

ECHO Telementoring Applied to Managing Students With Seizures

The Benefits for School Nurses

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Project ECHO (Extension for Community Healthcare Outcomes) is an evidencebased telementoring approach to connect often siloed school nurses with a network of expert clinical and academic faculty, as well as school nurse colleagues throughout the country by engaging in case-based learning. Managing Students with Seizures ECHO: The Importance of School Nurses (MSwS ECHO) provided two cohorts of school nurses with an interactive, bidirectional educational program focused on various aspects of seizures and epilepsy relevant to school nurse practice. MSwS ECHO enhanced school nurses' confidence in caring and advocating for students with seizures and epilepsy, expanded school nurses' access to resources and professional networks, and provided the opportunity to collaborate with experts and colleagues to problem solve challenging real-life cases. The ECHO Model is a unique and effective teaching modality that can

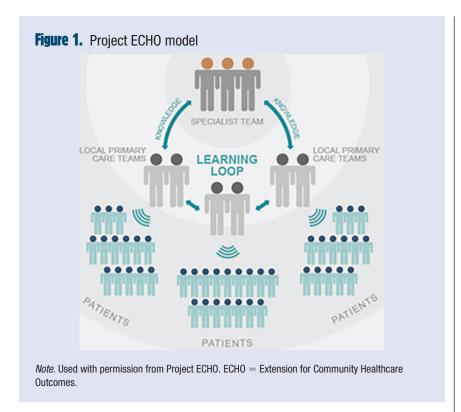
be applied to a variety of school health topics and chronic conditions. School nurses are encouraged to participate in forthcoming ECHO-based learning opportunities.

Keywords: epilepsy; seizures; Project ECHO; telementoring; school nursing; confidence; collaboration

Introduction

Approximately six out of 1,000 students in the United States have epilepsy (Zack & Kabou, 2017). Students with seizures and epilepsy have a unique set of healthcare needs and face challenges in the school setting as a result of inconsistent access to a school nurse, medication delegation barriers, and knowledge deficits in seizure management among school personnel (Hartman et al., 2016). To address these challenges and increase access to quality

care for children and youth with epilepsy, the Epilepsy Foundation (EF) partnered with the American Academy of Pediatrics (AAP) National Coordinating Center for Epilepsy (Center) to use the ECHO model in developing the Managing Students with Seizures ECHO: The Importance of School Nurses (MSwS ECHO) program. Project ECHO (Extension for Community Healthcare Outcomes) is an evidence-based telementoring approach that employs a partnership model in which partner organizations replicate the ECHO model to create learning communities that meet the needs of their professional network and patients. There are currently 412 global partner organizations (hubs) with 77 ECHO focus categories (University of New Mexico, 2020). The MSwS ECHO program was developed by the AAP ECHO hub in collaboration with the EF. This free educational program was promoted by the National Association of



School Nurses (NASN), with two NASN members contributing content and participating as expert faculty. The MSwS ECHO connected often siloed school nurses with a network of expert clinical and academic faculty, as well as school nurse colleagues throughout the country to participate in case-based learning, specific to meeting the needs of students with seizures and epilepsy.

Method

What Is Project ECHO?

Project ECHO is a teaching modality that uses videoconferencing technology to train and support healthcare providers through case-based learning and brief lectures on various health conditions (Arora et al., 2010; Arora et al., 2011). This model builds the capacity of healthcare providers to better manage subspecialty conditions in the setting in which they work. The ECHO model fosters an "all teach, all learn" philosophy by promoting bidirectional learning among faculty and participants (see Figure 1). The evidence-based design of the ECHO model embodies the following concepts: interactive, comanagement of

cases, peer-to-peer learning, and collaborative problem solving (Arora et al., 2010; Arora et al., 2011). The approach encourages participants to take an active role in the hour-long session by presenting a deidentified patient case, contributing to discussion based on their own experiences, and asking clarifying questions to enhance the discussion.

The evidence-based, telementoring structure of Project ECHO differs from traditional webinars that school nurses often attend to earn continuing nursing education credits. The interactive nature of ECHO encourages active participation in which participants can ask questions of both interdisciplinary experts and school nurse colleagues, as well as share their experiences in addressing challenging healthcare issues in the school setting, building a bidirectional community. In preparation for the ECHO session, participants are encouraged to submit a deidentified case they have experienced or are currently encountering in the school setting that they find particularly challenging. A brief lecture on a specific topic is presented at the outset of the session, with the

majority of the session devoted to case-based learning. The case presenter (participant or faculty) shares their case with the network, then expert faculty and other participants provide feedback and suggestions. This format promotes robust discussion specific to the case presentation and provides feasible recommendations for the network of learners that can be applied to their own practice settings.

Managing Students With Seizures ECHO: The Importance of School Nurses

School nurses and other school personnel from states in the United States with the highest prevalence of epilepsy were recruited through the NASN, other school-based organizations and associations, as well as AAP and EF membership networks. Institutional review board approval was granted through the AAP. The first iteration of MSwS ECHO launched in February 2019 and continued through June 2019. Eight 1-hour sessions were delivered to two cohorts every 3 weeks. Curriculum was adapted from the EF's school nurse training. The ECHO faculty included a multidisciplinary team of school nurses, epilepsy nurses, epileptologists, behavioral health providers, parents, youth with epilepsy, and educators. Content covered Epilepsy and Seizures: What Every School Nurse Should Know; Epilepsy Syndromes in Childhood; Stigma and Epilepsy (Social and Emotional Challenges); Seizure First Aid, Clusters and Seizure Emergencies; Rescue Therapies and Delegation; Comorbidities and Impact of Antiseizure Drugs; Early Death (Sudden Unexpected Death in Epilepsy and Suicide); Surgery and Dietary Therapies; Non-Epileptic Seizures and Behavior Disorders; 504 and IE (individual education) Planning (see Figure 2).

Results

A total of 48 school nurses representing 41 unique schools and seven states (Illinois, Massachusetts, Maine, New York, Ohio, Utah, and Oregon) participated in the ECHO

Figure 2. MSwS curriculum topics Session 1: Epilepsy and Seizures: What Every School Nurse Should Know Session 2: Epilepsy Syndromes In Childhood Session 3: Stigma and Epilepsy (Social and Emotional Challenges) Session 4: Seizure First Aid, Clusters and Seizure Emergencies Session 5: Rescue Therapies and Delegation **Session 6:** Comorbidities and Impact of Antiseizure Drugs **Session 7:** Early Death (SUDEP and Suicide) **Session 8:** Surgery and Dietary Therapies Session 9: Non-Epileptic Seizures and Behavior Disorders Session 10: 504 and IEP Planning *Note.* MSwS = Managing Students with Seizures; SUDEP = Sudden Unexpected Death in Epilepsy.

program. The majority of nurses (82%) served schools in suburban and rural areas (44% and 38%, respectively). Nurses from all levels of the school education system participated in the MSwS ECHO although the majority served elementary schools.

School nurses reported high satisfaction with ECHO sessions and the telementoring model. Benefits of MSwS

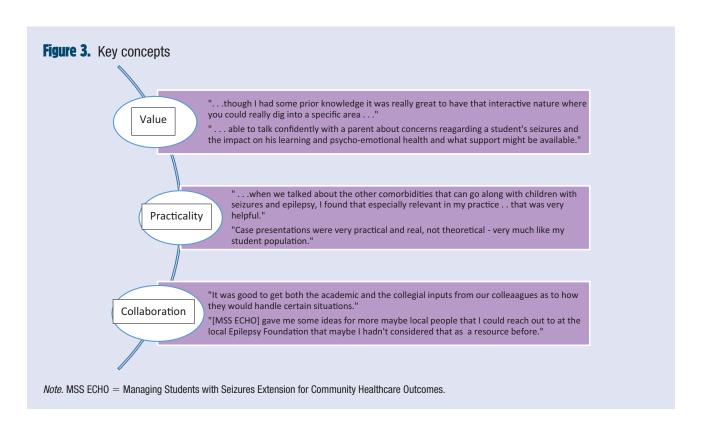
ECHO included improved knowledge of and interest in managing seizures in the school setting as well as contribution to their professional network. Based on retrospective self-report, school nurses indicated significant improvements in knowledge and confidence regarding management of seizures and comorbidities among students after participation in MSwS ECHO.

Two overarching themes, ECHO experience and ECHO impact, emerged from analysis of the postsession written comments and a post-ECHO virtual focus group interview. Key concepts that emerged were value, practicality, and collaboration. Participants valued the didactic presentations as a source of both new and review information and the opportunity to dialogue with expert faculty and other school nurses. Data also suggested that the ECHO affected the nurses' collaboration with colleagues, other school nurses, and community organizations (see Figure 3).

Discussion

Implications for School Nursing Practice

School nurses can benefit greatly by participating in ECHO learning opportunities to enhance care to students with specific or complex health conditions, as demonstrated by the success of MSwS ECHO. The ECHO model presents tremendous opportunities to advance the practice of school nursing and aligns with several practice



components of the Framework for 21st Century School Nursing Practice (Framework). As school nurses often function in solitary settings with limited occasion to confer and collaborate with other nurses, ECHO can increase school nurses' effectiveness through joint problem solving and best practice learning from each other and faculty experts. This demonstrates the Framework's practice components of evidence-based practice, chronic disease management, and collaborative communication (NASN, 2020). The "all teach, all learn" format is an effective tool to acknowledge and recognize the expertise of all participants. A primary benefit of the ECHO program is the safe environment for school nurses to share experiences and clarify information with content experts.

MSwS ECHO also encouraged school nurses to participate and become more confident and proficient in the use of videoconferencing. Despite some initial hesitation, participants became more comfortable with the video format and enjoyed the ability to engage with the faculty and participants. Videoconferencing skills can now be generalized to other platforms to improve school nurses' ability to participate in other relevant professional development, especially in the context of the COVID-19 global pandemic.

When discussing epilepsy in particular, we found it helpful to review foundational concepts and new classification nomenclature. The opening presentation "Seizures and Epilepsy: What Every School Nurse Should Know" served as a curriculum starting point. Discussions regarding nursing practice issues presented some challenges because nurse practice acts vary by state. Ensuing lively discussions facilitated the emergence of best practices through sharing of local school guidelines and helped connect school nurses to their colleagues. Differences in state laws were particularly evident in the discussion of delegation regulations. These differences, however, allowed nurses to learn about laws in other states and may prompt school nurses to

participate in legislative initiatives to improve practice.

The multidisciplinary MSwS ECHO faculty provided current information regarding medications, rescue therapies, and evidence-based treatment recommendations. We specifically addressed the prevailing misconception that respiratory depression is a common side effect of the low dose benzodiazepines that are used for rescue therapy. We were also able to discuss the appropriate use of emergency medical services after the administration of rescue therapies: The need to activate emergency medical services after administration of rescue medication is not automatic and is individualized per each student's seizure action plan (Hartman et al., 2016). Expert epileptologists reinforced this important message throughout the learning sessions. The interaction between the expert faculty and school nurses was mutually beneficial. The faculty physicians and advanced practice nurses increased program credibility and added valuable clinical practice information. Through their engagement with school nurse participants, faculty awareness of the obstacles that school nurses face in their unique practice setting increased.

The presentation of a case study facilitated application of the material presented. Case review served as an effective mechanism for school nurses to learn about formulating relevant questions, practice critical thinking, and hone problem-solving skills in real-world situations. School nurses participated in discussions about how to plan for care during the school day as well as beforeand after-school activities. These case study features emphasized practical ways to apply several practice components of the Framework for 21st Century School Nursing Practice, specifically direct care, chronic disease management, and collaborative communication.

Conclusion

MSwS ECHO prepared school nurses to advocate and care for students with seizures and epilepsy and to support school personnel in the management of seizures. The presentation of up-to-date, pragmatic information and the group critical thinking practice exercises instilled confidence in the school nurse's ability to meet the challenges of managing students with seizures and epilepsy in the school setting. School nurses who participated in MSwS ECHO reported high satisfaction with MSwS ECHO and ECHO model. The educational sessions were valuable, practical, and collaborative subsequently enhancing individual school nurse's knowledge and confidence in managing students with seizures. The ECHO model can be applied to a variety of topics relevant to school nursing (Shimasaki et al., 2019). School nurses are encouraged to take advantage of ECHO learning opportunities for epilepsy and other chronic health conditions. The ECHO model provides an interactive platform that supports learning from peers and experts, thereby expanding school nurses' professional networks and enhancing practical content application.■

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References

Arora, S., Kalishman, S., Thornton, K., Dion, D., Murata, G., Deming, P., Parish, B., Brown, J., Komaromy, M., Colleran, K., Bankhurst, A., Katzman, J., Harkins, M., Curet, L., Cosgrove, E., & Pak, W. (2010). Expanding access to hepatitis C virus treatment-Extension for Community Healthcare Outcomes (ECHO) project: Disruptive innovation in specialty care. Hepatology, 52(3), 1124-1133. https:// doi.org/10.1002/hep.23802

Arora, S., Thornton, K., Murata, G., Deming, P., Kalishman, S., Dion, D., Parish, B., Burke, T., Pak, W., Dunkelberg, J., Kistin, M., Brown, J., Jenkusky, S., Komaromy, M., & Qualls, C. (2011). Outcomes of treatment for hepatitis C virus infection by primary care providers. New England Journal of Medicine, 364(23), 2199-2207. https://doi.org/10.1056/nejmoa1009370

Hartman, A. L., Devore, C. D. L., Doerrer, S. C., & Section on Neurology, Council on School Health. (2016). Rescue medicine for epilepsy in education settings. Pediatrics, 137(1), Article e20153876. https://doi.org/10.1542/ peds.2015-3876

National Association of School Nurses. (2020). Framework for 21st Century School Nursing Practice™: Clarifications and updated definitions. NASN School Nurse, 35(4), 225-233. https://doi .org/10.1177/1942602X20928372

Shimasaki, S., Brunner Nii, P., Davis, L., Bishop, E., Berget, C., Perreault, C., & Thomas, J. F. "Fred." (2019). A school nurse application of the ECHO model. Journal of School Nursing. Advance online publication. https://doi. org/10.1177/1059840519861748

University of New Mexico. (2020). ECHO's impact. https://echo.unm.edu/echos-impact

Zack, M. M., & Kobau, R. (2017). National and state estimates of the numbers of adults

and children with active epilepsy-United States, 2015. MMWR Morbidity and Mortality Weekly Report, 66(31), 821-825. http://doi .org/10.15585/mmwr.mm6631a1

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