

Increasing Access to Expertise in Sickle Cell Disease Care by Training Advanced Practice Providers

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Conflict of Interest

J. Kanter

Consultancy: Guide point Global, Novartis, Graphite, Axcella **Steering Committee:** Novartis, Astrazeneca **DSMB:** Sancillo, NovoNordisc. **Membership on a Scientific Advisory Committee:** Astrazeneca, Sanofi, Beam, Forma, Agios, Novartis, Acel Rx

M. Treadwell

Royalties: Wolters Kluwer Health UpToDate

GOAL: increasing access to high quality care for people with sickle cell disease

Problem: Many adults with SCD receive care in settings without the resources and expertise to deliver appropriate care.

Goal of Previous SCDTDP: to improve education of primary care providers (PCPs) in order to increase access to care

Barriers:

- Lack of interest
- Lack of Time
- Insufficient reimbursement

Attempted solution: STAMP initiative (SCD Training and Mentoring Program for Primary Care Providers)

- STAMP was a joint project of SCDTDP grantees and the Office of Minority Health (OMH)
- The OMH recruited PCPs from multiple societies, centers etc (>1000 individuals recruited)
- The TDP regional grantees collaborated to host the ECHO education and mentoring sessions designed specifically for PCPs.

Results:

- STAMP was well attended overall by a variety of healthcare workers and community members but did not fulfill engage/attract large numbers of PCPs

Next solution:

- SCDTDP regions collectively believe it is appropriate to shift capacity building to advanced practice providers (APPs) who can be trained to work as extensions of sickle specialists.

SUPPORT Program:

Sickle cell disease Advanced Practice Providers Opportunities Resources and Training Program

This all grantee collaborative APP training program, known as **SUPPORT** (Sickle Cell Disease Advanced Practice Provider Opportunity Resources and Training) has three components.

- **APP ECHO:** Recurring ECHO telementoring sessions geared for APP.
 - Case-based learning and mentoring sessions with brief didactics on a specific areas of sickle cell care, facilitated by APPs with expertise in sickle care.
 - The APP ECHO sessions are open to all APPs regardless of their expertise in SCD care or their participation in the second component.
- **Web-based online curriculum**
 - The Web-based curriculum will be hosted on a designed learning management platform and allow asynchronous education of APPS in SCD care.
- **Observership at a SCD center of excellence**
 - This will further train APPs to provide quality evidenced-based care for SCD.

All TDP regional grantees will identify and refer interested APPs to participate in **SUPPORT**, provide curriculum content, and provide observership opportunities to interested trainees in their respective regions.

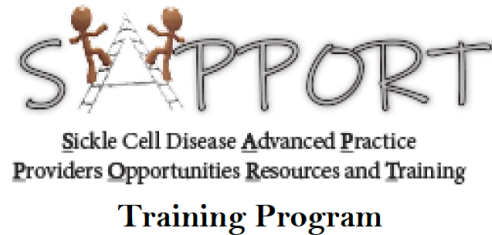
APP Supplement Goals

Increase access to quality, evidence-informed SCD care

- Partner with site leads in two states to train APPs in SCD care and embed them in primary or SCD specialty care settings
- Include SCD Project ECHO sessions tailored for APPs
- Increase accessibility to SCD specialists for on-demand consultation about SCD care
- Facilitate SCD co-management with providers in primary care settings

Measurement

- Number/type of participants in Project ECHO and other trainings
- Number of individuals with SCD served
- KPIs – HU prescriptions, completed TCD screenings, immunizations



This is a one-year program designed to prepare advanced practice providers (Physician Assistants, Nurse Practitioners) specifically to care for patients with sickle cell disease. Trainees will matriculate through curriculum via an online platform. The program also includes ECHO telementoring sessions, observership(s), and pre/post assessments. The program is self-paced so the time to complete this curriculum may vary depending on the APPs level of expertise and time available, but not to exceed one year. At the end of matriculation, a certificate of completion from the *National Alliance of Sickle Cell Centers (NASCC)* will be granted to the advanced practice provider.

Participant requirements to complete the curriculum:

- 1- Attend multiple ECHO telementoring sessions
- 2- Complete the online SAPPOR T Curriculum
 - Scheduled launch will be February 2021 with modules being released on a rolling basis through Spring and Summer 2021
- 3- Complete observership(s) at local SCD and/or a regional sickle cell disease hub site (2-4 weeks)
 - This component may not be available until May, 2021 or later pending institutions' policies on COVID and visitors

Modules

- Benign Hematology
- Pain Management
- Acute SCD Complications
- Disease Modifying and Curative Therapies
- Social Determinants of Health

SUPPORT

Sickle Cell Disease Advanced Practice
Providers Opportunities Resources and Training



SUPPORT ECHO® Telementoring Series:

3rd Thursdays 12:00pm-1:00pm EST



[What's an ECHO?](#)

Who should participate in the SUPPORT ECHO®?

Physician Assistants and Nurse Practitioners who would like to learn more about guideline-based sickle cell disease care, discuss cases and care models for people living with SCD.

What is a typical SUPPORT ECHO® Session like?

APPs connect to this highly interactive telementoring video conference by phone, tablet, PC or phone. During each clinic, one case, presented by an APP, is discussed among participants and an expert APP panel. The session also includes a brief didactic presentation on an aspect of sickle cell care. These topics might include Acute Chest Syndrome, Neurological complications, ED Management, Pain Management, among many more.

To register for the SUPPORT ECHO Series:

[Click HERE](#)

For more information, email sinerge@jhmi.edu

Evaluation

SCDTDP RC

- Pre/Post Assessment of SCD knowledge based on existing guidelines
- Confidence in knowledge of SCD

PSCRC

- Mentors completed Practice Change Readiness Assessment measure
- Study coordinator interviewed mentors and APPs
 - What is needed to best support APP training about managing SCD
 - What will be needed to extend the training beyond the pilot
 - Anticipated challenges
 - Other thoughts about the project

Site Characteristics - PSCRC

Site 1 - Pediatric

- Mentor/APP at different hospitals
- Mentor practice size = 40/month
- No co-management yet
- HU adherence (mentor) = 89.5%
- TCD adherence (mentor) = 95%

Site 2 – Adult

- APP in primary care clinic serving SCD
- Mentor practice size = 15/month
- Co-management with APP = 6
- HU adherence (mentor) = 40%
- Up to date PCV and PPSV (mentor) = 40%

Baseline Readiness Assessment

Site 1

- Highest ratings - innovation-specific knowledge and skills; compatibility/alignment of APP project with institution; observability of results highest possible
- Very strong – program champion; inter-organizational relationships; relative advantage of APP training as an approach to improving access to quality, evidence informed care
- Weakest – system in place to monitor how well practice changes are implemented; return to previous way of administering care; relative priority of SCD APP project in organization

Baseline Readiness Assessment

Site 2

- Highest ratings - innovation-specific knowledge and skills; compatibility/alignment of APP project with institution; observability of results highest possible
- Very strong – program champion; inter-organizational relationships; relative advantage of APP training as an approach to improving access to quality, evidence informed care
- Weakest – system in place to monitor how well practice changes are implemented; return to previous way of administering care; relative priority of SCD APP project in organization

Qualitative Interviews – Areas of Consensus

APP project very important strategy for increasing access to quality, evidence-informed care for individuals with SCD

- “(prior to the project) so many things (related to SCD care) were falling through the cracks”

Concerns about communication within and between health systems and about access to sub-specialists

Need for staff education about SCD

Importance of collegial relationship between APP and mentor, with easy and open communication

Importance of current funding support

What program success will look like

- “intelligently and confidently speaking about SCD (versus) superficial knowledge”

Site differences

APP availability

- One APP dedicated to SCD population, the other has other duties

New versus established relationship between mentor and APP

Access to social worker

Other provider buy-in

- “may feel threatened by an APP seeing the patients”

Future Goals

Add pain management as a quality indicator

Include patient voice in evaluation of quality of and access to care

Expand telehealth

Expand sickle cell education for APPs state-wide

Provide education about structural racism impact on SCD

Incorporate focus on social determinants of health