

**UNIVERSITY OF NEW HAMPSHIRE  
PROJECT ECHO® HUB**

**CHRONIC PAIN  
SELF-MANAGEMENT  
PROJECT ECHO® SERIES**

*Evaluation Highlights*



# Acknowledgements

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# Background

The Chronic Pain Self-Management Project ECHO (Extension for Community Healthcare Outcomes) Series established a telehealth learning community to equip rural health care and community professionals in New Hampshire with skills and strategies to assist individuals with self-management of chronic pain to reduce the risks of opioid misuse. The need for this series was established through a comprehensive assessment and planning study conducted by New Hampshire Citizens Health Initiative (Initiative) at the University of New Hampshire (UNH) Institute for Health Policy and Practice.(1) The Chronic Pain Self-Management Project ECHO Series was developed by the University of New Hampshire (UNH) Project ECHO® Hub in partnership with UNH Extension. Six one-hour sessions were held for the learning community from September 2021 to March 2022.

In the United States, the drug overdose death rate in 2020 was 28.3 per 100,000 population.(2) Currently, more than 82% of opioid-involved overdose deaths include synthetic opioids.(2) New Hampshire's (NH) age-adjusted drug overdose death rate in 2020 was 30.27 per 100,000 population with a majority of the deaths attributed to fentanyl/heroin.(3) A report from the New Hampshire Drug Monitoring Initiative shows that individuals aged 20-39 accounted for almost 50% of the overdose deaths in 2020 and similarly accounted for approximately 50% of the opioid-related emergency department visits in NH.(3)

The opioid epidemic is further compounded by the rurality of NH. In 2019 over 37% of NH's population lived in rural areas,(4) compared to about 14% of the US population living in rural areas.(5) NH has the second highest median age in the nation(after Maine), and approximately 18% of NH residents are over 65 years of age, compared with 16% in the US overall.(6) NH is experiencing a rapid increase in the number of older adults, which is expected to double over the next 20 years.(6) Rural areas face pronounced stigma related to opioid use.(7) Unstable labor markets contribute to increased opioid use as well as fewer clinics and hospitals and less access to programs related to mental health treatment, drug treatment, prevention, and harm reduction increasing the disparity seen in rural communities.(8) Rural communities have high rates of serious and complex chronic disease rates, including chronic pain, compared to urbanized areas.(9)

It is estimated that 20.4% of American adults (50 million) have chronic pain, and that 8% (19.6 million) have high-impact chronic pain, with higher rates associated with older age, as well as rural residency.(10) The annual US costs attributed to chronic pain are approximately \$630 billion.(11) The Center for Disease Control and Prevention's top recommendation for prescribing opioids for chronic pain is that non-opioid therapy be the preferred treatment and opioids only be used when the benefits outweigh the risks.(12) Limited education and training on pain management best practices is provided to health care professionals.(11)

# Program Background

The Chronic Pain Self-Management ECHO utilized the Project ECHO model to provide educational content and support and a networking opportunity for those in New Hampshire and neighboring states who work with individuals with chronic pain. The program was a collaboration with the University of New Hampshire Extension Team and explored valuable self-management strategies and discussed the impacts of opioids on our rural communities.

## Project ECHO® Model

The Project ECHO model was developed in 2003 at the University of New Mexico to provide accessible continuing education to health care professionals in rural and underserved areas with the goal of improving patient outcomes.(13) Project ECHO accomplishes this by using a virtual, video conferencing platform to create learning communities for telementoring and case-based education.(13) The ECHO model has spread nationally and globally to cover a large variety of topics. Today, there are 780+ ECHO hubs in 55+ countries.(14) In 2020, New Hampshire Citizens Health Initiative released a groundbreaking report, Planning for Project ECHO® in New Hampshire: The New Hampshire Project ECHO Planning for Implementation and Business Sustainability Project Summary indicating that chronic pain was one of the top three topics of interest for health and community care providers.(1) The findings from the needs assessment stakeholder survey and claims analysis has been the primary source informing the curriculum development of ECHOs launched through the UNH ECHO hub.(1)

## Chronic Pain Self-Management Program

Throughout the ECHO series participants learned about the Chronic Pain Self-Management Program (CPSM) and were able to refer their patients. The CPSM program is a course developed by Stanford University to help people with chronic pain learn strategies to manage their condition and have the confidence to carry the strategies out. (15) The seminal program was developed as an Arthritis Self-Help Course, and was the prototype for several chronic disease self-management programs.(16) CPSM is an interactive group workshop, typically held in community settings, for those living with chronic pain to learn skills to manage on a day-to-day basis. Participants are exposed to topics such as appropriate exercise, use of medication, communication with family, friends, and health professionals, nutrition, and how to evaluate treatments. CPSM workshops are held in 6 weekly sessions, each 2-1/2 hours long. Workshops are facilitated by 2 trained leaders, 1 or both of which have lived experience with chronic pain.(17)

## Evaluation Methods

The ECHO was evaluated using a pre-post design. Participants were queried on their knowledge and confidence pertaining to the ECHO topics before the program was implemented (“pre” or baseline), and again after the program was completed (“post” or follow-up). The pre and post data was then compared in order to assess for a change. Participant demographics and attendance was collected as well as participant satisfaction.

# Highlights

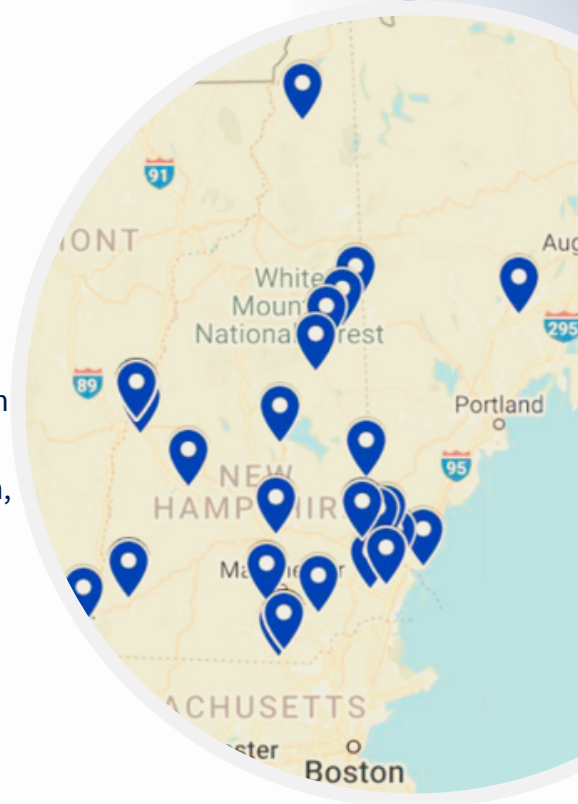
## 6 Sessions

Engaging Participants and Subject Matter Experts (SMEs) in Learning through Didactic and Case Presentations

- Chronic Pain: Treating the Whole Person
- Stigma and Behavioral Health Interventions
- Non-Opioid Chronic Pain Management
- Goal Setting as a Collaborative Dialogue
- Chronic Pain Self-Management
- Quality of Life: How to Live Well With Chronic Pain

## 71 Attendees (62 Participants, 9 SMEs)

From interdisciplinary backgrounds joined at least one ECHO session throughout the series. The interdisciplinary fields included health care, specialty health, allied health, behavioral health/mental health, community health, and health education. The range of professional titles included nurse practitioners, medical doctors, behavioral/mental health counselors, community health workers, educators, recreational therapists, nutritionists, physical therapists, nurses, social workers, and paraprofessionals.



"I have stored the follow up materials and recordings of didactic presentations in our data base in ways that are easily accessed by our team. It is amazing to have these resources easily accessed by our team for ongoing reference as well as training incoming staff members"  
~ CPSM Participant

## 69% Rural

Includes participants who work out of offices in rural locations

## 76% Increased Confidence

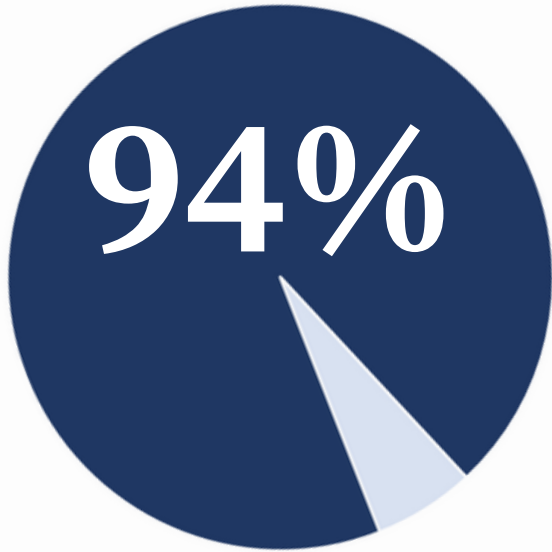
In assessing for risk of substance use disorder (SUD) for individuals with chronic pain using opioid treatment options

## 75% Increased Confidence

In referring individuals to formal Chronic Pain Self-Management Program, [Living Well With Chronic Pain](#)

"We are more knowledgeable and able to provide our clients with additional resources while we discuss within our agency how we can expand our own services to better address client needs."  
~CPSM Participant

# Impact



of participants reported an increase in knowledge across at least 3 learning objectives of the ECHO series

of participants reported an increase in confidence applying knowledge learned during this ECHO series

*These percentages are based on participants who completed the pre- and post-evaluation (n = 17). After each ECHO session, participants were asked if the information from the training has increased their knowledge, skills or practice related to this topic and 92% of continuing education responses (n=151) agreed.*



Personally I learn so much every ECHO that I attend. In this particular one I have found more resources, assessment tools, and other programs that could be very beneficial to our MH and SUD clients that experience chronic pain.

”

“

My practice will benefit, as I will be more involved in the chronic pain community, and will be more likely to assist clients in obtaining the knowledge and resources they need, thus reducing the clients risk of re-hospitalization.

I really really loved the opportunity to hear from a variety of professionals who are all approaching chronic pain with a slightly different lens. It is really helpful to understand the perspectives, options, and messaging that we are all using and presenting.

”

“ [This ECHO has given me] greater awareness of stigmatizing and biased language, greater attention to the holistic quality of life, greater knowledge of community resources available

# Future Considerations



The positive response to this Chronic Pain Self-Management Project ECHO Series demonstrated the need for education and training for health care and community agencies working with clients around self-management strategies to improve chronic pain control and management.

Additional education, research and training is needed to expand the use of self-management strategies. Programs that empower and educate those working with individuals with chronic pain to use self-management strategies are necessary to lessen the impact that pain has on individuals and the health system. Acknowledging the many benefits self-management skills can afford NH patients, additional ECHOs are warranted to expand training in this area.

**Contact us to learn more about the UNH Project ECHO Hub!**

**Website:**

**<https://chhs.unh.edu/institute-health-policy-practice/delivery-system-payment-reform/project-echo>**

**Email:**

**[unh.projectecho@unh.edu](mailto:unh.projectecho@unh.edu)**

**Follow the link below to learn more about the Chronic Pain Self-Management Program!**

**Website:**

**<https://extension.unh.edu/resource/learn-more-about-chronic-pain-self-management-program>**

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