0=Not Confident, 50=Somewhat Confident, and 100=Very Confident

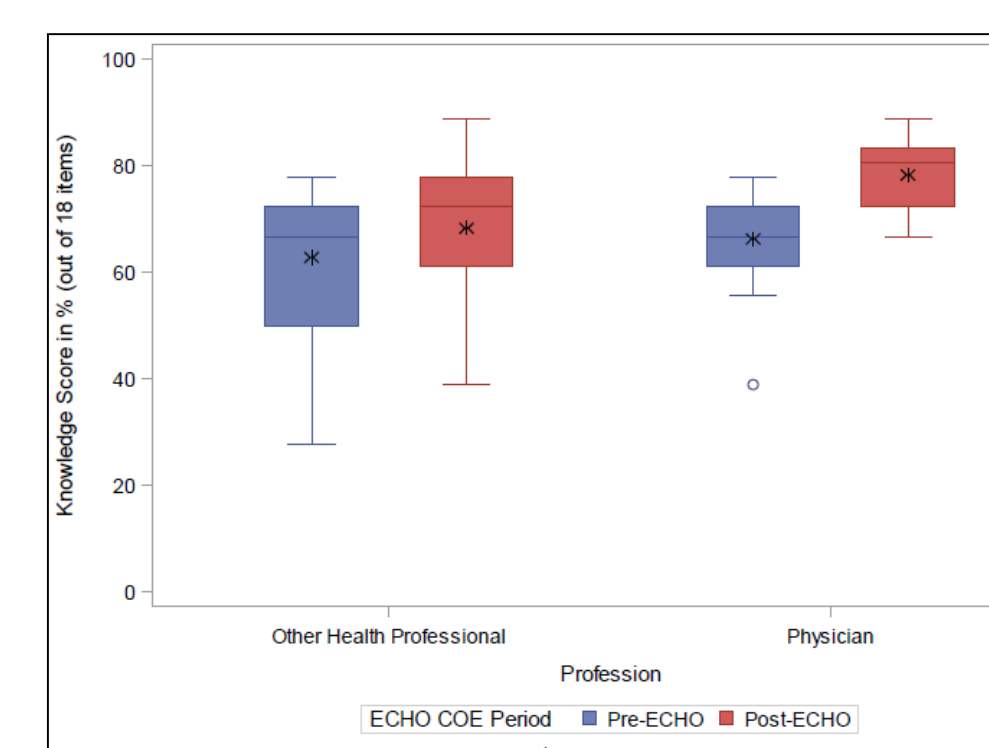


Figure 3. Pre-Post Knowledge Scores by Profession for Cycle 1 Participants; n=42

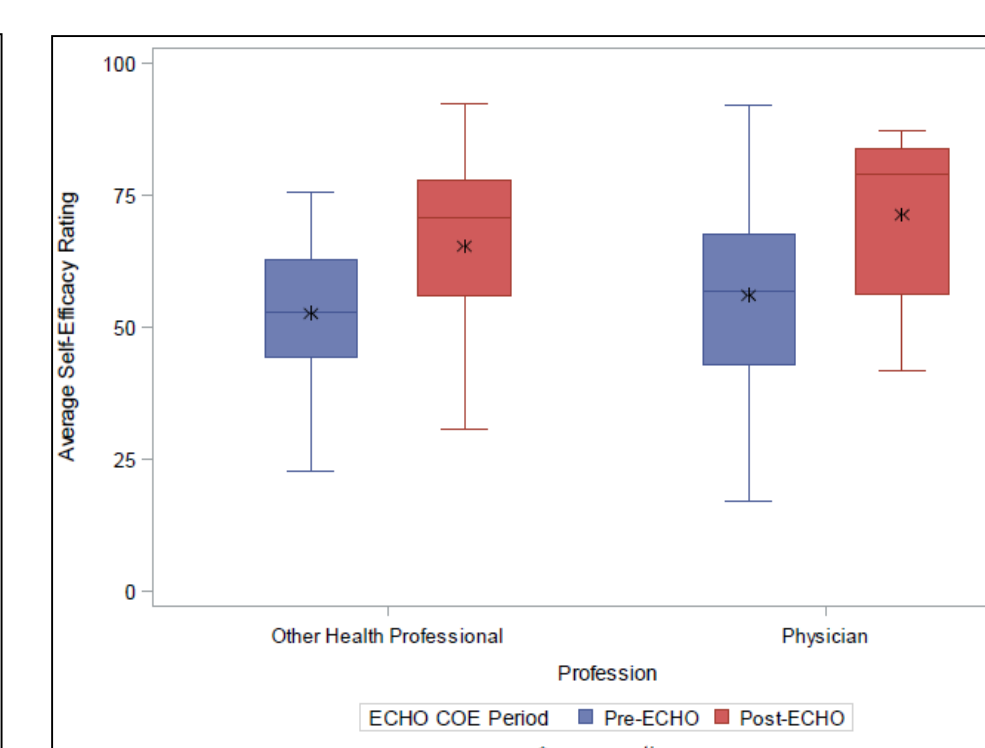


Figure 4. Pre-Post Self-Efficacy Scores for Cycle 1 Participants by Profession; n=42; Scale (0-100) where 0=Not Confident, 50=Somewhat Confident, and 100=Very Confident

What Our Learning Partners Say....

“...it is helpful to hear from other professionals what their knowledge [is] about certain or particular aspects of the different topics”
 “...really enjoyed collaborating to come up with solutions for people or things to try”
 “I really like the cases. It sort of puts everything into perspective so the didactic, sometimes you forget some of the information...and then when you put it actually with a patient and you can actually visualize how we would treat that patient”

