

# UNM Project ECHO

---

## **Sanjeev Arora, MD, MACP**

Distinguished Professor of Medicine (Gastroenterology/Hepatology)  
Director of Project ECHO  
Department of Medicine, University of New Mexico Health Sciences Center

## **Matthew Bouchonville, MD, CDCES**

Professor of Medicine (Endocrinology)  
Associate Director of Project ECHO  
Department of Medicine, University of New Mexico Health Sciences Center

## **Karla Thornton, MD, MPH**

Professor of Medicine (Infectious Diseases)  
Director of Project ECHO  
Department of Medicine, University of New Mexico Health Sciences Center

## **Haven Scogin**

Deputy Director, Reentry Division  
New Mexico Corrections Department

**FIFTH MEETING  
of the  
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**August 26-28, 2024  
New Mexico Institute of Mining and Technology  
Raul and Shari Deju University House  
1001 Lopezville Road  
Socorro**

**At ECHO, our mission is to democratize implementation of best practices for health care and education to underserved people all over the world.**



**Moving Knowledge, Not People**

# Founding Goals of Project ECHO

Develop capacity to safely and effectively treat Hepatitis-C (HCV) in all areas of New Mexico and to monitor outcomes.

Develop a model to treat complex diseases in rural locations and developing countries.

# The ECHO Model



**Use technology to leverage scarce resources**



**Apply case-based learning to master complexity**



**Share best practices to reduce disparities**



**Evaluate and monitor outcomes**





**Clustering of Poor Prognostic Factors in Heavy Patients**

Weight, kg (lb)	< 75.0 (1,643)	> 75.0 (1,643) <sup>†</sup>
Male, n (%)	360 (100.0)	1671 (100.0) <sup>†</sup>
Black Race, n (%)	70 (19.4)	310 (18.5) <sup>†</sup>
Age, years <sup>‡</sup>	41.0 ± 8.8	43.0 ± 8.8 <sup>†</sup>
BMI, kg/m <sup>2</sup>	31.0 ± 6.7	35.0 ± 6.8 <sup>†</sup>
Child-Pugh, n (%)	141 (39.2)	653 (39.1) <sup>†</sup>
Long-term MELD score <sup>§</sup>	5.00 ± 1.77	6.00 ± 1.68 <sup>†</sup>
MELD score, n (%)	302 (83.9)	1403 (83.9) <sup>†</sup>
Model for End-Stage Liver Disease score	302 (83.9)	1403 (83.9) <sup>†</sup>

† P < .001. <sup>‡</sup> P < .001. <sup>§</sup> P < .001. <sup>||</sup> P < .001. <sup>¶</sup> P < .001. <sup>‡</sup> P < .001. <sup>§</sup> P < .001. <sup>||</sup> P < .001. <sup>¶</sup> P < .001. <sup>‡</sup> P < .001. <sup>§</sup> P < .001. <sup>||</sup> P < .001. <sup>¶</sup> P < .001.

**Clustering of Poor Prognostic Factors in Heavy Patients**

Weight, kg (lb)	< 75.0 (1,643)	> 75.0 (1,643) <sup>†</sup>
Male, n (%)	360 (100.0)	1671 (100.0) <sup>†</sup>
Black Race, n (%)	70 (19.4)	310 (18.5) <sup>†</sup>
Age, years <sup>‡</sup>	41.0 ± 8.8	43.0 ± 8.8 <sup>†</sup>
BMI, kg/m <sup>2</sup>	31.0 ± 6.7	35.0 ± 6.8 <sup>†</sup>
Child-Pugh, n (%)	141 (39.2)	653 (39.1) <sup>†</sup>
Long-term MELD score <sup>§</sup>	5.00 ± 1.77	6.00 ± 1.68 <sup>†</sup>
MELD score, n (%)	302 (83.9)	1403 (83.9) <sup>†</sup>
Model for End-Stage Liver Disease score	302 (83.9)	1403 (83.9) <sup>†</sup>

DRUG INFORMATION HANDBOOK

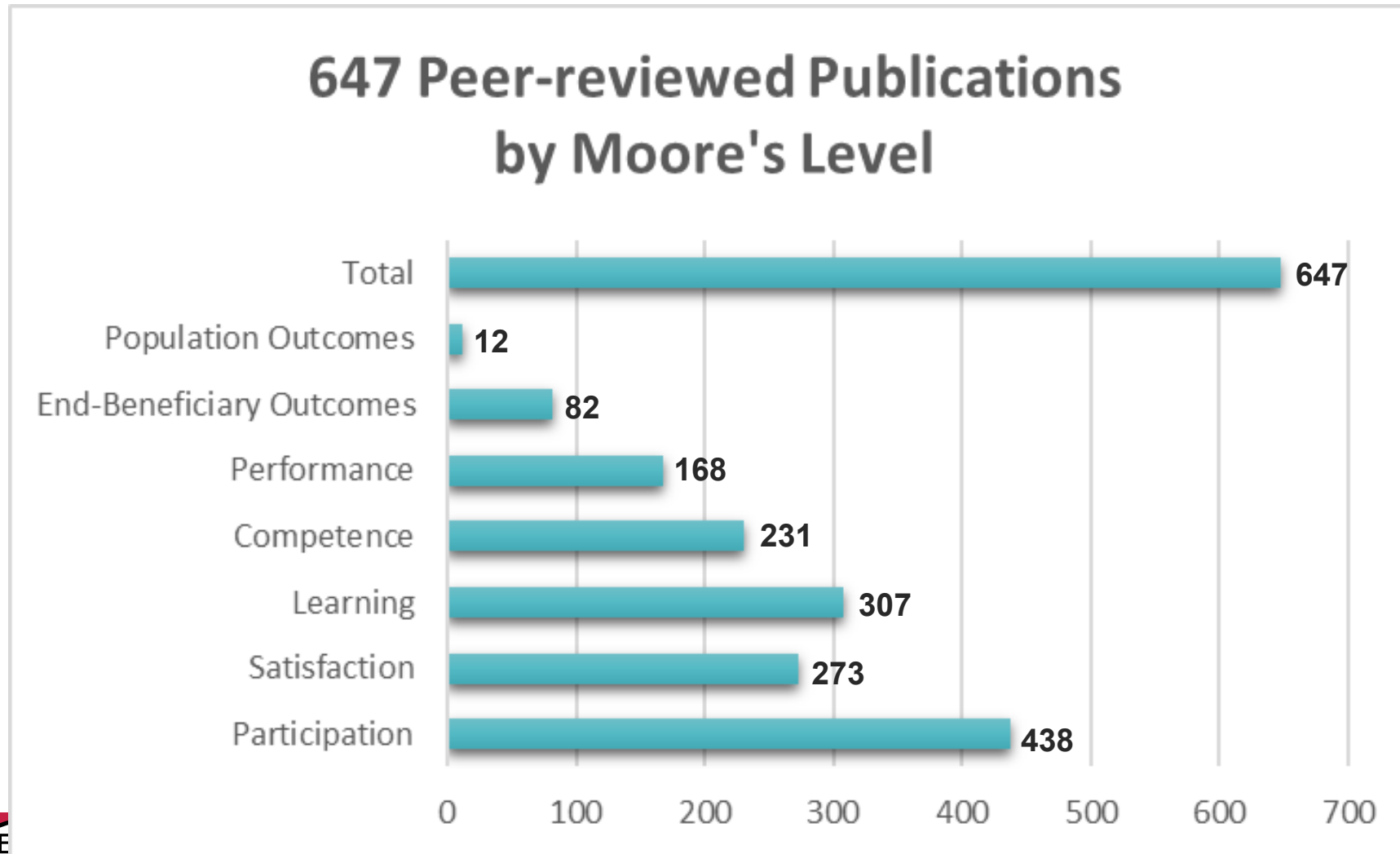


## **Results of the HCV Outcomes Study**

Outcomes of Treatment for Hepatitis C Virus Infection  
by Primary Care Providers



# Robust Evidence Shows ECHO Model's Effectiveness



# ECHO's Lasting Impact in New Mexico



65

**ACTIVE  
HEALTH CARE PROGRAMS  
SERVING NEW MEXICO**

+12

**NEW HEALTH ECHOS  
PLANNED TO LAUNCH  
BY JUNE 2025**



26

**ACTIVE  
EDUCATION PROGRAMS  
SERVING NEW MEXICO**

+6

**NEW EDUCATION ECHOS  
PLANNED TO LAUNCH BY  
JUNE 2025**

# New Mexico Project ECHO Health Programs

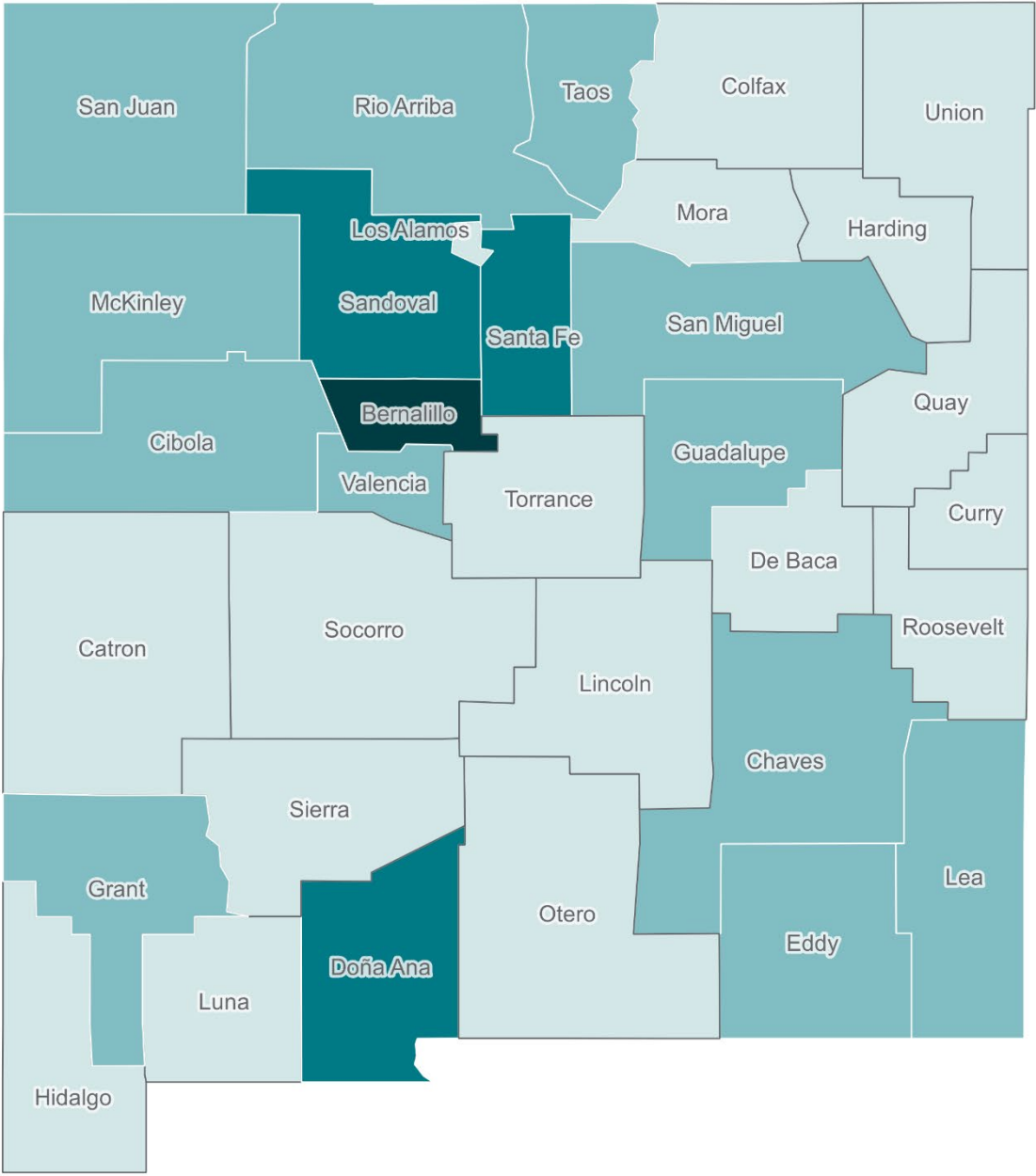
ACEs ECHO: Putting Faces to the ACEs	Alcohol Use and Mental Health ECHO Program	Bone Health ECHO Program	Care of the Older Patient ECHO Program	Child and Adolescent Mental Health ECHO (launch Feb 2025)	Colorectal Cancer Screening (NM-CRCS) ECHO Program	Community Health Worker/Peer Support Worker Opioid ECHO Program
Community Peer Education Project (CPEP)	Dermatology ECHO	ECHO for School Based Health Centers	Gender Affirming Care ECHO Program	General Pediatric ECHO Program	HRSA TTELP Clinical Communications ECHO Program	HRSA TTELP Infectious Disease Consult ECHO Program
HRSA TTELP Infectious Disease Office Hours ECHO Program	HRSA TTELP Post COVID Primary Care	Improving Perinatal Health ECHO Program	Maternal Child Health for CHWs	Medicaid Quality Improvement and Hospitalization Avoidance (aka Long Term Care)	Miners' Wellness	Neurology (launching Nov 2024)
New Mexico After Time Served Peer ECHO Council	New Mexico Artificial Intelligence in Medicine ECHO	New Mexico Community Hepatitis C (HCV Community)	New Mexico Corrections Hepatitis C (HCV Corrections)	New Mexico HCV Training for Prescribing Clinicians	New Mexico Palliative Care ECHO	New Mexico Peer Education Project (NMPEP)
New Mexico Probation and Parole Collaborative ECHO Program	NMCD Reentry and Education ECHO (launching Sept 2024)	NM Cancer Survivorship for Primary Care ECHO	NM Detention Centers Substance Use Treatment ECHO	Opioid Crisis and Pain Management	Palliative Care Champions ECHO Program	Reproductive Health ECHO Program
Rheumatology	SafeCare New Mexico ECHO Program	Street Medicine ECHO	Substance Use Disorder in Pregnancy	Supporting Child and Youth Mental Health ECHO Program (Inactive as of Feb 2024)	Syphilis ECHO Program (between cohorts- next launching Jan 2025)	UNM HPB ECHO Progra

# New Mexico Project ECHO Health Programs (cont'd.)

Diabetes Health Equity Community Health Workers	Diabetes Health Equity DSMES ECHO	Diabetes Health Equity SDOH ECHO	Endocrinology ECHO Program	Salud es Riqueza Diabetes Prevention Training ECHO Program	Behavioral Health Professional Workforce Resilience ECHO
Bureau of Indian Affairs and Office of Justice Services Resiliency ECHO	Climate Change and Human Health ECHO	HHS/ASPR Project ECHO Clinical Rounds: Patient Care, Clinical Operations, Workforce Training	Indian Health Services (IHS) HIV	Museums and Emerging Pathogens in the Americas (MEPA) ECHO	NM AETC HIV
Violence Prevention	Child Ready ECHO	CIT ECHO Knowledge Network	ECHO Autism: Advanced Diagnosis	ECHO Autism: STAT Early Diagnostic Model	Equity ECHO Series The Ethics of Doing Research with Communities: Advancing Anti-Racist Models
Integrative Cognitive Rehabilitation Psychotherapy ECHO	MOUD ECHO	Primary Care AHEC ECHO Clinic	Project ECHO for Lobo Littles	Psychiatric Mental Health Nurse Practitioner (PMHNP) ECHO Clinic	UNMCCC / NMCCA Community Oncology Working Group
	ECHO for Citizenship Educators	Downtown Public Safety ECHO	Nob Hill-University Public Safety ECHO	VAP Pro Bono Collaborative ECHO	

# Map of Attendance by first line professionals in ECHO Sessions Across the State

As of 7/31/2024, there have been **more than 260,000** cumulative attendances by at least **22,000** individuals.



NM Attendance by County

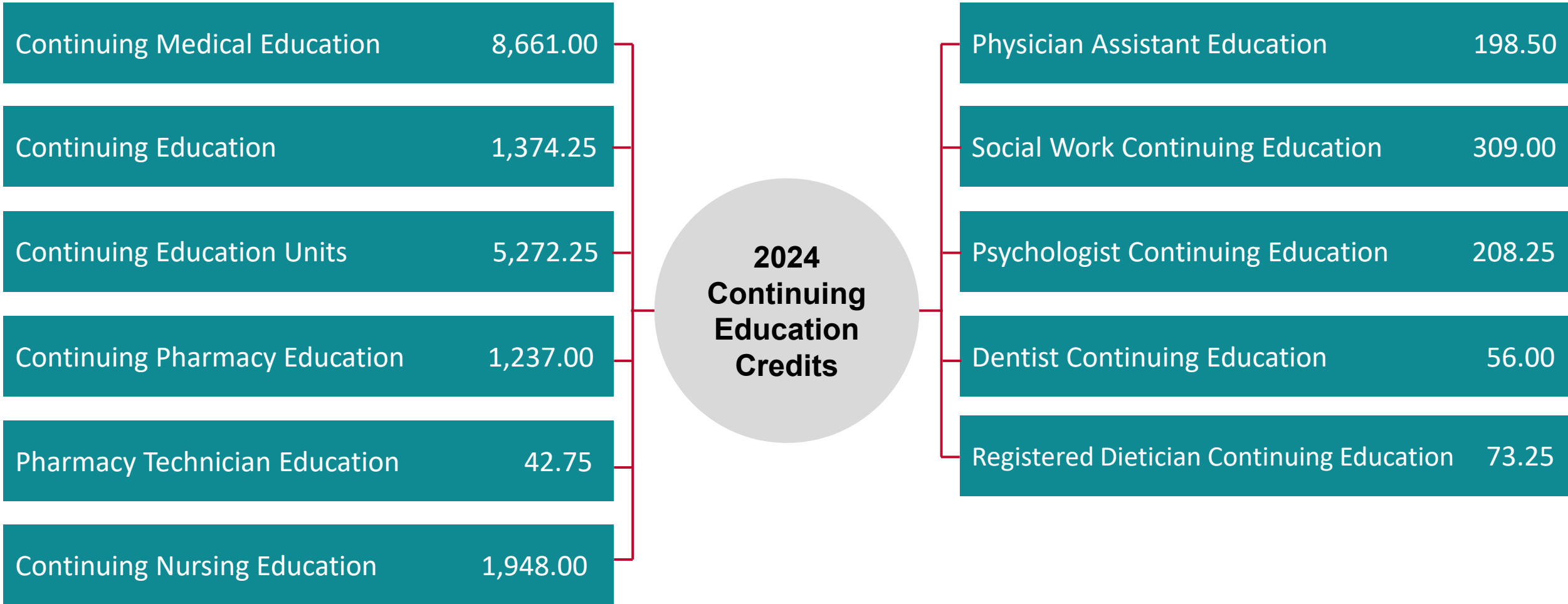
- 20 - 2019
- 2020 - 5891
- 5892 - 29819
- 127515

NM County	Total Attendance	Unique Attendees
Bernalillo	127,515	11,301
Catron	114	13
Chaves	4,120	397
Cibola	3,012	331
Colfax	1,267	139
Curry	1,028	151
De Baca	107	15
Dona Ana	13,894	1,172
Eddy	2,662	152
Grant	3,260	234
Guadalupe	3,744	200
Harding	20	3
Hidalgo	659	37
Lea	2,500	202
Lincoln	633	83
Los Alamos	376	66
Luna	508	96
McKinley	5,886	709
Mora	1,120	23
Otero	1,962	229
Quay	431	63
Rio Arriba	5,891	413
Roosevelt	2,019	85
San Juan	5,056	603
San Miguel	5,699	263
Sandoval	8,468	731
Santa Fe	29,819	1,564
Sierra	415	80
Socorro	844	170
Taos	3,063	329
Torrance	1,666	390
Union	256	36
Valencia	4,245	386

## New Mexico County Attendance by first line professionals in ECHO Sessions Across the State

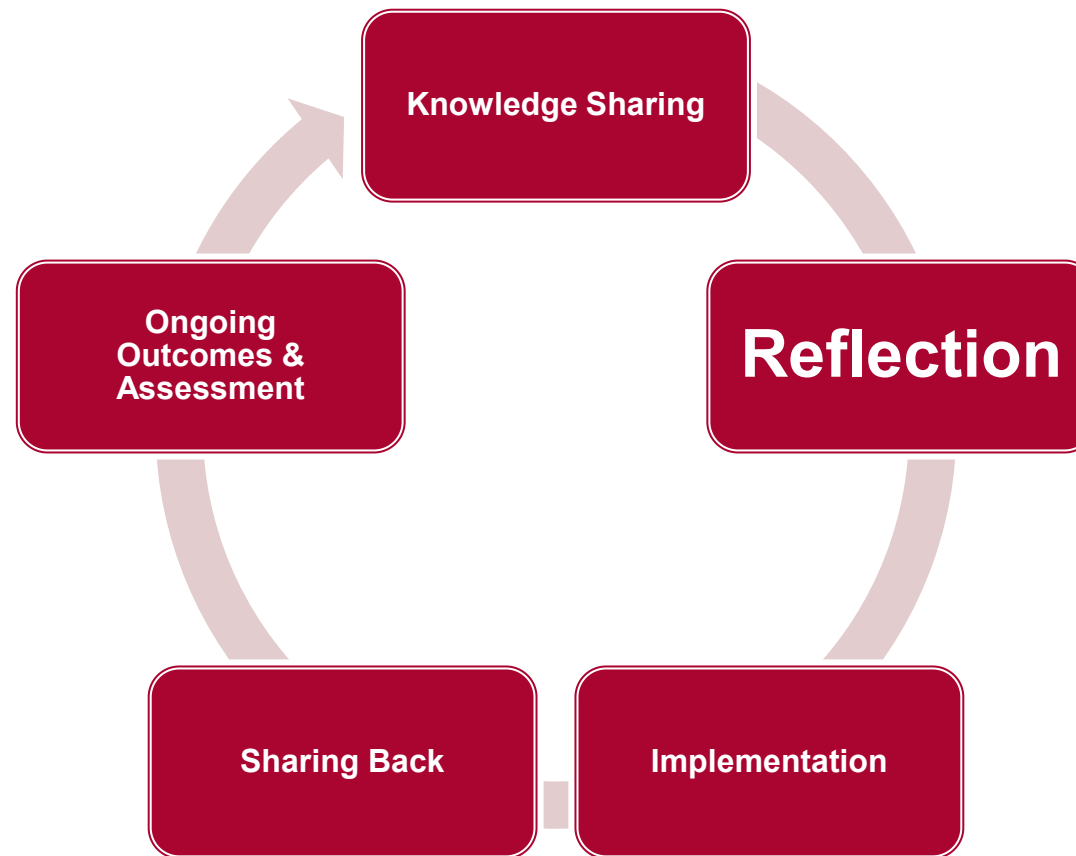
As of 7/31/2024, there have been **more than 260,000** cumulative attendances by at least **22,000** individuals.

# CME Credits for NM ECHO Programs Being Run Through the ECHO Institute



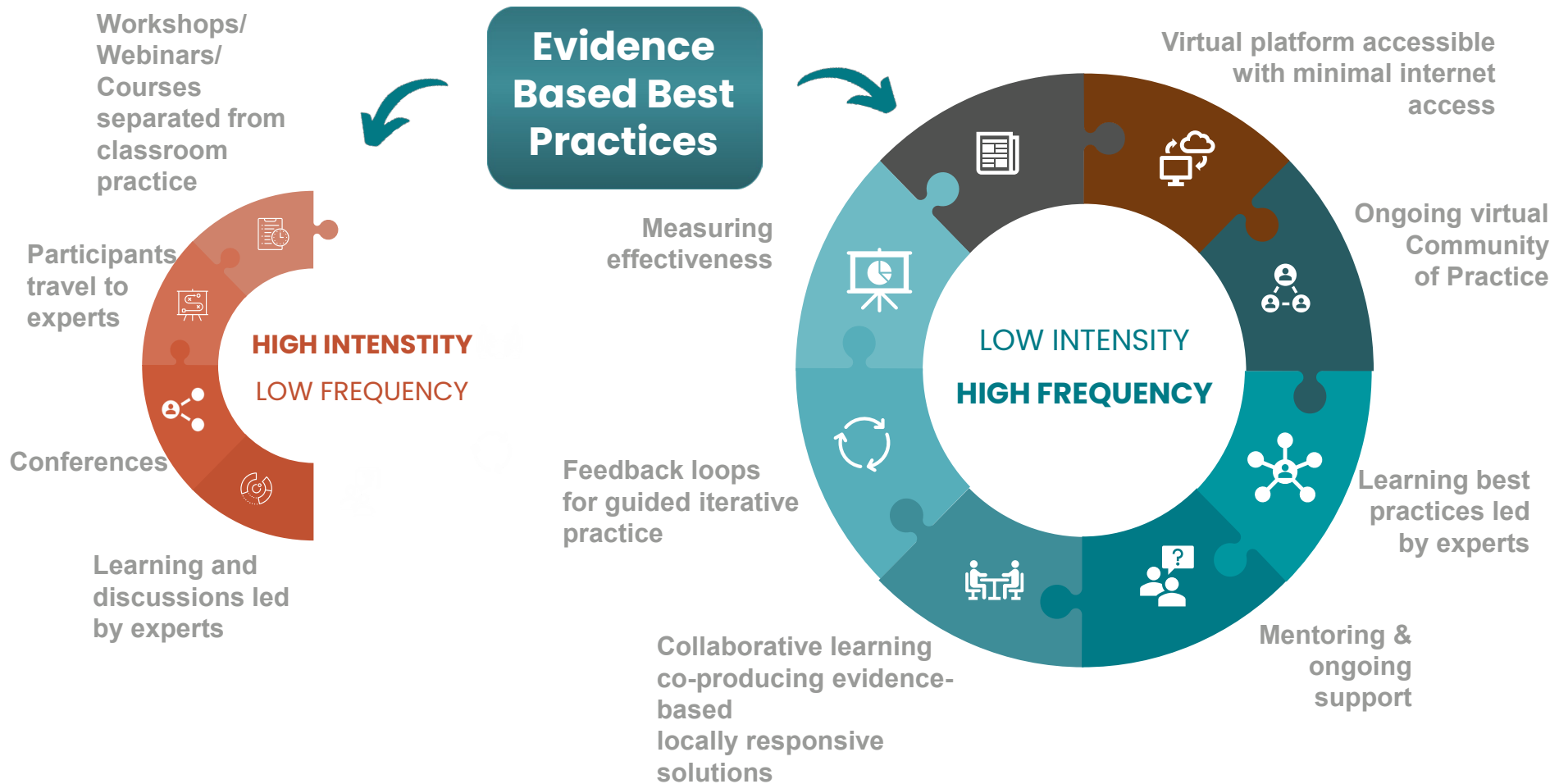
# ECHO Mentorship Builds Deep Implementation Expertise Over Time

## THE ECHO CONTINUOUS LEARNING LOOP





# Project ECHO Turns Traditional Training on its Head







# ECHO for Diabetes Care (Endo ECHO)

**Matthew Bouchonville, MD, CDCES**

Professor of Medicine (Endocrinology)

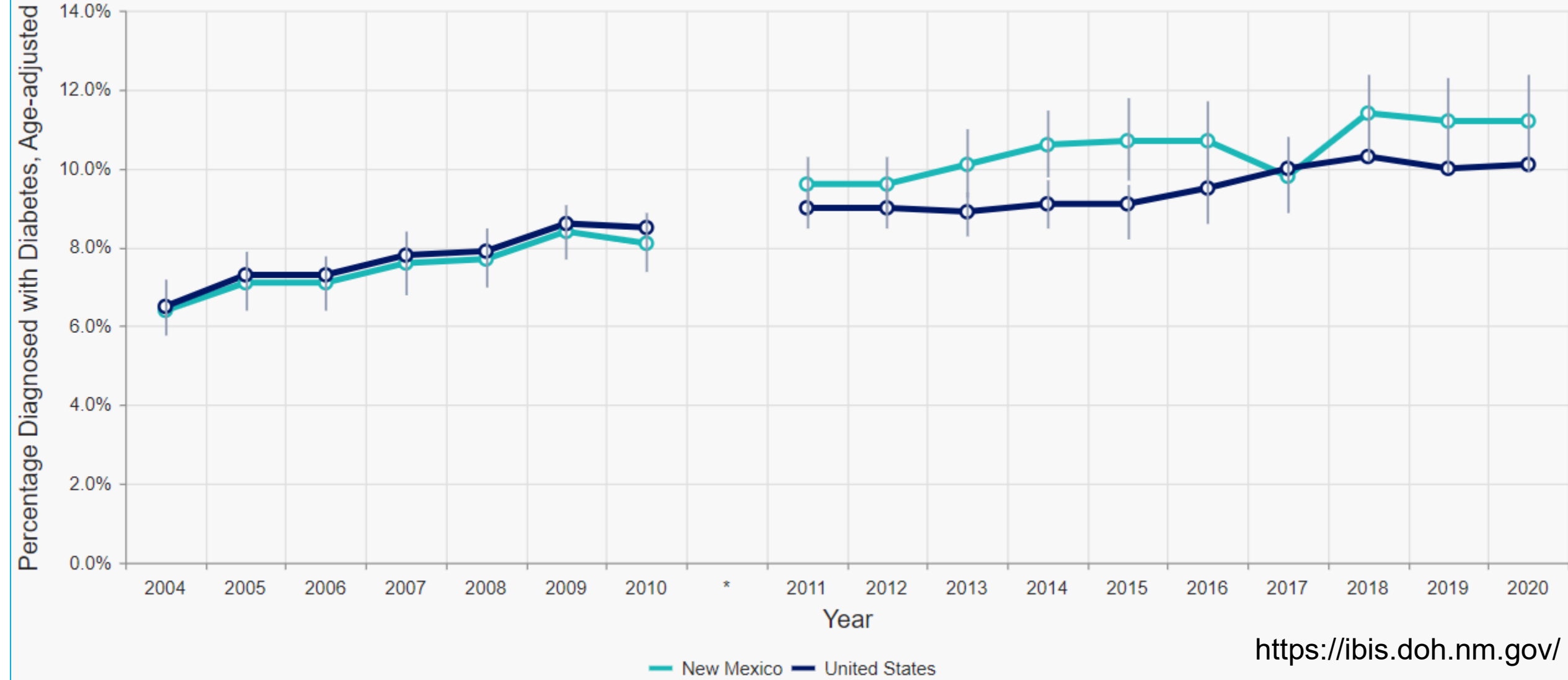
Associate Director of Project ECHO

Department of Medicine

University of New Mexico Health Sciences Center



Diagnosed Diabetes Prevalence by Year, New Mexico and U.S., 2004 to 2020



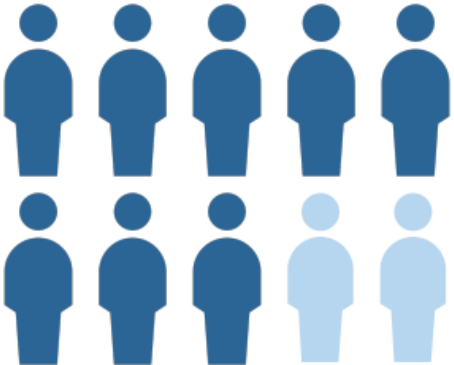
<https://ibis.doh.nm.gov/>

# How are we looking for the future?

## PREDIABETES



96 million American adults—**more than 1 in 3**—have prediabetes



**More than 8 in 10** adults with prediabetes **don't know they have it**

[https://www.cdc.gov/diabetes/images/library/socialmedia/DiabetesInTheUS\\_Print.pdf](https://www.cdc.gov/diabetes/images/library/socialmedia/DiabetesInTheUS_Print.pdf)

## The Burden of Diabetes in New Mexico

Diabetes is an epidemic in the United States. According to the Centers for Disease Control and Prevention (CDC), over 37 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in New Mexico.

### New Mexico's diabetes epidemic:

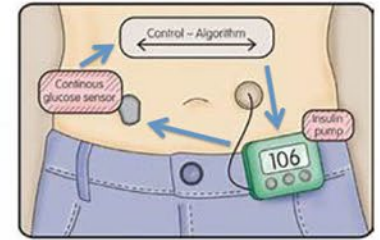
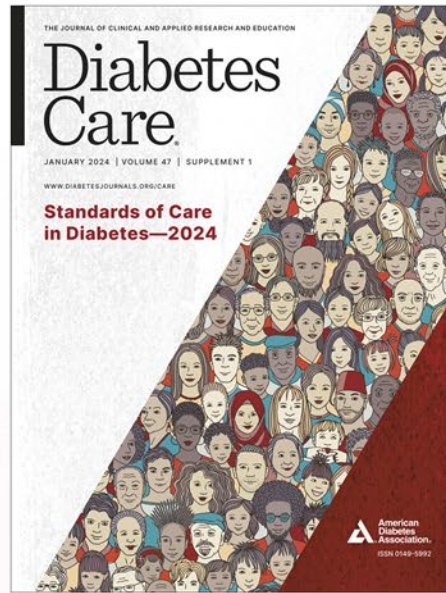
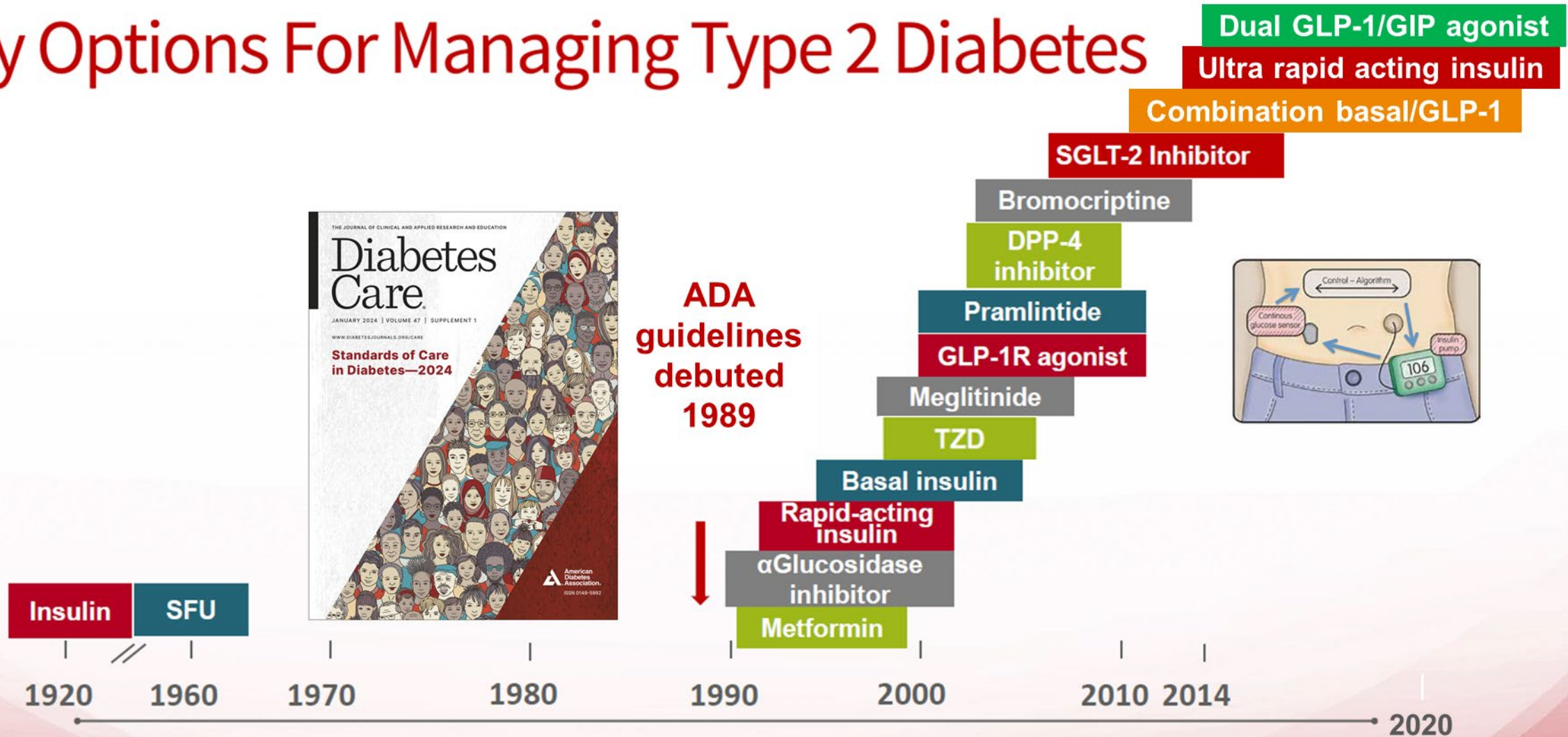
- Approximately **201,781 people in New Mexico**, or **12.3%** of the adult population, have **diagnosed diabetes**.
- An additional **53,000 people in New Mexico have diabetes but don't know it**, greatly increasing their health risk.
- There are **587,000 people in New Mexico**, **36.1%** of the adult population, who have **prediabetes** with blood glucose levels that are higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **12,469 people in New Mexico** are diagnosed with diabetes.

**Diagnosed diabetes costs an estimated \$2 billion in New Mexico each year.**

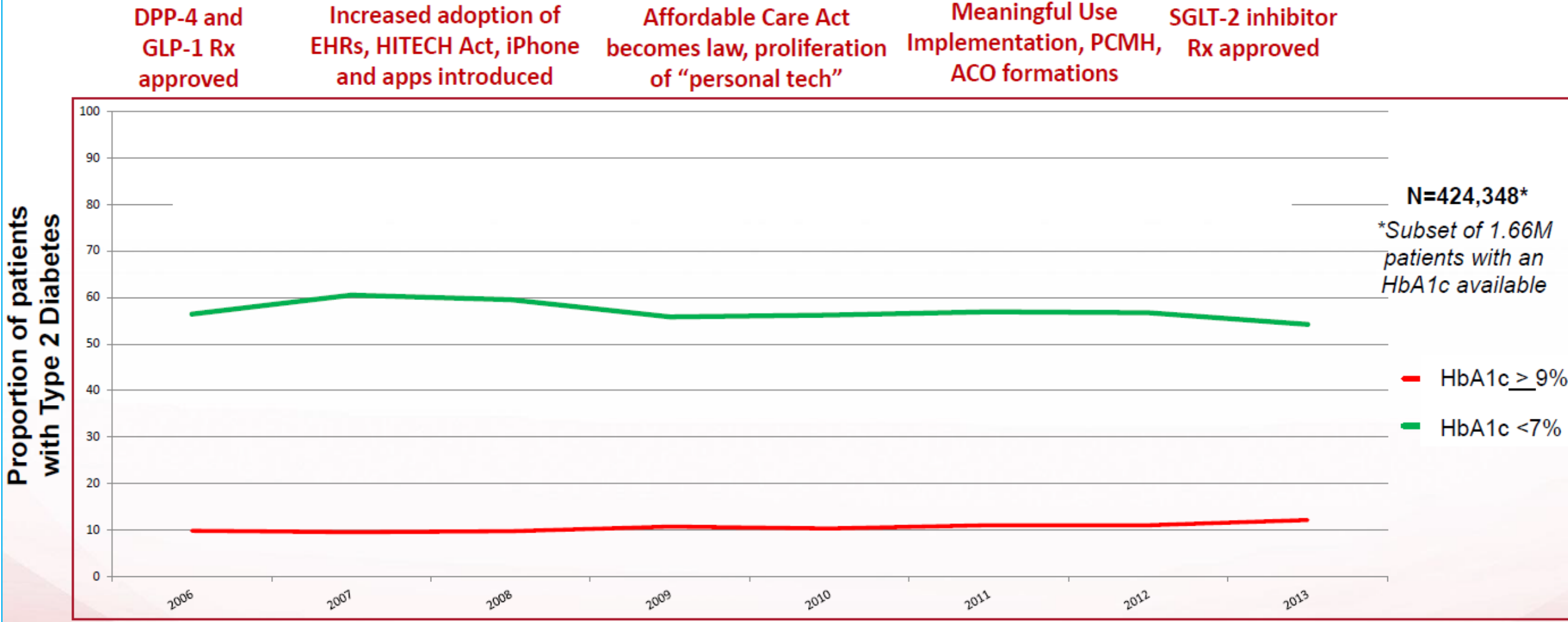
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness—and death.

Heart  
disease is  
the leading  
cause of  
death in NM

# Therapeutic Advances Over Past 20 Years: Many Options For Managing Type 2 Diabetes



# Advances in health technology, policy, and new therapies have *NOT* translated to improvements in diabetes *care quality*



Adapted from Lipska KJ, et al. *Diabetes Care*. doi: 10.2337/dc16-0985.



# Urban–rural disparities in diabetes-related mortality in the USA 1999–2019

Ofer Kobo<sup>1,2</sup>  • Harriette G. C. Van Spall<sup>3,4,5,6</sup>  • Mamas A. Mamas<sup>2,7,8</sup> 

Recent improvements in diabetes-related mortality in the US have been only observed in *urban* areas (mostly in females and older adults)

Rural-urban mortality gap has *tripled* over this period of time

Those with the highest diabetes-related mortality include American Indians and Blacks

*Diabetologia* 2022;65:2078–2083.

# Additional Disparities Affecting People With Diabetes in Rural Communities

Less likely to participate in diabetes self-management education

*J Public Health Manag Pract* 2022;28(1):E178–E184.

More likely to use the emergency room for diabetes-related reasons

*JAMA Netw Open* 2022;5(5):e2213867.

Less likely than urban patients to experience improvements in blood pressure or cholesterol

*Diabetes Care* 2021;44(8):1766–1773.

# Where does ECHO fit in?

90% of diabetes population is cared for by primary care providers, in part due to a national shortage of specialists



PCPs cite lack of confidence around guidelines and adequacy of training as barriers to providing optimal diabetes care

PCPs report that “case coaching” and multidisciplinary collaboration can overcome these barriers

*Mayo Clin Proc 2010; 85(12 Suppl): S3-S4.*

*BMC Fam Pract 2009;10:39.*

*Implement Sci 2009;4:41.*



## ECHO for diabetes (Endo ECHO)

Multidisciplinary/multidirectional knowledge exchange allows for a diversity of perspectives and integration of SDOH into personalized care plans which helps overcome therapeutic inertia



**Pediatric  
Endocrinologist**

**Nephrologist**

**Adult  
Endocrinologist**

**Psychiatrist**

**Community  
Health Worker**



**Multidisciplinary Team**

**Pharmacist**

**Social Worker**

**RN/CDCES**



# Endo ECHO Community Partners

- Primary care clinician (MD, DO, NP, PA)
- CHW





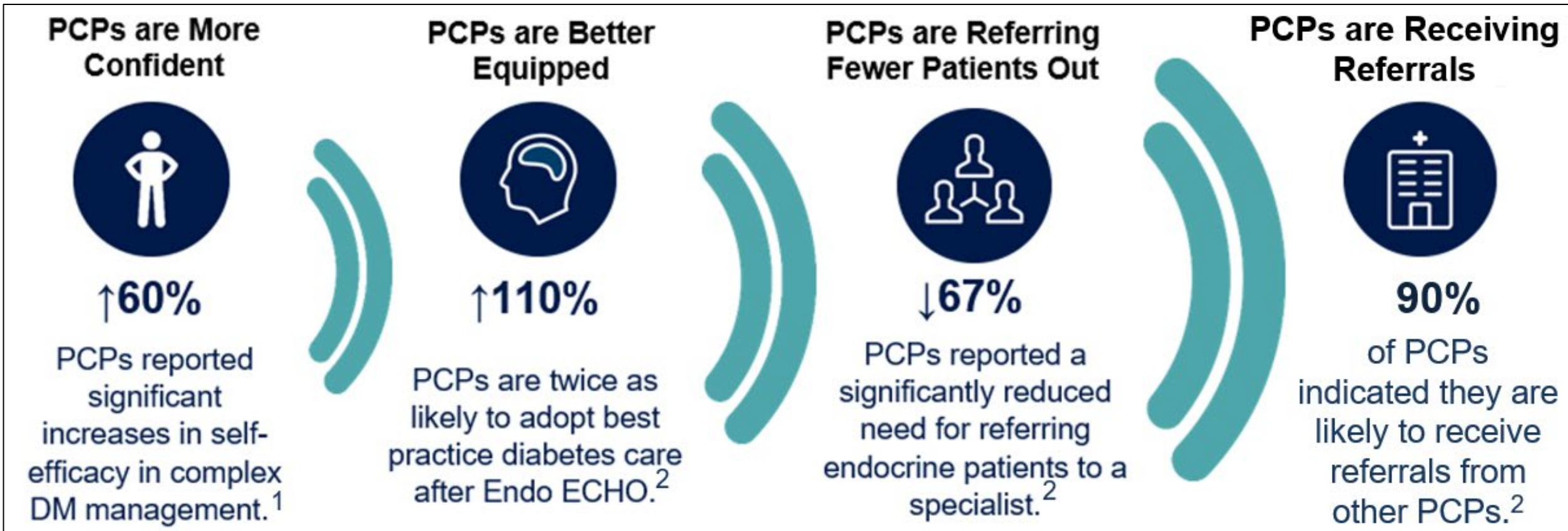
## Endo ECHO Attendance in NM

35K attendances (3.3K unique individuals)  
since launch

4.4K (856 unique individuals) in FY2024



# PCP-reported outcomes after Endo ECHO participation



1. *Endocr Pract* 2018;24(1):40-46.

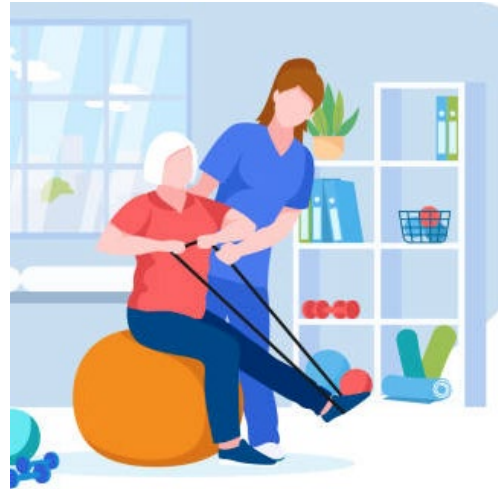
2. Endocrine Society Annual Meeting & Expo, Chicago, March, 2018.



# Improving Quality of Healthcare Delivery in Rural NM



Improved patient perception of self-confidence, well-being, and quality of care



Improved patient activation and self-care behaviors



Improved prescription-related quality metrics (Medicaid claims data)

ENDO Annual Meeting. New Orleans, LA, March, 2019.

*J Health Care Poor Underserved* 2020;31:1124-1133.

*Sci Diabetes Self Manag Care* 2023;49(3):239-246.

*Endocr Pract* 2020;26(10):1070-1076.

---

How are **clinical outcomes** of New Mexicans with diabetes affected by Endo ECHO?

# Rural New Mexicans with complex diabetes treated by ECHO-trained PCPs (n=856) versus specialists at the referral center (n=151)

- Predominantly Hispanic
- More likely to be Spanish speaking
- Clinically worse at baseline

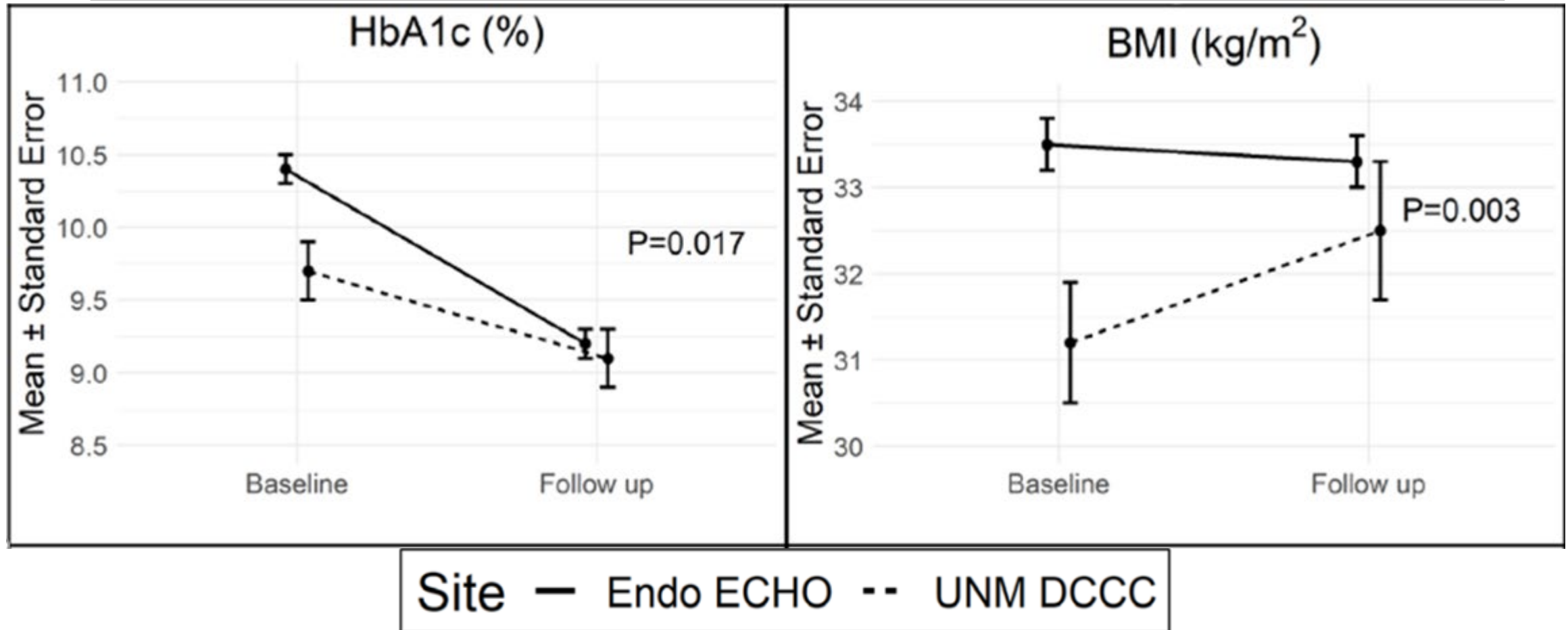
**Table 1. Baseline characteristics of Endo ECHO and DCCC cohorts**

Characteristic	Endo ECHO (n=856)	UNM Endocrinology (n=151)	p-value*
	Median [Q1, Q3] or n (%)	Median [Q1, Q3] or n (%)	
Age	55 [46, 63]	54 [41, 63]	0.113
Sex			0.198
Male	388 (45.3)	77 (51.0)	
Female	468 (54.7)	74 (49.0)	
Ethnicity			<0.001
Hispanic/Latino	508 (59.3)	69 (45.7)	
Not Hispanic/Latino	217 (25.4)	80 (53.0)	
Language			<0.001
English	732 (85.5)	146 (96.7)	
Spanish	122 (14.3)	4 (2.6)	
HbA1c	10.3 [8.9, 11.7]	9.0 [7.6, 11.2]	<0.001
BMI (kg/m <sup>2</sup> )	32 (28, 37)	30 [26, 36]	0.002
Blood Pressure			
Systolic (mmHg)	130 [119, 142]	128 [118, 140]	0.232
Diastolic (mmHg)	80 [71, 86]	71 [64, 79]	<0.001
Cholesterol			
Total	177 [149, 210]	-	-
LDL	93 [71, 120]	78 [59, 105]	<0.001
HDL	44 [36, 50]	-	-
Triglycerides	171 [110, 227]	-	-
Urine Albumin to Creatinine Ratio	27.8 [10.0, 110.8]	20.9 [8.3, 61.2]	0.308

\*Wilcoxon two-sample test for comparison of medians, or Chi-Square test for categorical variables.

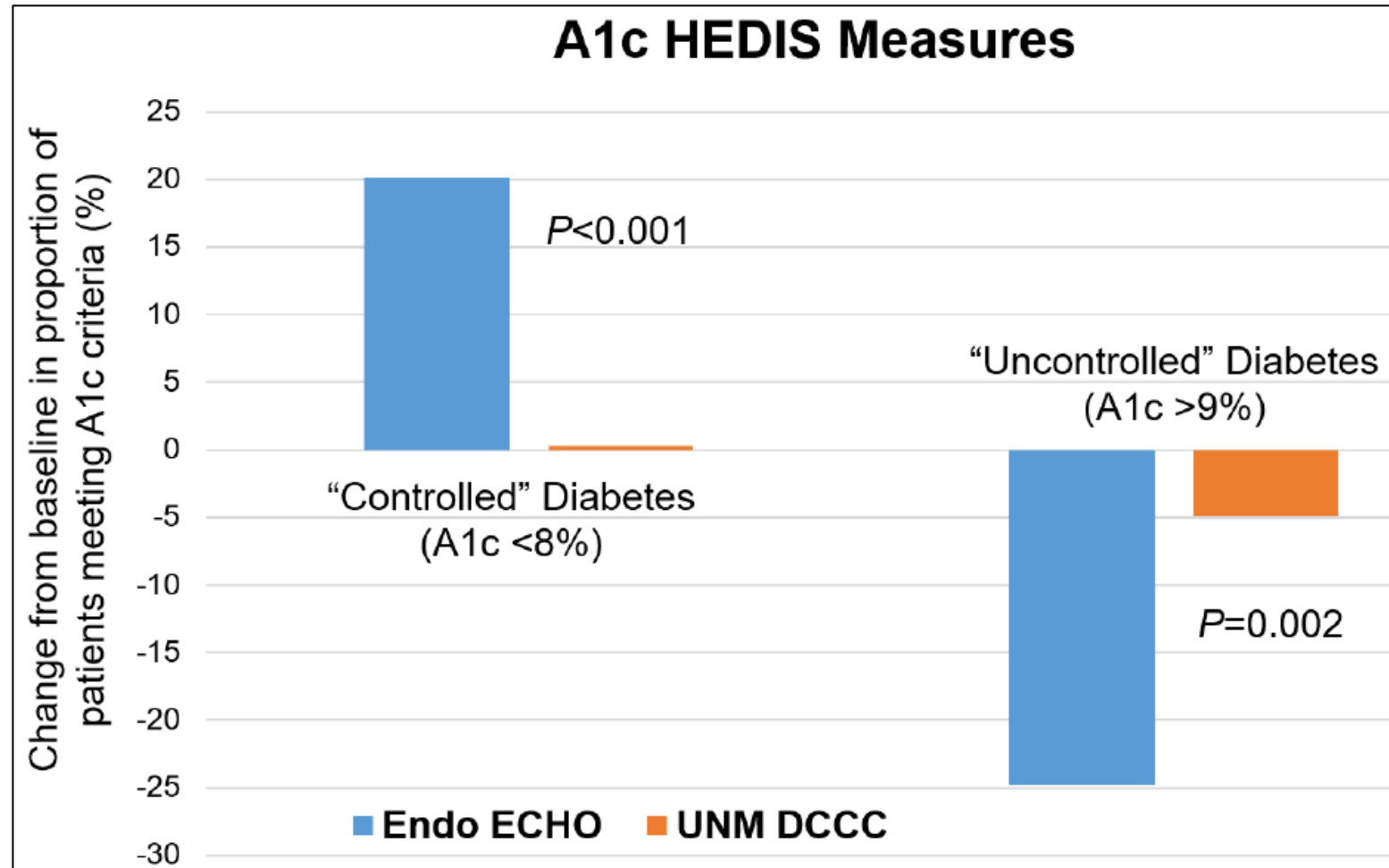
Missing values: ethnicity (133), language (13).

A1c dropped 1.2% in ECHO patients (significantly better than specialist cohort) while avoiding the weight gain typically associated with more aggressive insulin therapy



# Overcoming Therapeutic Inertia in NM

Endo ECHO participants were more likely than patients at the UNM specialist clinic to transition *from* “uncontrolled” and *to* “controlled”



---

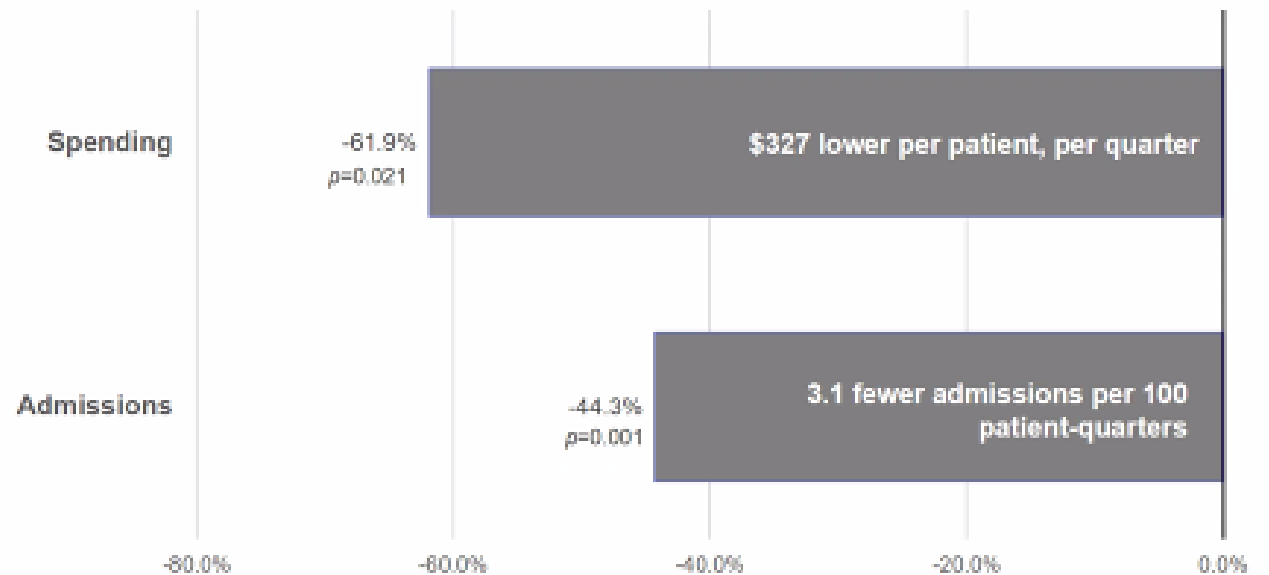
How do improved clinical outcomes affect  
healthcare spending?

# Rutgers Endo ECHO: Reduced Healthcare Spending

Endo ECHO participation is associated with a reduction in inpatient hospitalizations and spending among patients with DM

*Med Care 2022;60(7):481-487.*

Diabetic Patients of EndoECHO PCPs Experienced **Lower Hospital Admissions and Associated Spending** than Comparison Patients  
*Percent change for intervention group relative to comparison group*



Center for State Health Policy

---

Why did the rural ECHO patients do better than our patients at the specialty clinic?



Diabetes is a  
SELF-  
managed  
condition and  
SUCCESS is  
unlikely  
without  
PATIENT  
ACTIVATION



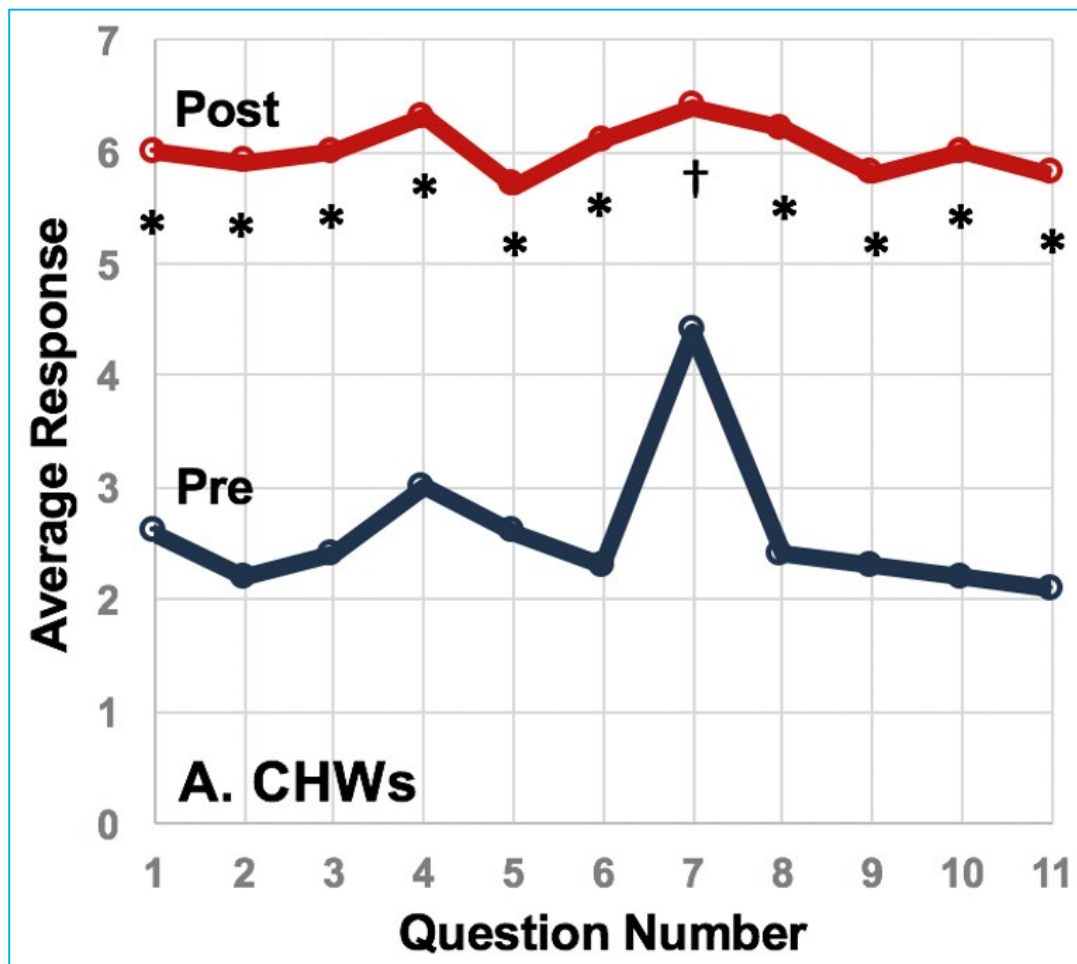
"I feel a lot more confident in the care I provide because I have this backup."



"It makes me more confident with my clinical care, and it makes me feel more comfortable with the care I'm providing to my patients."



# CHWs more skilled after participating in Endo ECHO



- More than 100% increase in self-efficacy around complex diabetes management
- New Mexico Department of Health CHW Certification obtained after participation

*Endocr Pract 2018;24:40-46.*

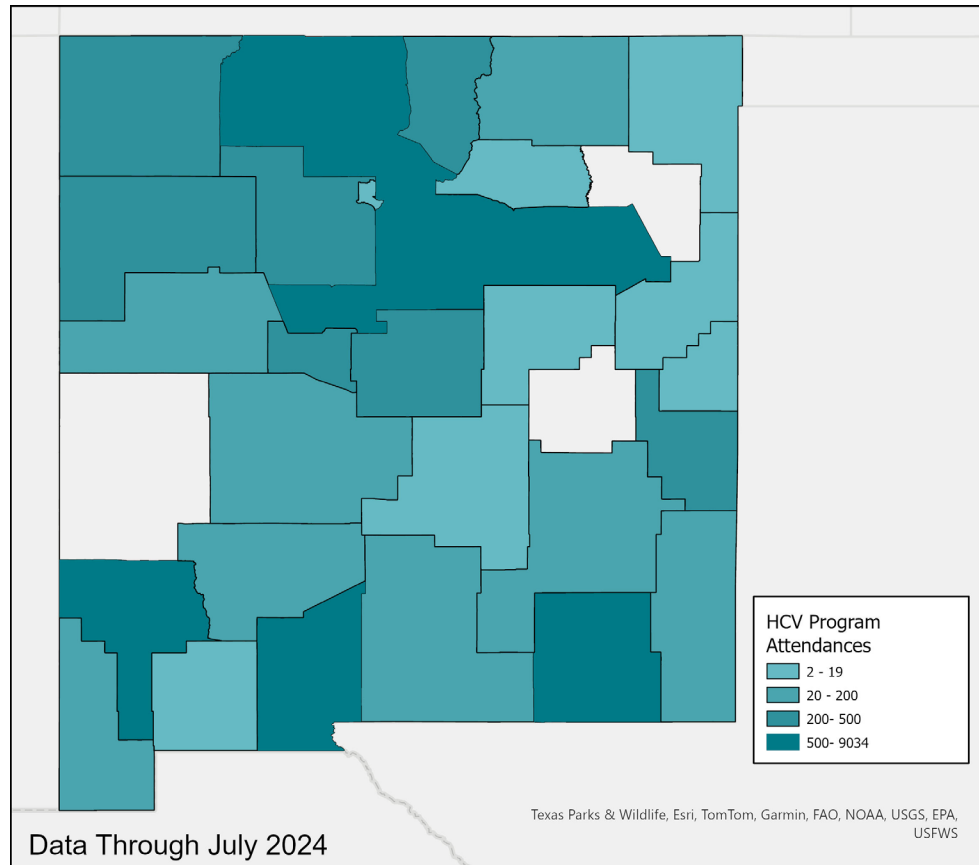


# HCV Community and Corrections Programs

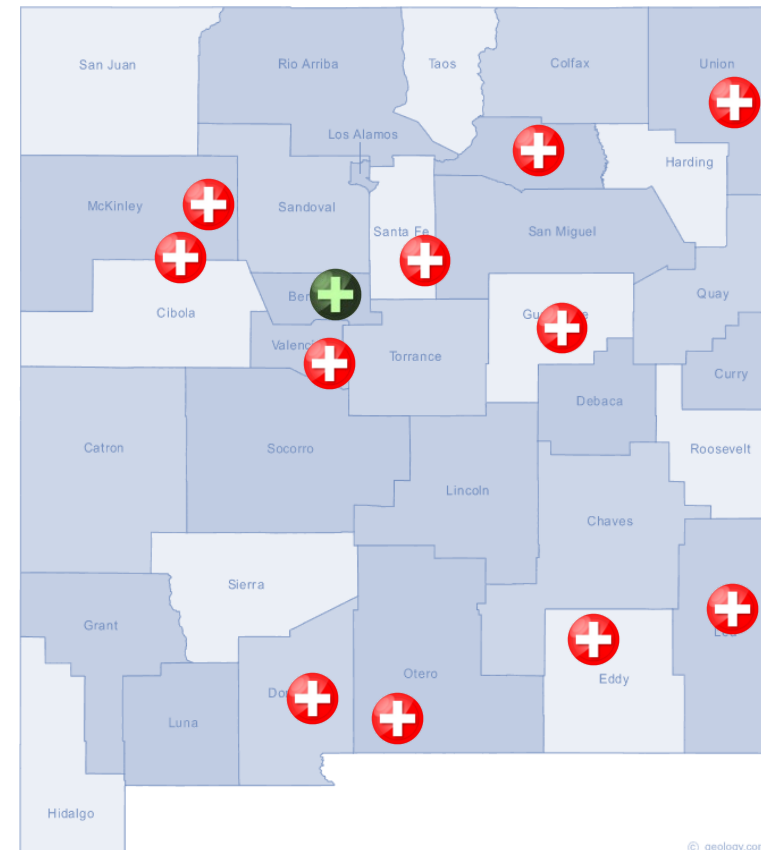
**Karla Thornton, MD, MPH**  
Professor of Medicine (Infectious Diseases)  
Director of Project ECHO  
Department of Medicine  
University of New Mexico Health Sciences Center



# HCV Community and Corrections Programs



- Weekly session since 2004
- 1234 Unique NM Attendees

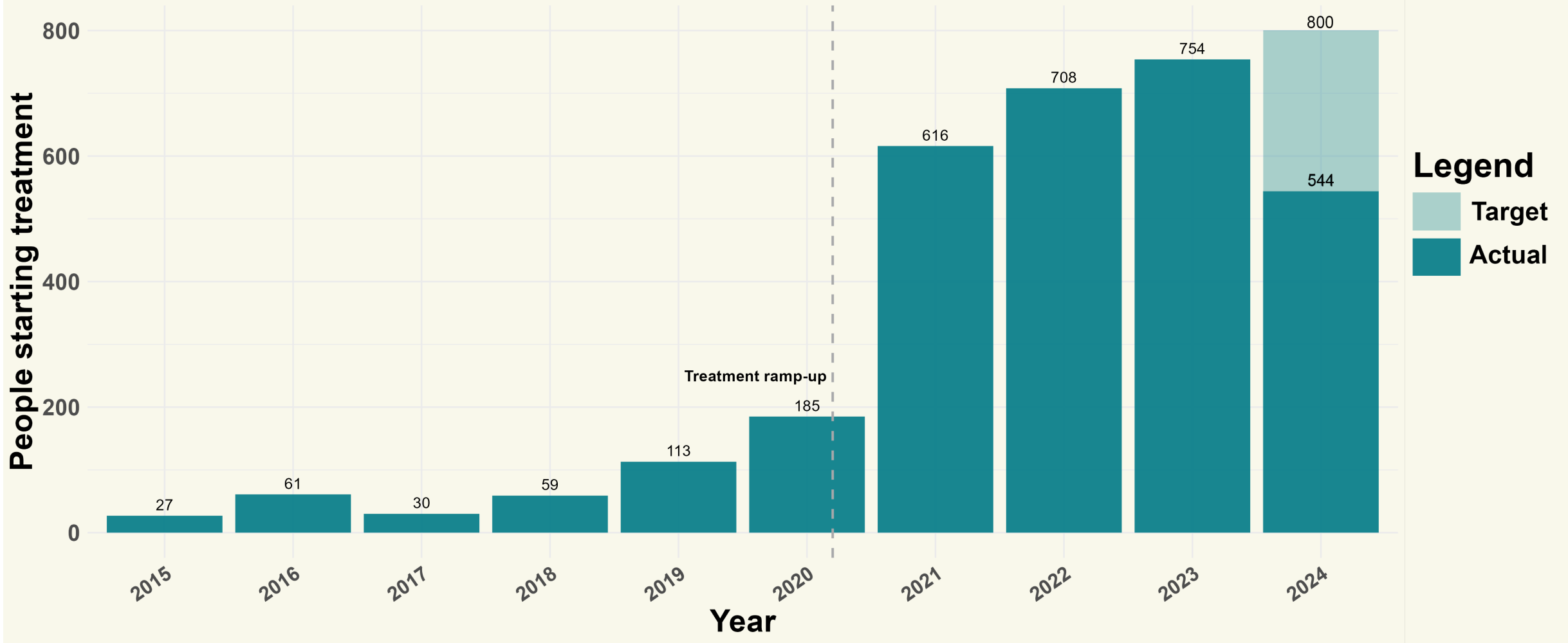


- Weekly session since 2005
- HCV Treatment Ramp-up started 2021



# Number of People Starting HCV Treatment in NMCD

by Year, January 2015 - July 2024, (n = 3097)

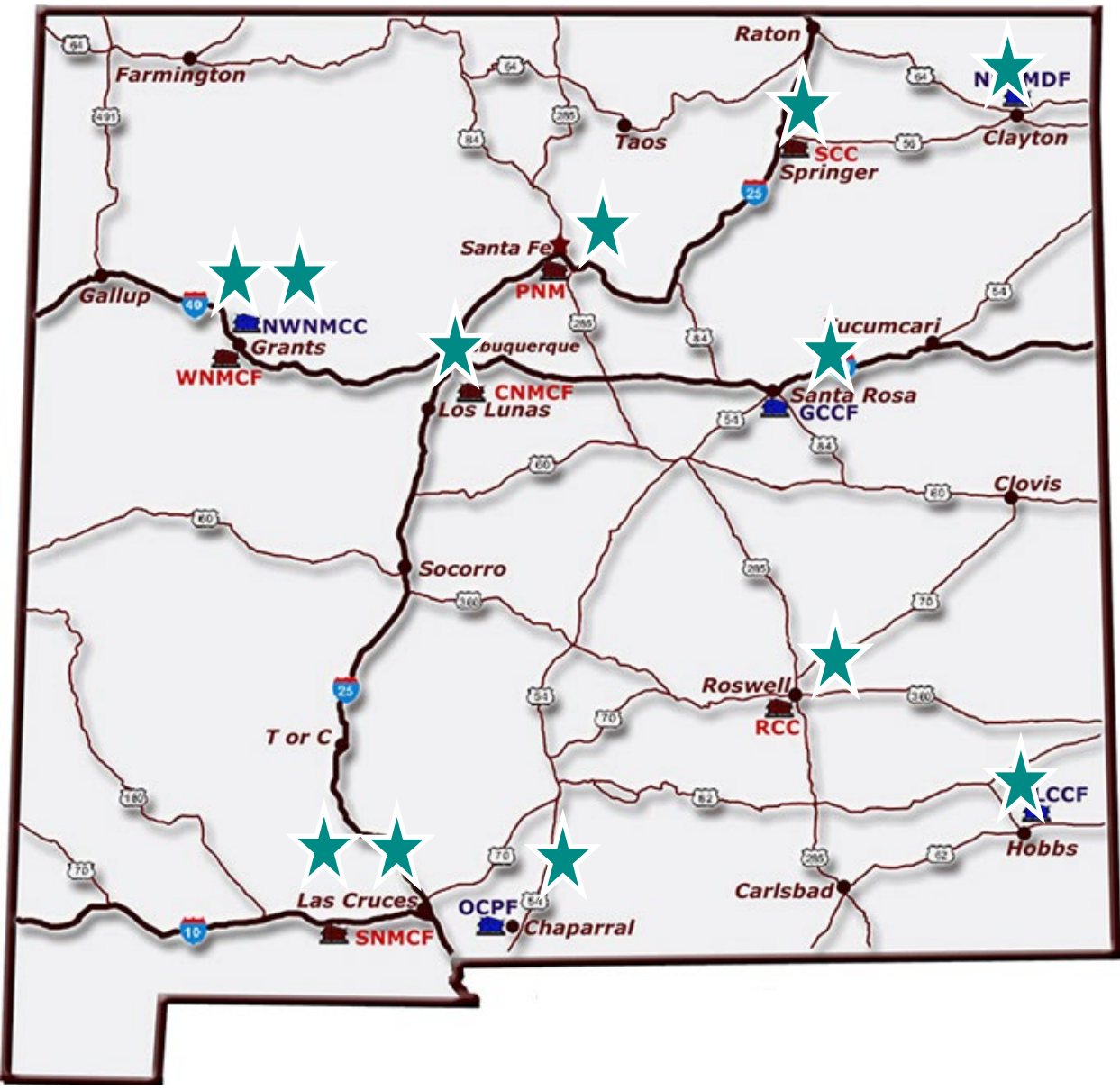
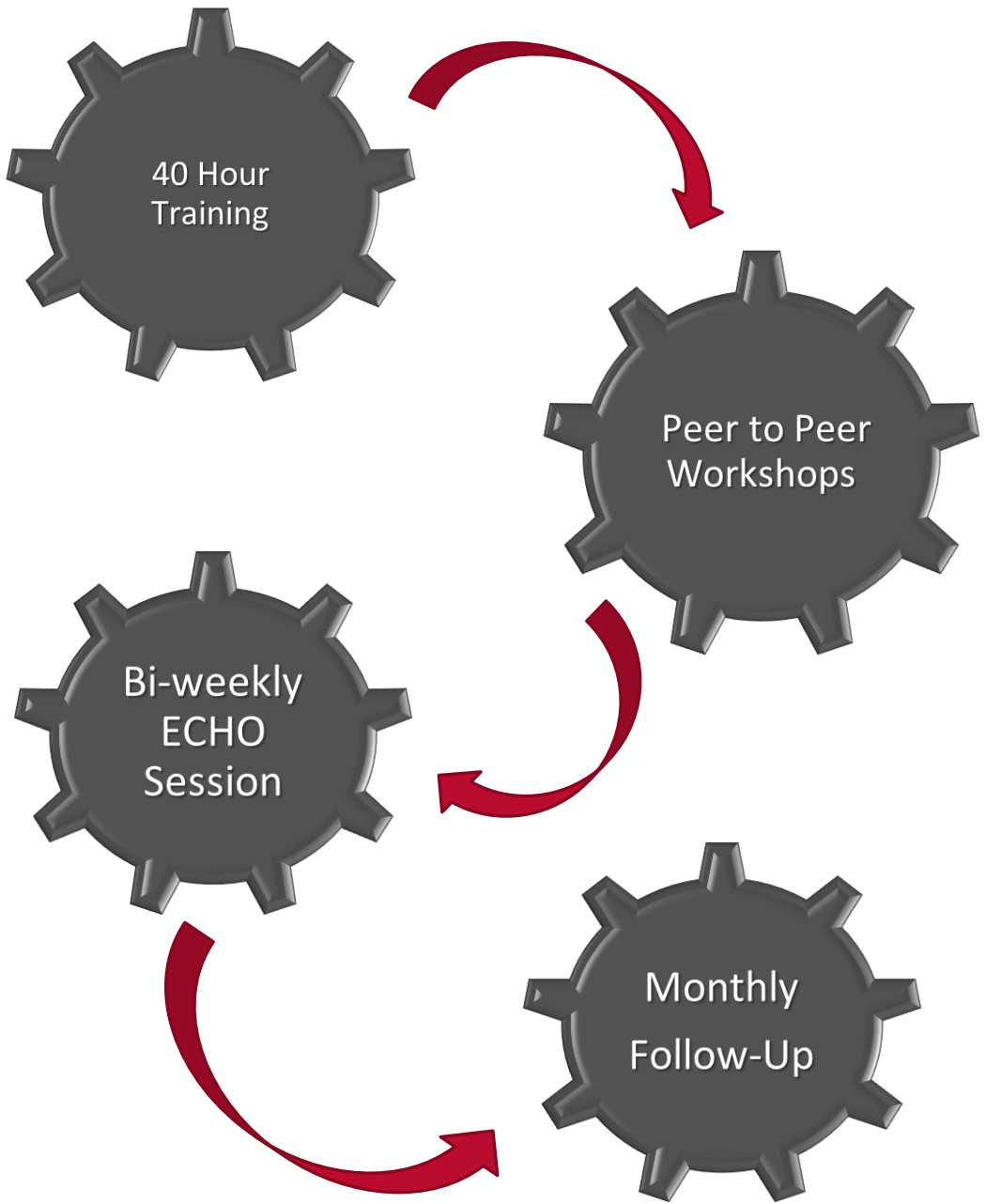


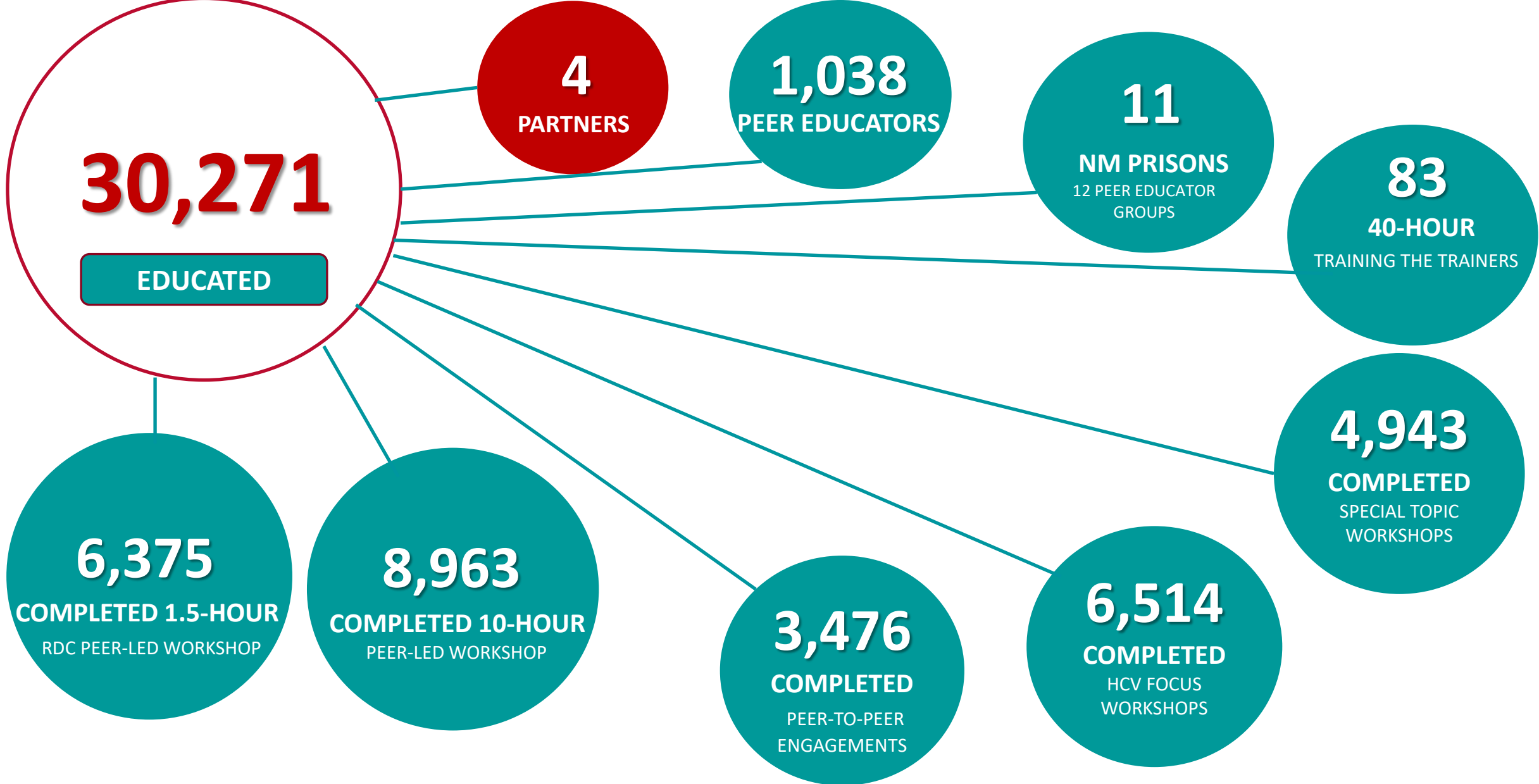
# Prisoner Health is Community Health



*The New Mexico Peer Education Project*









# Introducing the

## Community Peer Educators



**Kira Vaughns**  
Alamogordo



**Jenifer Myers**  
Las Cruces



**Evangelena Honahnie**  
Albuquerque

### New Hires

- Angelica Sandoval, Farmington
- Darla Padilla, Raton
- Stardust McCleney, Las Cruces
- Mariah Silva, Las Cruces



**Jasmine Castelli**  
Kirtland



**Ariana Rael**  
Albuquerque



**Michelle Richardson**  
Rio Rancho



**Rocci Lortz**  
Los Lunas



**Elecia Clay**  
Albuquerque

# New Mexico Community Peer Education Project

*Supporting Returning Citizens in New Mexico*

## Support Services:

- Education: GED, Higher Ed., or Vocational
- Employment
- Financial
- Housing
- Life Skills
- Material Support (Food, Clothing, Hygiene)
- Medical/Dental/HCV
- Substance Use Support
- Transportation
- Workshops (Community Service)
- Vital Documents

## Peer-to-Peer Engagement

**3,714**

Referrals Received

- 36% Rural NM
- 75% Male
- 41% on Parole

**6,932**

Services Provided

- Employment – 1,292
- Housing – 1,018
- Medical/HCV - 720

## Workshops

**4,332**

Learners

- Overdose Prevention
- HCV Tx and Access
- Health and Wellness

**3,442**

Community Service  
Credits Issued

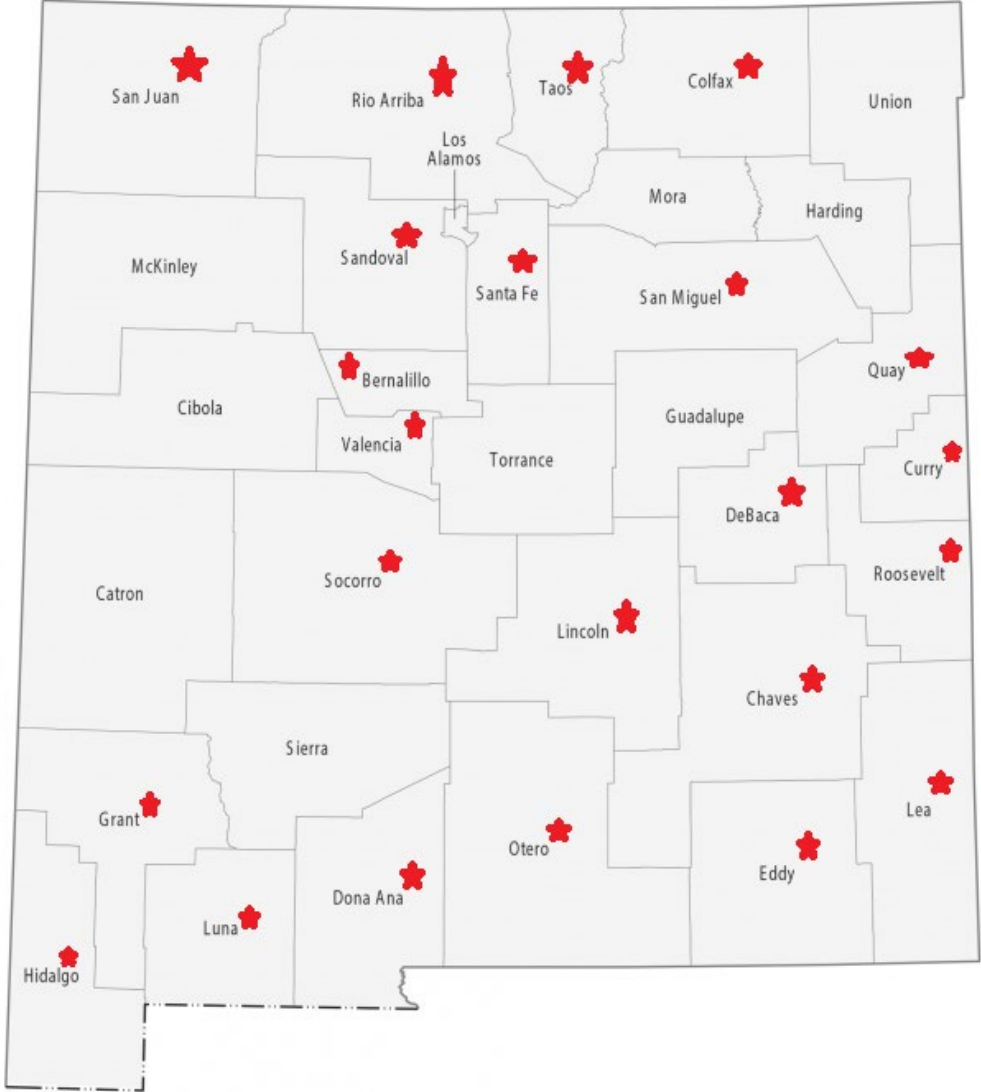
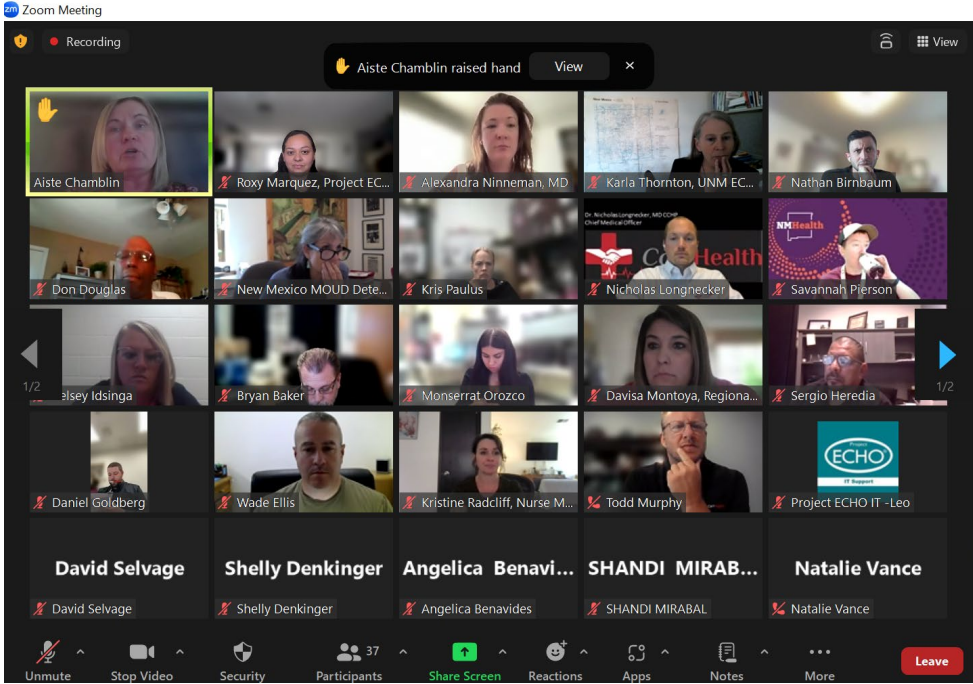
- (1) hour per workshop

*Data from FY21 – FY24*

# MAT: Detention Center Substance Use Treatment ECHO

Started: July 12, 2024

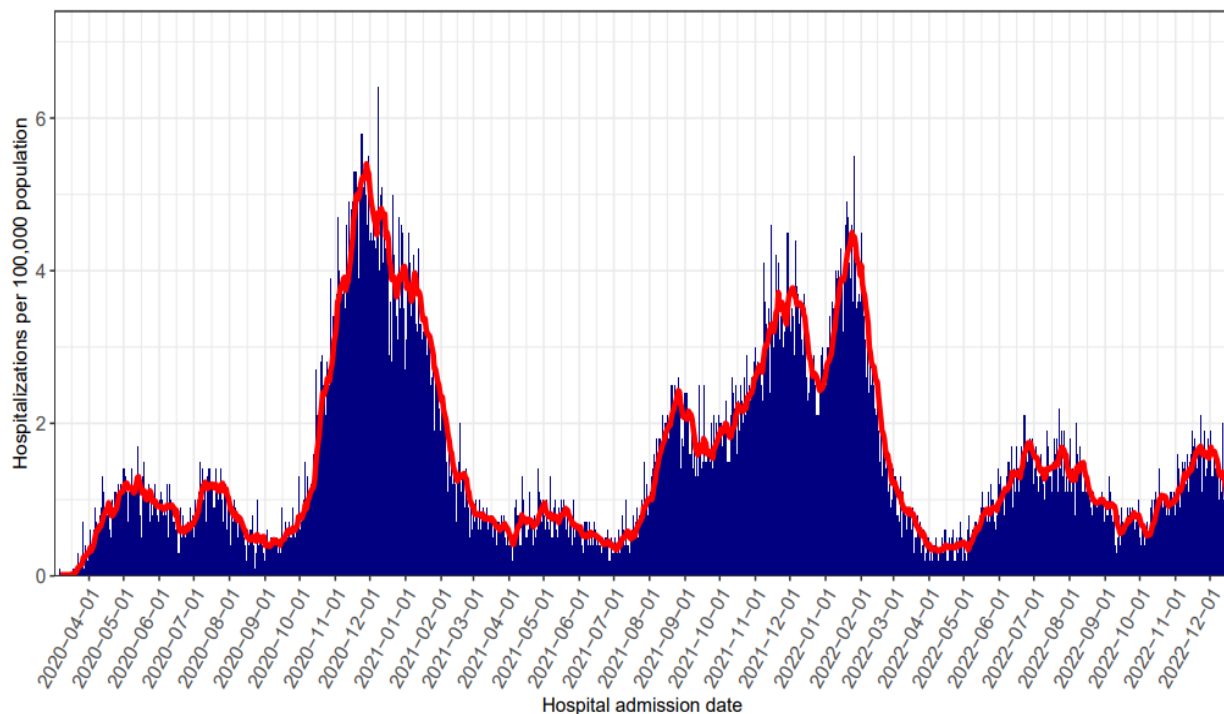
**Objective:** Educate healthcare providers and allied staff working in the NM County Detention Centers about medications for opioid use disorder (MOUD) and other medications to treat substance use disorders so that they can initiate and maintain detainees on MOUD during their time in detention.



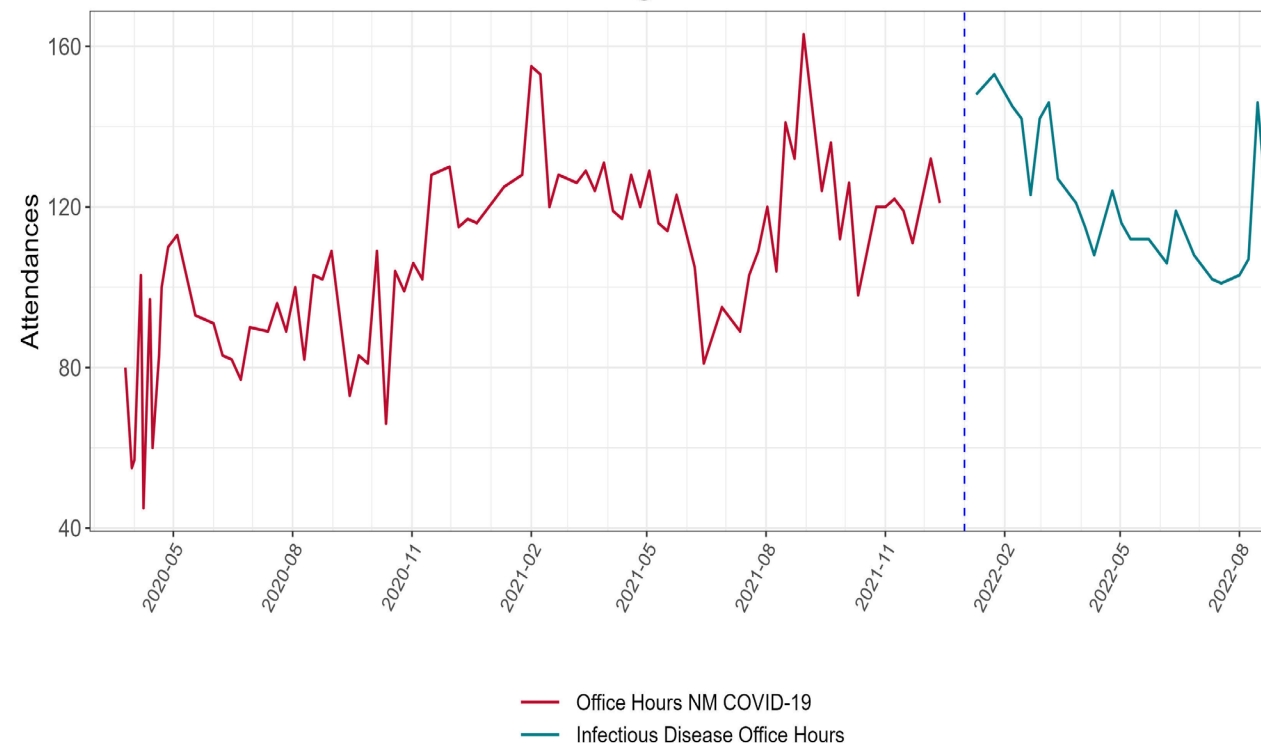
# ECHO COVID Pandemic Response in NM

## SECTION 1: STATEWIDE AND COUNTY-LEVEL HOSPITALIZATION RATES

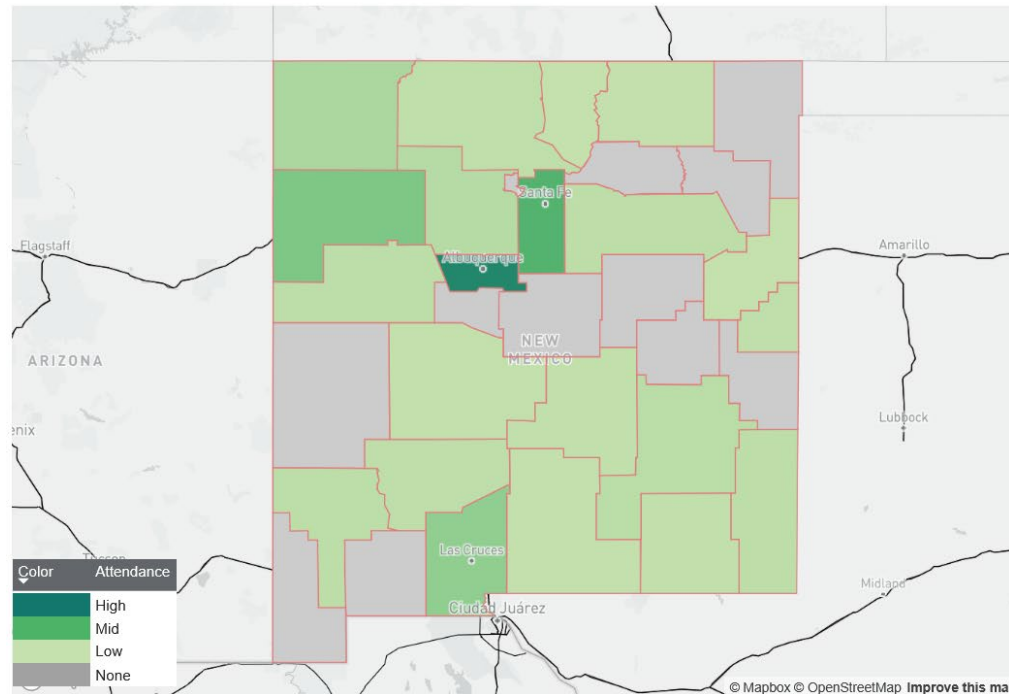
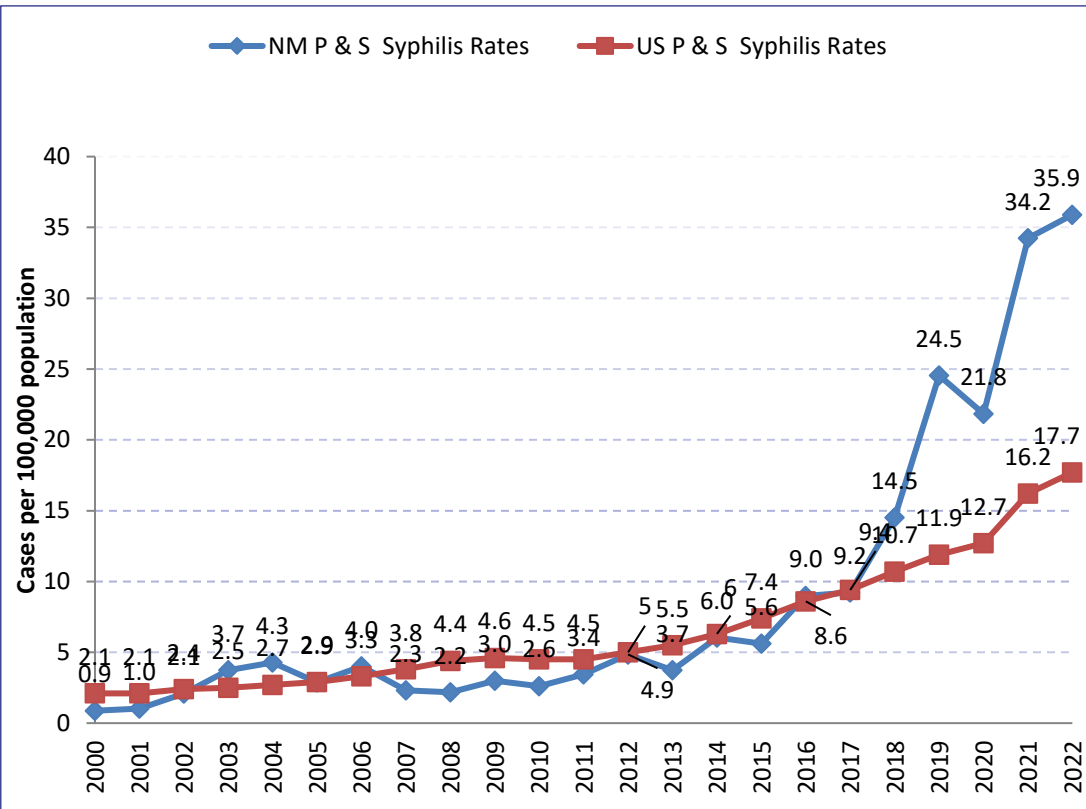
New hospital admissions per 100,000 population each day with a 7-day rolling average



### NM Provider Attendance in COVID Office Hours and Infectious Disease Office Hours ECHO Programs



# ECHO Response to Syphilis in NM May - July 2024 (8 sessions)



**Filter by Session Date Range**

Select Session Dates:

Select Rural/Non-Rural County:

Select Occupations:

Select Sessions Attended:

NM Attendees	262	NM Attendances	950
Sessions	8	Avg. Sessions per Attendee	3.6
Counties Reached	21	% of NM Counties	64%

Last Updated: 8/12/2024



# NM Corrections and ECHO Partnership

## Haven Scogin

Deputy Director, Reentry Division  
New Mexico Corrections Department





# Project ECHO

**Sanjeev Arora, MD, MACP**

Distinguished Professor of Medicine (Gastroenterology/Hepatology)  
Director of Project ECHO  
Department of Medicine  
University of New Mexico Health Sciences Center

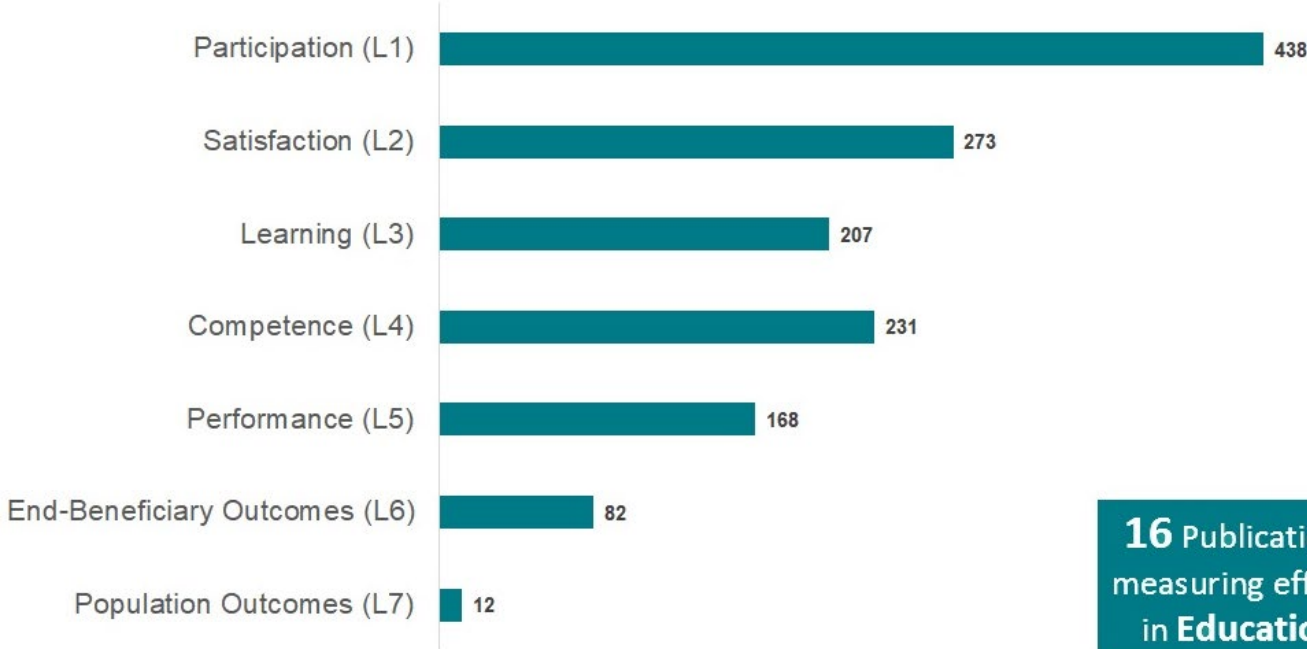


# ECHO Publications by Outcome Levels



**647 Publications**

ECHO peer-reviewed publications by Moore's level (N=647)



**16 Publications** measuring effects in **Education**



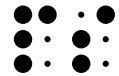
# Benefits of the ECHO Model in Healthcare



Quality and safety



Rapid learning and best-practice dissemination



Reduce variations in care



Access for rural and underserved patients, reduced disparities



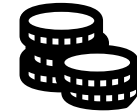
Workforce training and force multiplier



Improving professional satisfaction/retention



Supporting the medical home model



Cost-effective care - avoid excessive testing and travel



*Prevent cost of untreated disease (e.g., liver transplant or dialysis)*



Integration of public health into treatment paradigm

## Democratizing Implementation of Best Practice

# Fundamentally, the ECHO Model is a tool to help upskill frontline workers

---

- Ongoing mentorship and guided practice
- Discussion driven by real needs and actual cases and problems of those working on the frontline
- Provides a supportive social network
- Efficient and effective way to get implementation of best practices to frontline workers
- Creating a safe space for dialog, learning, and development



**Recognizing the profound connection between education and health is vital for us to reduce health disparities**

---

**“If we really want to save lives in this country, prevent disease, reduce health care costs, we have to do something about education.”**

*Steve Woolf, Director, VCU Center on Society and Health.*

# Education is a key social determinant of health

---



An additional 4 years of education reduces risks of diabetes, heart disease, obesity and smoking

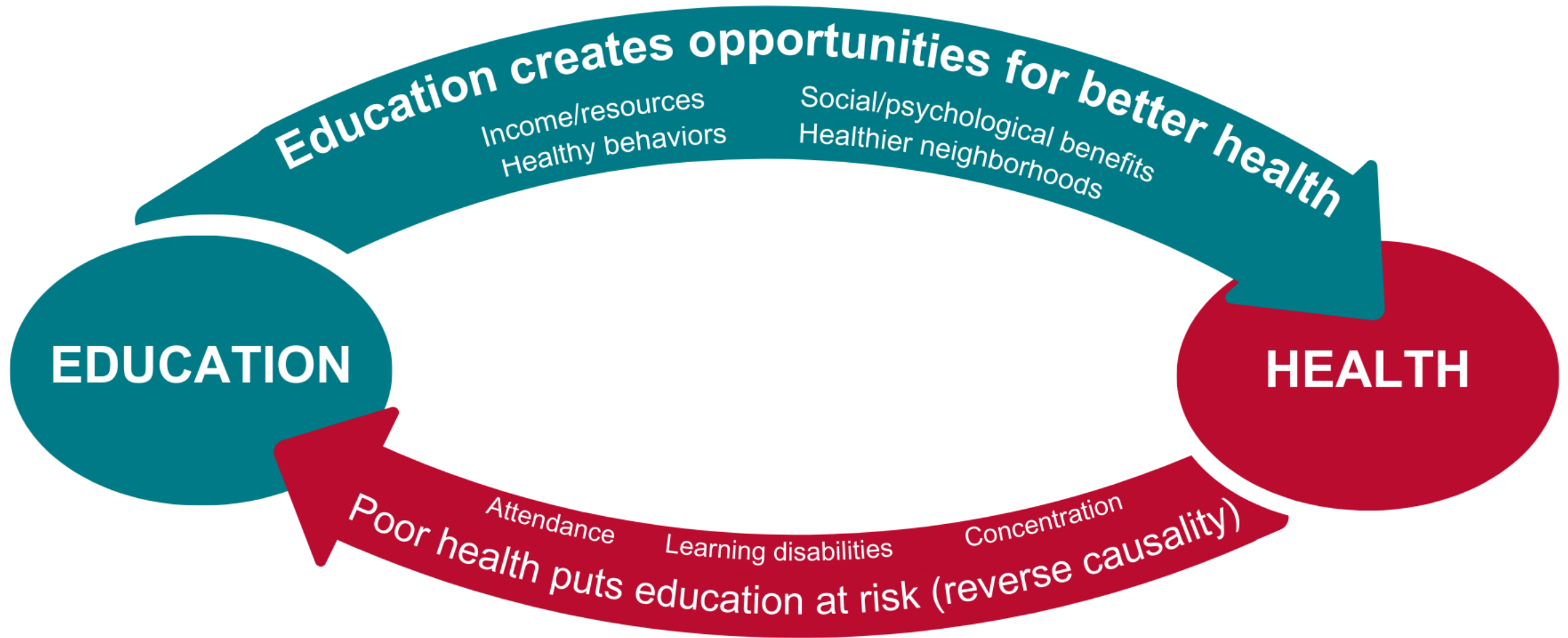


The more years of education a mother has received, the more likely her infant is to survive and thrive

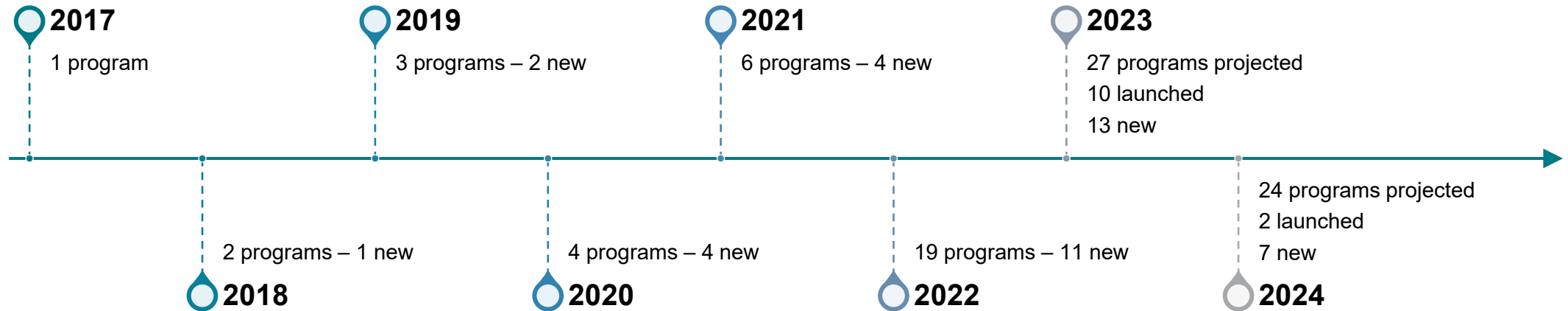


Education has generational effects – the likelihood of a child completing school is linked to their parents' educational attainment

# Health and Education Intertwined



# ECHO for Education NM: From Pilot to Proof of Concept to Building Capacity



6 years

28 Topics

51 Programs

764 Sessions

14,646 Hours of Learning

3,796 Unique Participants

32 NM Counties

1179 Participating Orgs

89 NM School Districts

# New Mexico Project ECHO Education Programs 2024 Programs

Adobe Think Tank ECHO Program	College Admissions ECHO	College and Career Counseling ECHO	Corequisite Model for Higher Education NM ECHO program	Developmental Specialist Cohort 3 NM ECHO Program	Early Childhood Numeracy NM ECHO Program
Educator Resiliency through Social Emotional Learning	FACULTY ECHO Program	Family Engagement in Early Literacy NM ECHO Program	Health Ready Communities NM ECHO	Integrating STEM NM ECHO Program	Math K-8 NM ECHO Program
Mental Wellbeing in Adolescents ECHO program	Multilingual Early Childhood Certificate Pathway ECHO Program (MECCP)	Partner Assistance for Launch Support ECHO	Práctica Reflexiva en Atención Infantil Temprana y Educación NM ECHO Program	Reflective Practice in Early Care and Education NM ECHO Program	Science K-8 NM ECHO Program
Structured Literacy for the Classroom Kinder NM ECHO Program	Structured Literacy for the Classroom 1st Grade NM ECHO Program	Structured Literacy for the Classroom 2nd Grade NM ECHO Program	Trauma-Informed Preschool Supports ECHO	Understanding Behaviors in Early Childhood NM ECHO	Youth Suicide Prevention NM ECHO Program

## Participants came from the following school districts:

Albuquerque	Clovis	Grady	Los Alamos	White Sands
Alamogordo	Cobre	Grants	Los Lunas	
Bernalillo	Deming	Hagerman	Rio Rancho	
Carlsbad	Espanola	Hobbs	Roswell	
Central	Farmington	Las Cruces	Silver	

# ECHO for the Structured Literacy Classroom: supporting the implementation of science of reading in New Mexico

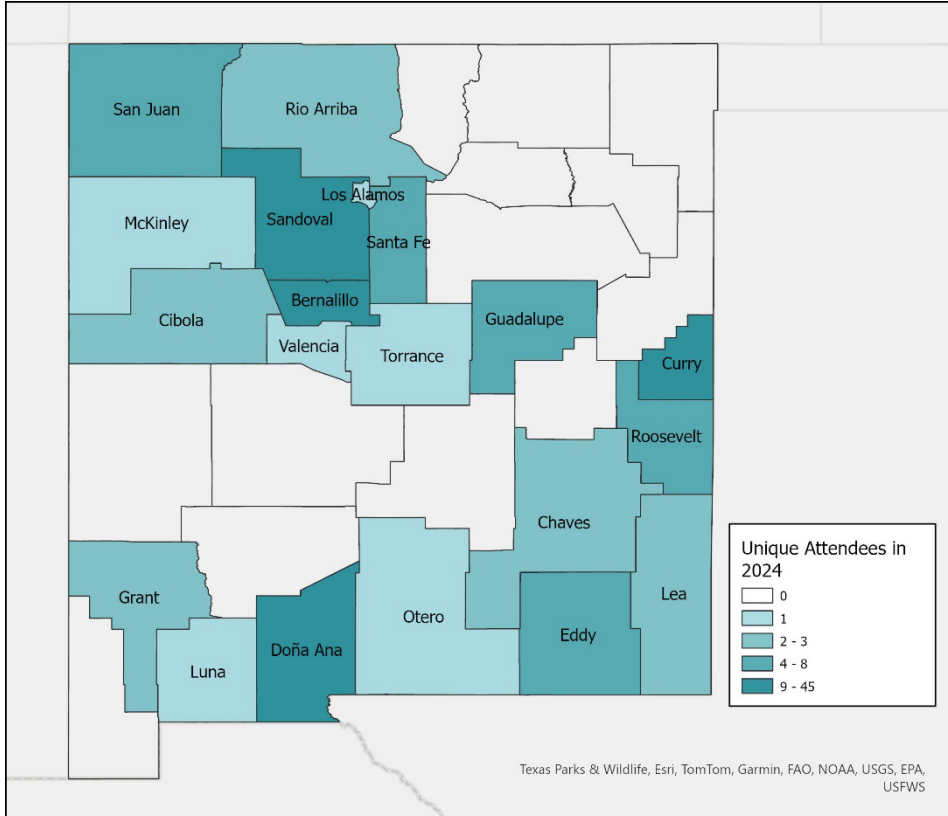
**3 grade-level cohorts:** Kinder, 1<sup>st</sup> and 2<sup>nd</sup> Grade

**89** unique participants; **1216** hours of professional learning; **49** NM schools and organizations; **17** NM Counties

### Participants quote

*“The ECHO program solidified concepts I learned in LETRS and made the importance of structured literacy very clear. After I completed LETRS I was excited to implement what I had learned but was not 100% on how it should look. The ECHO program helped me bridge what I learned through LETRS training with information and resources.”*

An estimated **1227** students benefited from teachers joining the SLC ECHO programs in 2023-2024 alone!





# Impact: Teacher Practice & Knowledge

Among teachers participating in the ECHO for the Structured Literacy Classroom

## Teachers change what they do in the classroom\*

**42%** increased the **class time spent on key structured literacy instruction practices.**

**89%** have attempted or fully incorporated high leverage instructional practices into their teaching.

**Teachers' sense of self-efficacy for Literacy Instruction** showed a **significant post-program increase** across a majority of items.\*

## Teachers' knowledge of structured literacy increases\*

**81%** of teachers reported **knowledge gains on key structured literacy principles.**

**By the end of the program 87%** of participants reported that they were **very or extremely knowledgeable on key structured literacy principles.**

For each session in the program, on average **56%** of surveyed participants **reported post-session knowledge gains**

Student outcomes for this program will be measured in school year 2024-2025

\*All results are from participants in the program who responded to the post program survey

\*\*Literature has shown a significant positive relationship between teacher self-efficacy and student outcomes

# 2023-2024 Structured Literacy Implementation Programs

89 teachers  
grades K-2

*"I love being able to hear what other teachers are doing that are successful and being able to use these ideas in my own class."*

*"Wow! I am always blown away on the current research that you are providing. Doug Peterson's lesson and research is so pertinent for me. I not only am the reading interventionist, but am also the librarian. I am going to incorporate some of these skills when I am doing a read-aloud to all the students."*

*"I have realized that through research that there's a need for a 90 minute uninterrupted instruction each day to become strong readers and that instruction must be systematic, explicit, scaffolded and differentiated across the classroom."*

# What our ECHO Education participants are saying...

“ This program gave me the excitement, changed my attitude towards my literacy block - new resources, new things to try out with students; a community to be able to talk to.”

~ Participant in Structured Literacy for the Classroom ECHO Program

“I feel that these sessions have provided very valuable ideas and resources that would be impactful in my school. I am a principal at a K-8 charter school that really stresses social emotional foundations to all our learning. Some of the resources I have been able to share and put into play right away.” ~ Participant in Educator Resilience through Social and Emotional Learning ECHO Program

“I really enjoy the sharing in the small groups. I get motivated to try something tomorrow.”

~ Participant in Elementary Math ECHO Program

“Thank you! I just love collaborating and sharing ideas. We all talked about lack of materials being a challenge, and you provided ideas (and resources) to help alleviate the problem. Very helpful – thank you” ~ Participant in STEM through Literacy ECHO Program

“I teach in a rural community so joining the sessions provided me with the tools I need to reach outside of my community to the different resources our state provides”

~ Participant in Educator Resilience through Social and Emotional Learning ECHO Program



# Participant Level Interim Indicators for Impact on Students: Existing ECHO Education Programs

---



## Implementing Strategies

% of Surveyed Participants implementing strategies learned through Program

**89%** Literacy

**94%** STEM



## Knowledge Growth

% of Surveyed Participants reporting knowledge growth in program area averages all sessions

**81%** Literacy

**72%** STEM



## Net Promoter Scores

of Surveyed Participants (ranges from -100 to 100, > 50 considered very high)"

**63** Literacy

**58** STEM

# QUESTIONS

---

## Contact Information

### **Sanjeev Arora, MD, MACP**

Distinguished Professor of Medicine (Gastroenterology/Hepatology)

Director of Project ECHO

Department of Medicine, University of New Mexico Health Sciences Center

[sanjeevarora@salud.unm.edu](mailto:sanjeevarora@salud.unm.edu)