

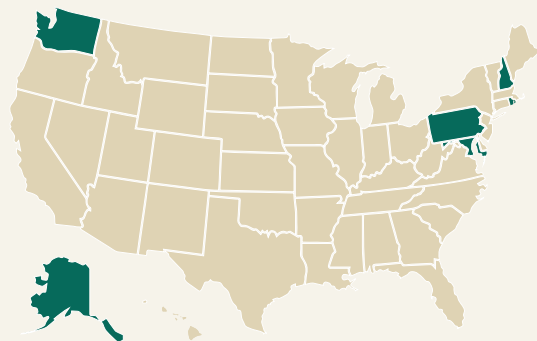
Strategy Spotlight

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Supporting employers using the Project Extension for Community Healthcare Outcomes (ECHO) model

Study background

This strategy spotlight is part of a study funded by the U.S. Department of Labor's Chief Evaluation Office, and conducted in collaboration with the Office of Policy Development and Research within the Employment and Training Administration (ETA). The study explores the implementation of the National Health Emergency (NHE) Dislocated Worker Demonstration Grants to Address the Opioid crisis, which six states received in 2018. These grants, funded by ETA's Office of Workforce Investment (OWI), encouraged states to test innovative approaches to address the economic and workforce-related impacts of the opioid epidemic.



More information about the evaluation of the NHE demonstration grants including a literature review and final report from the implementation study is available here: <https://www.dol.gov/agencies/oasp/evaluation/topic-areas/substance-use-disorder-work>

Employers seeking to have recovery-friendly workplaces might have questions about how to better support their employees who are recovering from a substance-use disorder. Small- and medium-sized employers, in particular, might not have sufficient capacity or expertise in human resources to address potential issues that can arise. This strategy spotlight highlights an innovative effort, funded through a National Health Emergency (NHE) Dislocated Worker Demonstration Grant to Address the Opioid Crisis, to provide Pennsylvania employers with free expert advice on how to address potential issues and support their employees in recovery.

Implementation context

For the NHE grant, the Pennsylvania Department of Labor and Industry (L&I) partnered with the Pennsylvania State College of Medicine (Penn State) to create a [Project Extension for Community Healthcare Outcomes \(ECHO\)](#) series for employers. The ECHO model, which originated in the medical field, provides virtual clinics led by expert specialist teams to discuss real-world health cases with community medical providers in underserved areas and work together to develop solutions.¹

Key intervention components

Using this model, Pennsylvania created a Project ECHO series through which an interdisciplinary expert team provided “employers and all levels of staff working with employees in an administrative capacity with the knowledge, resources and

best practices to support employees in recovery.”² Typically, each virtual session included a team of experts—a human resources expert, a representative from a drug court, an employment lawyer, an addiction specialist social worker, and an addiction specialist physician—and began with an expert-led presentation on a topic of interest. This presentation was followed by a real-world case study that had been volunteered by one of the employers and a group discussion of the case.

Organizing the sessions. L&I and the Penn State Project ECHO coordinator, who manages other Project ECHO series, worked together to identify (1) the list of employers to engage, (2) the topics of interest and the expertise needed to address those topics, and (3) the timing of the sessions. The coordinator then organized the sessions, including securing presenters and marketing the session to employers. The series occurred over Zoom for 10 weeks, with sessions offered at two different times each week to maximize the participation of employers from across the state. They aimed to limit the size of each session to 15 to 20 participants to encourage discussion.

Reaching out to employers. Both partners were involved in reaching out to employers. L&I provided a list of employers for Penn State to contact about the series, and advertised the program via its electronic mailing list. The Penn State marketing team created a flyer with information about the series and emailed it to the list of potential participants with a registration link. Registration remained open for the entire series, enabling participants to register at any time and not obligating them to attend the full series. Depending on the level of response

Examples of Project ECHO sessions for employers

1. Medical marijuana in the workplace
 2. Employers' concerns with medication-assisted treatment
 3. Drug screens
 4. Human resource policies ▲
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“...one of the things that project ECHO [does] ... is ... take a place with a lot of resources, for example like an academic institution with a wealth of experts, and [reach] out to other smaller groups that don't always have access to all of those resources.”

—Interview respondent

for any given session, the Project ECHO marketing team conducted additional email outreach to the list of employers to increase participation, and, before each session, the Project ECHO coordinator sent an email reminder to registrants. Interview respondents estimated that about 20 employers participated each week, with many of the same employers participating each week.

Obtaining feedback. Following the session, the coordinator circulated a feedback survey and any materials presenters wished to share. Everyone who registered for the series received the materials, including those who had not attended the specific session to which the materials pertained. The feedback survey results indicated that employers appreciated gaining more insight into the experiences and needs of people in recovery, increasing their understanding of the topics covered, and developing a sense of camaraderie with other employers seeking to be recovery friendly. Employers received a certificate of completion after they completed the evaluation for each session.

Potential elements for success

Staff from L&I and Project ECHO perceived four factors as contributing to the success of the Project ECHO series for employers:



Strong partnership between L&I and the Project ECHO team. Each partner brought something to the partnership. L&I understood the needs of its intended audience, the

employers to engage, and potential presenters from the workforce field. The Project ECHO team was experienced in conducting Project ECHO series and offered medical expertise.



Recruiting the target population through multiple methods. Project ECHO staff reached out to the employers L&I identified. L&I also sent emails via its electronic mailing list to increase awareness of the program.



Identifying highly relevant and timely topics of discussion. The Project ECHO coordinator sought real-world cases and hypothetical situations that would lend themselves well to case study discussions among the panel of experts and attendees. The case studies allowed for rich discussion and gave experts the opportunity to answer participants' questions.



Bringing together experts from different fields to support employers. L&I and Project ECHO staff believed participants benefited from hearing from experts with wide-ranging knowledge about how to handle situations the participants had experienced or might experience in the future. Project ECHO staff perceived that this built participants' capacity to navigate potential issues.

“I think the group of experts really advocates for the employees and really cares about them.... [They have] the heart to educate everyone, and I think that the participants have been really receptive to that and have been really wanting to just be better for the people in their organization.”

—Interview respondent

Implementation challenges and strategies

Project ECHO staff reported the biggest challenge in adapting a Project ECHO for employers was in identifying topics and real-world cases to discuss. They perceived that participants felt intimidated suggesting case studies and presenting them to the group. Staff said sometimes participants also were concerned about privacy for the employee whose case they wanted to discuss, especially if their business was small and it could be possible to identify the individual. To overcome this challenge which Penn State had experienced in other series, the Project ECHO coordinator, rather than the employer, offered to present the case study.

L&I reported wanting to continue operating the Project ECHO session for employers after the NHE grant period, but that it would depend on its ability to secure funding. The state said it sought additional sources of funding, including having the local workforce boards look for funding and possibly using Workforce Innovation and Opportunity Act funding.

Read more

<https://ctsi.psu.edu/echo/past-topics/>

Endnotes

¹ University of New Mexico School of Medicine. “Project ECHO.” Available at <https://hsc.unm.edu/echo/>.

² Penn State Clinical and Translational Science Institute. “Penn State Project ECHO Past Topics.” Available at <https://ctsi.psu.edu/echo/past-topics/>.

This Spotlight is part of a four-part series on innovative employment and training interventions to address the opioid crisis:

- Embedding employment services in an opioid treatment facility
- Adapting work readiness training for people in recovery
- Registered apprenticeships for community health workers and dually certified peer recovery specialist-community health workers
- Supporting employers using the Project Extension for Community Healthcare Outcomes (ECHO) model ▲



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