



Centre  
for Effective  
Practice

2019|20+ Yearbook

**Proven partners**  
**Proven people**  
**Proven practice**



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**Bernita Drenth**  
BA

**Bart Harvey**  
MD, MSc, PhD, MEd, FACPM, FRCPC

**Dan Gordon**  
PhD

**David Price**  
BSc, MD, CCFP, FCFP

**Helen Stevenson**  
BCOM, MSM, ICD.D

**Hugh MacLeod**  
MA

**John Yip**  
MBA, ICD.D

This yearbook focuses on work completed between April 2019 to September 2020.

# Table of contents

<b>1</b>	<b><u>Introduction</u></b>	<b><u>4</u></b>
	<b><u>1.1</u></b> <b><u>Helping Ontario thrive</u></b>	<b><u>4</u></b>
	<b><u>1.2</u></b> <b><u>Elevating care</u></b>	<b><u>6</u></b>
	<b><u>1.3</u></b> <b><u>Impact at scale</u></b>	<b><u>8</u></b>
	<b><u>1.4</u></b> <b><u>Driving better provider solutions</u></b>	<b><u>10</u></b>
<b>2</b>	<b><u>Proven partners</u></b>	<b><u>12</u></b>
<b>3</b>	<b><u>Proven people</u></b>	<b><u>14</u></b>
<b>4</b>	<b><u>Proven practice</u></b>	<b><u>16</u></b>
	<b><u>4.1</u></b> <b><u>Supporting better patient outcomes</u></b>	<b><u>16</u></b>
	<b><u>4.2</u></b> <b><u>Enhancing the provider experience</u></b>	<b><u>18</u></b>
	<b><u>4.3</u></b> <b><u>Creating solutions during COVID-19</u></b>	<b><u>20</u></b>
	<b><u>4.4</u></b> <b><u>Moving at the pace of the pandemic</u></b>	<b><u>22</u></b>
	<b><u>4.5</u></b> <b><u>Modernizing delivery</u></b>	<b><u>24</u></b>
	<b><u>4.6</u></b> <b><u>Improving pain and MSK management to safely reduce opioid prescriptions</u></b>	<b><u>26</u></b>
	<b><u>4.7</u></b> <b><u>Addressing the realities of mental health</u></b>	<b><u>28</u></b>
	<b><u>4.8</u></b> <b><u>Improving cancer care through guideline reviews</u></b>	<b><u>30</u></b>
	<b><u>4.9</u></b> <b><u>Tailoring care for our aging population</u></b>	<b><u>31</u></b>
	<b><u>4.10</u></b> <b><u>Promoting compassionate care in women’s health</u></b>	<b><u>32</u></b>
	<b><u>4.11</u></b> <b><u>Bridging gaps in early Lyme disease treatment</u></b>	<b><u>33</u></b>
	<b><u>4.12</u></b> <b><u>Collaborating to connect care</u></b>	<b><u>34</u></b>
<b>5</b>	<b><u>Proven practice, people and partners</u></b>	<b><u>35</u></b>

# Helping Ontario thrive



## Tupper Bean, Executive Director

The provision of care in Ontario has shifted.

It's a simple statement that speaks to a new opportunity that the CEP can best deliver based on our proven partners, people and practice.

As an agile organization, we moved quickly through the onset of the COVID-19 pandemic to advance the province's patient-centered mandate. The entire CEP team strategically rallied to support providers by developing an accessible and comprehensive [COVID-19 Resource Centre](#), including timely one-on-one clinical education (academic detailing).

Recognizing that effective health care stems from patients and not one pandemic, we maintained our lens on providers and the Ontarians accessing care, and evolved critical resources. Mental health, high unemployment rates, medication adherence, poverty and social determinants of health were all addressed through our online and up-to-date resources.

Since 2019, we developed 28+ [clinical tools](#), resources and programs, led 915+ [one-on-one education](#) visits, supported the processing of 117,000+ e-referrals, and completed 623+ cancer [guideline reviews](#). In our role as the trusted source for clinical and practical primary care, we also conducted guideline reviews and eHealth initiatives to support frontline workers in their targeted patient focus, especially during times of crisis.

This CEP yearbook catalogues the initiatives that help those who access and provide our services, the breadth of clinical tools we develop through our rigorous processes, and the partners who bring practice to people.

As Ontario's health care continues to evolve - be it in a pandemic or otherwise - proven, effective resources, delivered by expert people working in partnership, are key to successful patient outcomes. We're humbled to implement the standards of care that advance Ontario's health care and are focused on expanding its proactive future-forward approach.



## Bernita Drenth, Board Chair

Year over year, the Centre for Effective Practice uniquely positions itself to drive practice change based on policy and system-level needs. Through various partnerships and projects, it has proven to successfully help providers incorporate the latest recommendations and guidelines into their practices.

Especially in today's unprecedented environment due to COVID-19, the CEP's reputation for swiftly providing trusted, evidence-based clinical information is highly recognized. The CEP's [clinical resources and supports](#) are examples of its nimble work impacting the provision of care. From targeted, ongoing partnerships with other system leaders like the Ontario College of Family Physicians and the Nurse Practitioners' Association of Ontario, to 97% of surveyed providers reporting an increase in their clinical confidence because of them, the CEP's impact is prominent across every corner of the province.

Another CEP project proven to drive change is its [one-on-one clinical education](#) (academic detailing) for family physicians. Family physicians who participated in one-on-one education about opioids had a 37% improvement (compared to a group that didn't participate) in reducing the opioid doses for their patients over an 18-month period. This type of personalized educational outreach by pharmacists for family physicians has not only informed providers but also impacted behavior change.

From opioids to COVID-19, the CEP adapts and innovates to drive change, ensuring primary care is at the forefront. On behalf of the CEP's Board of Directors, I continually stand by the CEP's work and cannot wait to see what's beyond the horizon as we reimagine primary care for the future.

# Elevating care

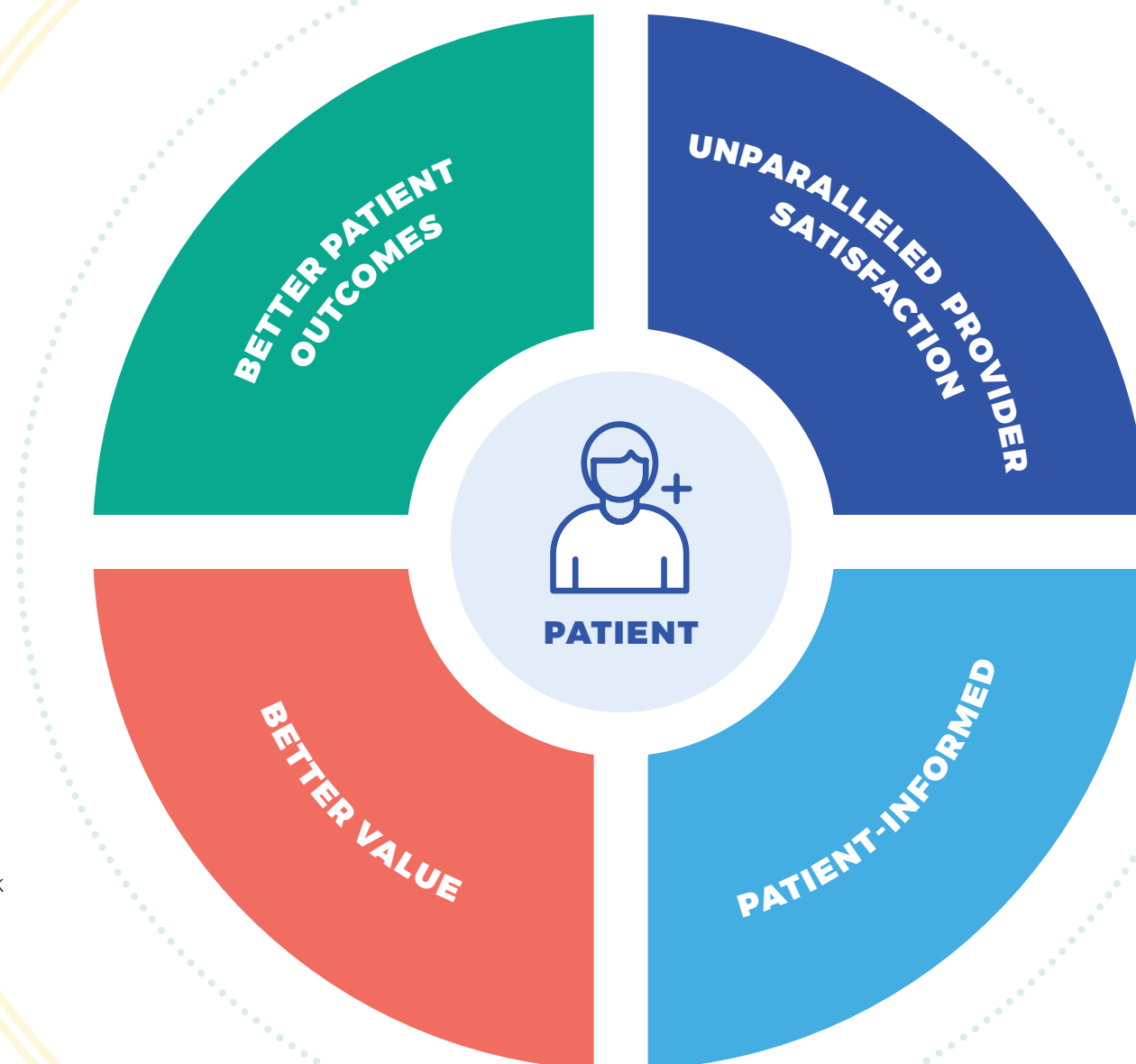
We're helping Ontario enhance health care through four key concepts.

## 10 million+ patients benefit each year

Across our clinical tools, one-on-one clinical education and guideline reviews, we help providers help Ontarians be healthy. For example, over 18-months, our one-on-one education reduced opioid doses by 37% compared to a matched control group.

## 80% return on investment

We're driving a sustainable health system by optimizing resources. As a result, the CEP's programs and services have generated at least an 80% return on investment. For example, with even a modest adoption rate, our CORE Back Tool can save the province over \$950,000 per year.



## 98% of providers give us a thumbs up

We offer real-time provider support through digital tools, or one-on-one education by other trained and experienced providers. When surveyed, 98% of providers reported that our tools and resources increased their knowledge of the evidence. Similarly, 98% of providers who participated in one-on-one education were satisfied with their visit.

## Patients provide feedback

By proactively engaging dozens of patients with lived experience, our team and leading clinicians develop tools that are informed by patients themselves. Alcohol use disorder, Lyme disease, women-centred HIV and manual therapy for MSK pain are just some of our patient-centered tools that have promoted a proactive, comprehensive patient care plan.

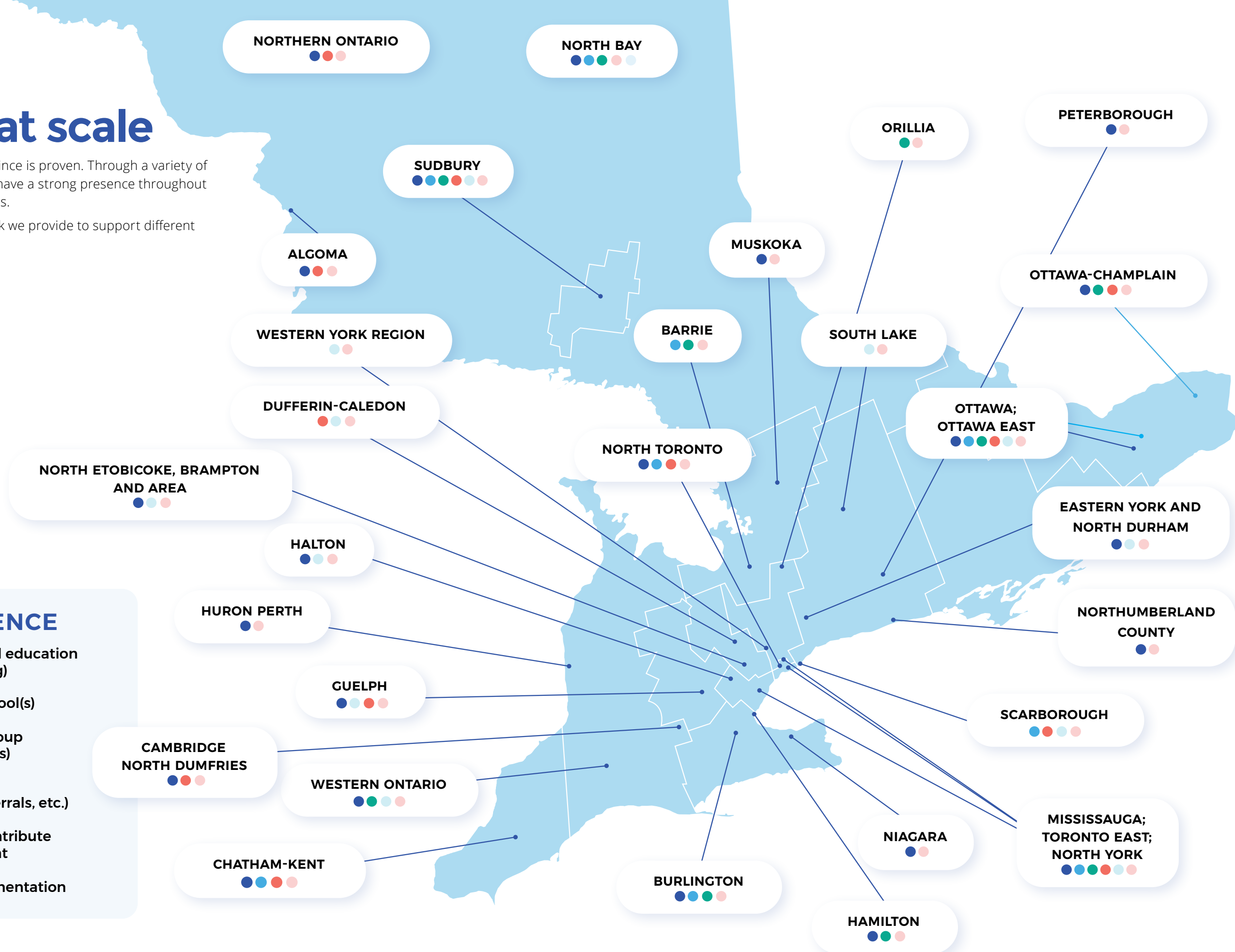
# Impact at scale

Our impact across the province is proven. Through a variety of primary care supports, we have a strong presence throughout Ontario Health Team regions.

Here is a sample of the work we provide to support different regions in Ontario.

## CEP'S PRESENCE

- One-on-one clinical education (academic detailing)
- Clinical lead(s) for tool(s)
- Clinical working group member(s) for tool(s)
- Digital integration (EMR testing, eReferrals, etc.)
- Provider(s) who contribute to tool development
- Clinical tool implementation

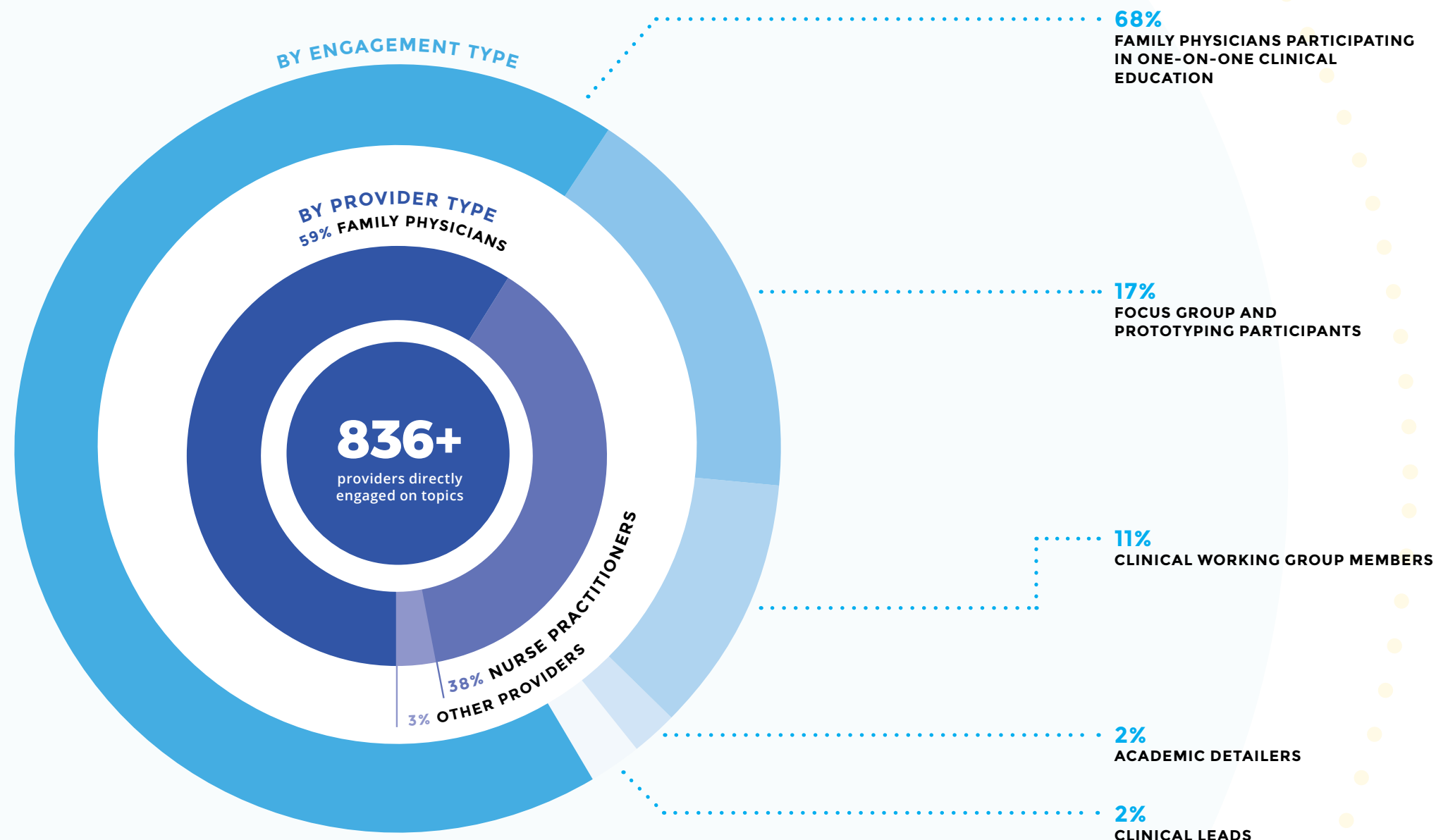




# Driving better provider solutions

The CEP is the leading primary care tool producer and reviewer of clinical guidelines in the province. Throughout our development process, we have more direct provider involvement, unmatched rigour and higher quality, which allow us to develop the province's most trusted clinical tools, resources and services.

## Direct provider involvement



"I find your tools invaluable and share them with my colleagues"

**DR. SALLY SHARPE**  
YORK, ON

**Leading primary care clinical tool producer**

**28+**  
tools developed

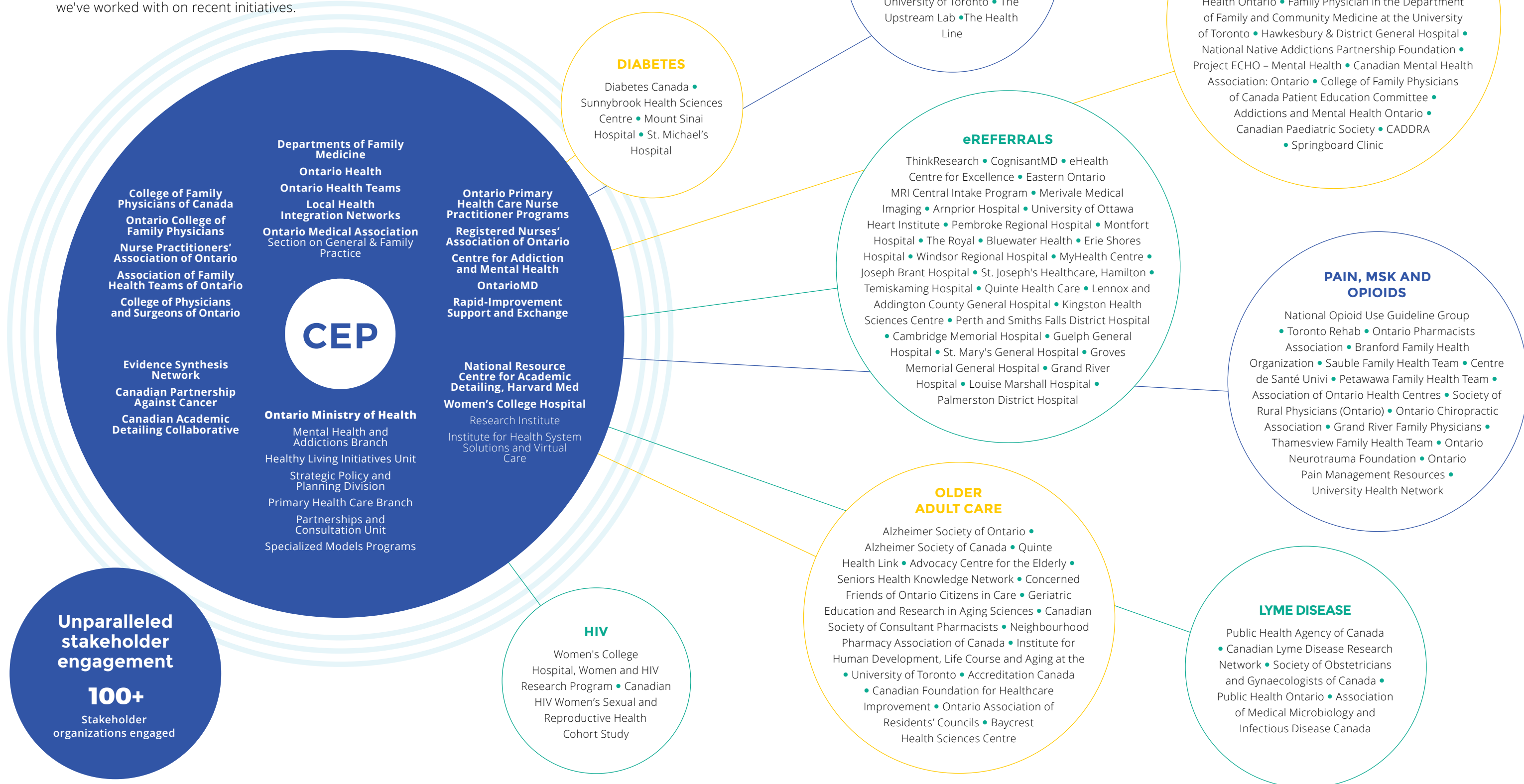
**10 million+**  
patients reached

**Providers love and share our tools**

**2/3**  
of primary care providers access our site each month

# Across healthcare partners

Every year, we do more by working with dozens of stakeholder organizations from across the system to provide value that impacts providers and their patients daily. The diagram below illustrates who we've worked with on recent initiatives.



# Guided by leaders

Our strong reputation among family physicians and primary care nurse practitioners allows us to attract highly-regarded experts and clinical leaders from across Canada. This lets us act quickly, while still keeping the quality providers love, to drive results and impact care.



**Ainslie Gray**

MD

[ADHD in adults](#)



**Andrea Moser**

MD, PhD

[Use of antipsychotics in behavioural and psychological symptoms of dementia](#)



**Cecilia Newton**

MSC, MD, CCFP

[Early Lyme disease](#)



**Deanna Telner**

MD, MED, CCFP, FCFP

[Urinary incontinence](#)



**Derelie Mangin**

MBCHB (OTAGO), DPH (OTAGO), FRNZCGP (NZ)

[COVID-19](#)



**Felicia Presenza**

BSc, MD, CCFP (COE)

[Benzodiazepine use and proton pump inhibitor use](#)



**Janice Harvey**

MD, CCFP(SEM), FCFP DIP. SPORT MED.

[Manual therapy for MSK pain](#)



**Jose Silveira**

BSc, MD, FRCPC, DIP, ABAM

[Alcohol use disorder](#)



**Mark Silverman**

MD, CCFP

[Adult depression](#)



**Mona Loutfy**

MD, FRCPC, MPH

[Women-centred HIV care](#)



**Risa Bordman**

MD, CCFP-PC, FCFP

[Type 2 diabetes](#)



**Shannon Kenrick-Rochon**

MN, NP-PHC

[Concussion](#)



**Sid Feldman**

MD, CCFP, FCFP

[Use of antipsychotics in behavioural and psychological symptoms of dementia](#)



**Tara Baldisera**

MD, CCFP

[Concussion](#)



## EXPERT ADVISOR SPOTLIGHT

### PAYAL AGARWAL, MD, CCFP, BASC

Through experience and education in medicine, design and human factors, Payal's unique expertise as a family physician and human factors engineer helps us re-imagine our tool development process to better suit providers, while investigating innovative ways to integrate our work in the digital space. She brings a hardened, rigorous frame around design and usability to medicine.

## Clinical working group members

### Adult depression

- Cindy Pritchard, RN(EC), BScN, NP-PHC
- Colin Wilson, MD
- Jose Silveira, BSc, MD, FRCPC, DIP, ABAM
- Mireille St-Jean, MD, CCFP(AM), FCFP

### Alcohol use disorder

- Claudette Chase, MD, FCFP
- Ken Lee, MD
- Natasha St-Onge, MD

### ADHD in adults

- Christopher Bentley, MEd, MD, FRCPC
- Joan Flood, BSc, MD, CCFP, FCFP
- Leah Skory, MD, CCFP
- Mireille St-Jean, MD, CCFP(AM), FCFP

### Benzodiazepine use

- Debora Steele, MScN, NP-PHC, CPMHNC(C), GNC(C)
- Jane Cox, MD, CCFP
- Shelly Christensen, RN(EC), MN

### Concussion

- David Greenberg, BA, MD
- Dawn Tymianski, MN, MA, PhD, NP-Adult
- Diana Velikonja, PhD, CPsych, MScCP
- Lisa Fischer, BScPT, MD, CCFP (SEM), FCFP, DipSportMed
- Shawn Marshall, MSc, MD, FRCPC

### COVID-19

- Claudia Mariano, MSc, NP-PHC
- Darren Larsen, MD, CCFP, MPLC
- Dominik Nowak, MD, MHSc, CCFP, CHE
- Jennifer P. Young, MD, FCFP-EM
- Lee Donohue, MD, CCFP, MHSc, MPLC
- Mira Backo-Shannon, MD, BSc, MHSc
- Paul Preston, MD, CCFP, CCPE, CHE
- Rob Annis, MD, CCFP
- Soreya Dhanji, MD, CCFP

### Early Lyme disease

- John Jenkins, MD, CCFP
- Kieran Moore, MD, CCFP(EM), FCFP, MPH, DTM&H, FRCPC
- Liz Zubek, MD, CCFP, FCFP
- Marg Sanborn, MD, CCFP, FCFP
- Marnie LePage
- Samir Patel, PhD, FCCM
- Todd Hatchette, MD, FRCPC
- Valerie Winberg, NP

### Manual therapy for MSK pain

- David Dos Santos, B.Sc., D.C., FCCPOR(C), FCCO(C)
- Erica Weinberg, BSc, MSc, MPhil, MD
- Lindsey Rebeiro, BScH, DC
- Lynn K. Cooper, BES (patient with lived experience)

### Proton pump inhibitor use

- Debora Steele, MScN, NP-PHC, CPMHNC(C), GNC(C)
- Jane Cox, MD, CCFP
- Katherine Trip, MN, NP
- Michael Schroder, MPH, RN(EC)

### Type 2 diabetes during COVID-19

- Gray Moonen, MD, MSc, HBSc
- Harpreet S. Bajaj, MD, MPH
- James Kim, MD
- Noah Ivers, MD, PhD
- Onil Bhattacharyya, MD, PhD
- Payal Agarwal, MD, CCFP, BASC
- Tara Kiran, MD, MSc.

### Social care guidance in the COVID-19 context

- Alicia Fung, BA
- Andrew Terence Lam, MPH
- Andrew Pinto, MD, CCFP, FRCPC, MSc.

- Anne Rucchetto, MSc
- Archana Gupta, MD, CCFP, MPH, PhD(c)
- Gary Bloch, MD, CCFP
- Jillian Macklin, MSc
- John Ihnat, BA, MD, CCFP
- Katherine Rouleau, MD
- Kelsey Lawson, MD, CCFP
- Megan Parry, RN, MSc Nursing
- Noor Ramji, MD
- Nothando Swan, MD, CCFP
- Rachelle Perron, RN
- Ritika Goel, MD, MPH, CCFP
- Rose Wang, MPH
- Tara Kiran, MD, MSc, CCFP, FCFP
- Vanessa Redditt, MD, CCFP

### Women-centred HIV care

- Adriana Carvalhal, MD, MSc, PhD
- Alice Welbourn, PhD, FRCOG (Hon)
- Amber Gooden, BSc
- Angela Kaida, PhD
- Brenda Gagnier, PRA
- Carmen Logie, MSW, PhD
- Denise Jaworsky, MD
- Heather Wong
- Jay MacGillivray, Reg. Mid.
- Jesleen Rana, MD, MPH
- Manjulaa Narasimhan, PhD
- Mark Yudin, MD, MSc, FRCSC
- Mary Kestler, MD
- Mary Ndung'u, BA
- Melanie Lee, PRA
- Mina Kazemi, MSc
- Mona Loutfy, MD, FRCPC, MPH
- Muluba Habanyama, PRA
- Nadia O'Brien, MPH, PhD
- Neora Pick, MD, FRCPC
- Rebecca Gormley, MPH
- Rebeccah Parry, PRA
- Shaz Islam, RA
- Stephanie Smith, PRA
- Valerie Nicholson, PIRA
- Wangari Tharao, MA



# Supporting better patient outcomes

- ✓ Includes digitized tools and resources (EMR, web-based, etc.)
- ✓ Contextualized for COVID-19
- ✓ Available to family physicians and nurse practitioners across all OHTs

Ontario family physicians and primary care nurse practitioners trust tools developed by the CEP to provide the information they need, when they need it, to advance patient health care and outcomes.

In consultation with providers and partners, we act quickly. We learn what topics, in which context, are needed. Where we have a tool, we actively review it to ensure it responds to the current environment and profile it. Where a tool doesn't exist, we develop knowledge products that are both accessible and timely.

## Providers rely on us

67% of Ontario providers reported using CEP tools and resources during and outside of patient visits for decision-making and patient education.

## We impact behaviour change

CEP tools and resources influence and change provider behaviour for improved patient care. They have led to more comprehensive assessments and fewer inappropriate tests. 81% of providers reported improved prescribing, testing and screening patterns, and 67% reported improved referral patterns as a result of the CEP.

## Our tools help reduce costs

They have proven to support the reduction of inappropriate diagnostic imaging referrals, which helps the system save money. Data suggests we reduced inappropriate imaging through the [CORE Back EMR Tool](#) (no new referrals for low back pain imaging during 3-month post-intervention period). Assuming it's adopted by 15% of family physicians in Ontario and projecting a 25% reduction in imaging, it could lead to at least \$950,000 in annual savings.

"The CEP affirmed what I was doing and gave me access to resources that will enable me to do my job better and more safely."

**LORNA GILLEN, MD**  
THUNDER BAY

"One of our challenges is that 90% of [other tools and] guidelines are not written by primary care doctors. What's available tends to be disease specific and doesn't focus on complex cases—for example, somebody with diabetes but also has Chronic Obstructive Pulmonary Disease (COPD), is a smoker, and is borderline poor. CEP helps us work in the real world."

**DAVID PRICE, BSC, MD, CCFP, FCFP**  
HAMILTON

## Exceptional provider uptake

98%

of primary care providers using our tools and resources report an increase in knowledge of the evidence.

97%

of primary care providers using our tools and resources report an increase in clinical confidence.

96%

of patients and providers agreed that the CEP tool helps to promote a shared understanding of early Lyme disease between patients and healthcare providers.

Patient resources to complement provider tools



# Enhancing the provider experience

✓ Includes digitized tools and resources (EMR, web-based, etc.)

✓ Contextualized for COVID-19

✓ Available across all OHTs (for certain topic areas)

Family physicians practicing in diverse clinical settings need customized solutions. We offer family physicians throughout Ontario the opportunity to have [one-on-one, evidence-informed discussions](#) with another provider (academic detailer) on key topics, based on their individual needs.

With a 98% family physician satisfaction rating, these discussions have also proven to lead to positive behaviour change. Family physicians who participated in the CEP's one-on-one discussions about pain and opioids had a 37% improvement over matched controls in reducing opioid doses for their patients over an 18-month period. They also demonstrated a 58% improvement in reducing high-risk opioid doses for their patients (i.e. morphine-equivalent doses > 200mg/day) compared to a matched control group within the same time period.

## Topics offered include:

- Opioid therapy for patients living with chronic non-cancer pain
- Non-pharmacological and non-opioid options for chronic non-cancer pain
- Opioid use disorder
- Benzodiazepine use in older adults
- Delivering primary care during COVID-19
- Type 2 diabetes: non-insulin pharmacotherapy

**915**

visits (2,295 in total since 2018)

**98%**

physicians were satisfied with their visit

**572**

family physicians visited (916 in total since 2018)

**Unsurpassed reach with exponential patient impact**

"Academic Detailing is simply the most effective method of changing clinical practice to best practice."

**PAUL PRESTON, MD**  
NORTH BAY

Detailers lead a seminar about benzodiazepine use at OCFP's Annual Scientific Assembly.

Tupper Bean, the CEP's executive director, presents a keynote speech at Harvard Medical School's NaRCAD conference, highlighting our ongoing relationship with the school's clinical outreach education centre.

## Proven people

### Clinical service director:

**Loren Regier**  
BSP

### Clinical topic leads:

**Arun Radhakrishnan**  
MSC, MD, CM, CCFP  
Chronic non-cancer pain and opioids

**Felicia Presenza**  
BSC, MD, CCFP (COE)  
Benzodiazepine use in older adults

**Risa Bordman**  
MD, CCFP-PC, FCFP  
Type 2 diabetes

### CEP's academic detailers:

Injeong Yang, BSC, PHARM, RPH  
Jana McNulty, BSCPHM, CDE  
Mathew DeMarco, BSCPHM, PHARM, RPH  
Nicole Seymour, BSCPHARM, PHARM, ACPR, RPH  
Silvana Ferrara, BSCPHM, RPH  
Sachin Duggal, HBSC, PHARM, RPH  
Trish Rawn, BSCPHM, PHARM

### FHT detailing partners:

Hamilton Family Health Team  
Health for All Family Health Team  
Prince Edward Family Health Team  
Thames Valley Family Health Team

"As always, my discussion with the detailer was based on my personal clinical concerns...I find this to be a very valuable return on my investment of time."

**SID FELDMAN, MD, CCFP, FCFP**  
NORTH YORK

# Creating solutions during COVID-19

✓ Includes digitized tools and resources (web-based, etc.)

✓ Available to family physicians and nurse practitioners across all OHTs

We've shifted gears to meet providers' needs from the onset of the pandemic. Since mid-March 2020, we have developed valuable provincial resources and tailored one-on-one education to help provide guidance and support, using the best-available evidence. While also assisting the Canadian Medical Association with content for their national resources, we actively keep our [COVID-19 Resource Centre](#) current by ensuring the information is reliable and up to the minute.

Our team and board members also contribute solutions to Ontario's COVID-19 Evidence Synthesis Network, among other groups. The world changed quickly and we've proven that we can change with it.

## COVID-19 Resource Centre visits by category

**53%**  
**COVID-19 CLINICAL  
GUIDANCE AND CARE**

**24%**  
**ONTARIO ASSESSMENT  
CENTRES**

**12%**  
**PRIMARY CARE  
OPERATIONS**

**5%**  
**CHRONIC CONDITIONS/  
DISEASE MANAGEMENT**

**3%**  
**SPECIFIC POPULATIONS**

**1%**  
**LOCAL SERVICES**

**.6%**  
**PREVENTATIVE CARE**

**.4%**  
**PAIN**

Nearly 90% of family physicians in Ontario have accessed our COVID-19 resources

**30,000**

web visitors to our COVID-19 resources

“What CEP has done is facilitate a learner-to-provider use of resources that are constantly being updated, that are reviewed against the evidence and are also relevant to current policy decisions around changes to the health care system.”

**NICOLE RANGER, MD**  
**SUDBURY**

## Proven people

**Clinical Lead:**  
**Derelie Mangin**

MBCHB (OTAGO), DPH (OTAGO),  
FRNZCPG (NZ)

**Clinical working group members:**

Claudia Mariano, MSc, NP-PHC  
Darren Larsen, MD, CCFP, MPLc  
Dominik Nowak, MD, MHSc,  
CCFP, CHE  
Jennifer P. Young, MD, FCFP-EM

Lee Donohue, MD, CCFP,  
MHSc, MPLc

Mira Backo-Shannon, MD,  
BSc, MHSc

Paul Preston, MD, CCFP, CCPE, CHE  
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James Kim, MD

Noah Ivers, MD, PhDw

**Social care guidance in the COVID-19 context**

Alicia Fung, BA

Andrew Terence Lam, MPH

Andrew Pinto, MD, CCFP,  
FRCPC, MSc.

Anne Rucchetto, MSc

## Proven partners

Association of Family Health  
Teams of Ontario

Department of Family  
and Community Medicine,  
University of Toronto

Department of Family Medicine,  
McMaster University

The HealthLine

Nurse Practitioners' Association  
of Ontario

Ontario College of Family  
Physicians

Ontario Medical Association  
Section of General and Family  
Practice

Ontario Ministry of Health

Archana Gupta, MD, CCFP, MPH,  
PhD(c)

Gary Bloch, MD, CCFP

Jillian Macklin, MSc

John Ihnat, BA, MD, CCFP

Katherine Rouleau, MD

Kelsey Lawson, MD, CCFP

Megan Parry, RN, MSc Nursing

Noor Ramji, MD

Nothando Swan, MD, CCFP

Rachelle Perron, RN

Ritika Goel, MD, MPH, CCFP

Rose Wang, MPH

Tara Kiran, MD, MSc, CCFP, FCFP

Vanessa Redditt, MD, CCFP

Provincial Primary Care  
Advisory Table

Registered Nurses' Association  
of Ontario

The Upstream Lab

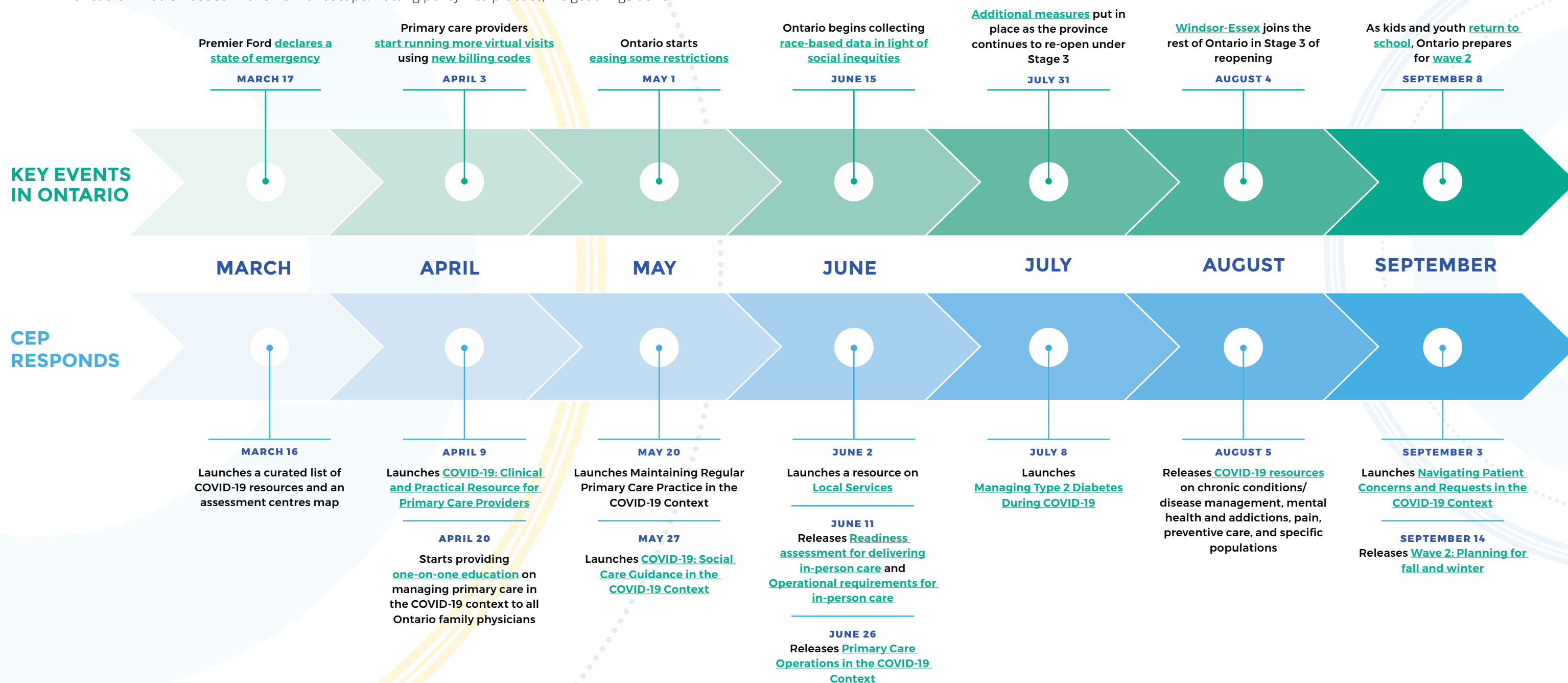
**86%**

of visitors said  
accessing the  
[COVID-19 Resource  
Centre](#) will change  
the way they  
provide care  
to patients

# Moving at the pace of the pandemic

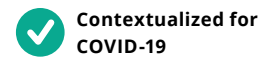
From the beginning, the CEP has responded to the needs of Ontarians. Our first [COVID-19](#) clinical resource launched on Monday, March 16 - the day before a state of emergency was announced in Ontario.

Since then, we've created a comprehensive suite of resources and services that align with or are ahead of what is needed in this new landscape. Putting policy into practice, we get things done.





# Modernizing delivery



Contextualized for  
COVID-19



Available across  
all OHTs

E-health is Ontario's most important tool in supporting physical distancing requirements while continuing to meet the province's high healthcare standards. Employing a digital-first approach, the CEP ensures practitioners have access to digital and EMR-enabled tools, virtual one-on-one education (academic detailing) and eReferrals.

## All-device access

We've done the legwork to ensure our tools are accessible across different devices and platforms so primary care providers can get right to work without worrying about compatibility.

## EMR-integrated tools

We meet providers where they are: using EMRs like Telus PS Suite, Accuro and OSCAR. This is why solo providers recognize the value we bring and are ten times more likely to use CEP EMR tools compared to team-based providers.

## Strengthening eReferrals

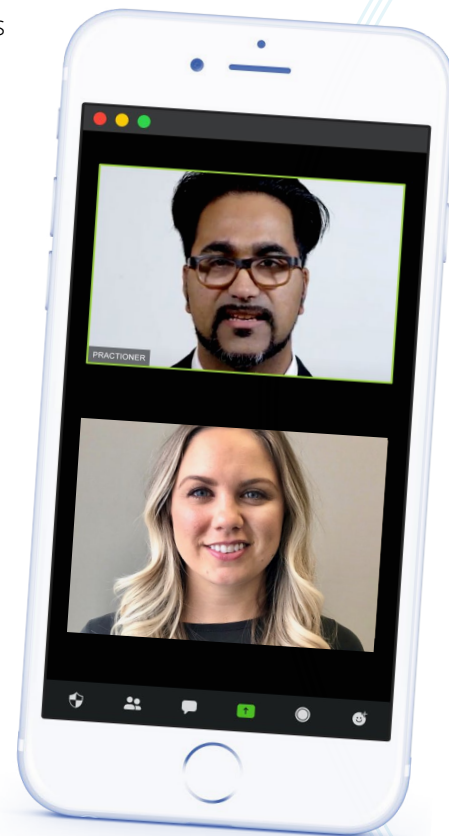
The CEP, along with the eHealth Centre of Excellence's Ontario eServices Program, Think Research and CognisantMD have come together to improve access to patient care across the province through the delivery of secure, EMR-integrated electronic referrals from within the Ocean eReferral Network solution. This strategic partnership supports a collaborative and standardized approach to eReferral across multiple LHINs, including Champlain, Erie St. Clair, North East, South East, Waterloo Wellington, South West and Hamilton Niagara Haldimand Brant.

## Offering virtual visits

As our world adopts virtual visits, so have our academic detailers. Trained to provide balanced [one-on-one discussions](#) with family physicians at their convenience, our academic detailers quickly adopted the technology needed to deliver virtual visits to ensure uninterrupted access to our service.

"Just today after doing a baseline assessment [using a CEP EMR tool] for one of my patients, he thanked me for taking the time to address his concerns regarding his pain. I think this is an invaluable tool that would greatly aid our clinical care in regards to managing pain, thanks again!"

**MARK SHEW, MD**  
SCARBOROUGH



## Proven partners

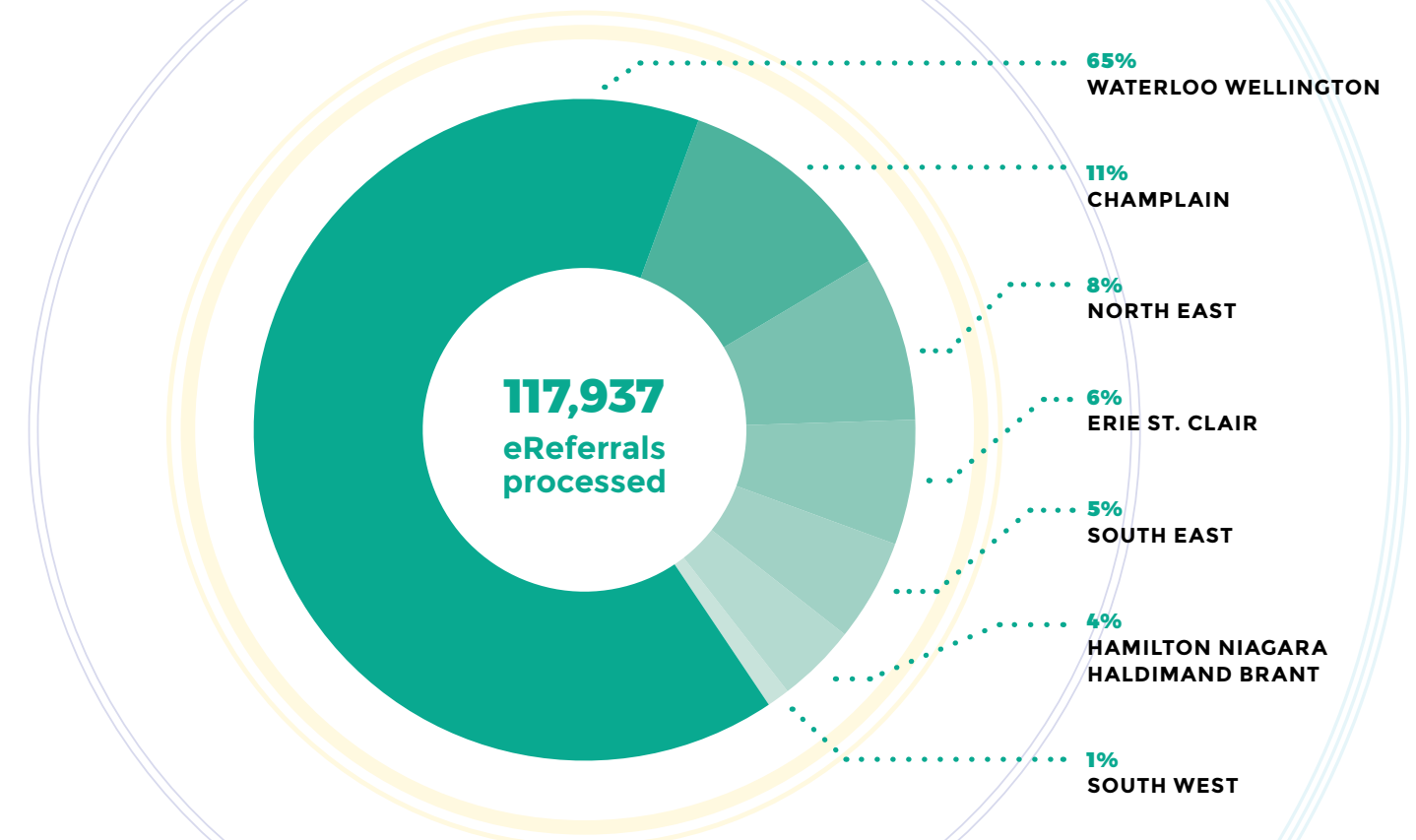
**eReferrals:**  
ThinkResearch

CognisantMD

eHealth Centre for Excellence

## Healthcare sites supported

Arnprior Hospital	Guelph General Hospital	Montfort Hospital	St. Mary's General Hospital
Bluewater Health	Joseph Brant Hospital	MyHealth Centre	The Royal Ottawa Hospital
Cambridge Memorial Hospital	Kingston Health Science Centre	Palmerston District Hospital	Temiskaming Hospital
Eastern Ontario MRI Central Intake Program	Lennox and Addington County General Hospital	Pembroke Regional Hospital	University of Ottawa Heart Institute
Erie Shores Hospital	Louise Marshall Hospital	Perth and Smiths Falls District Hospital	Windsor Regional Hospital
Grand River Hospital	Merivale Medical Imaging	Quinte Health Care	
Groves Memorial General Hospital		St. Joseph's Healthcare Hamilton	



# Improving pain and MSK management to safely reduce opioid prescriptions

✓ Includes digitized tools and resources (EMR, web-based, etc.)

✓ Contextualized for COVID-19

✓ Available across all OHTs

The CEP takes pride in two numbers, 37 and 58. Over 18 months, the CEP's academic detailers supported family physicians to achieve a 37% improvement over matched controls in reducing the opioid doses for their patients, and a 58% improvement over matched controls in reducing the opioid dose for their patients on high-risk doses (i.e. morphine-equivalent doses >200mg/day). With rising rates of opioid deaths across Ontario, especially over the past six months, these two numbers speak to the benefit that the CEP brings to families and communities across the province.

We worked with the Ontario Neurotrauma Foundation to develop a tool on [concussion](#), and the Ontario Chiropractic Association to create a tool on [manual therapy for MSK pain](#). The Concussion Tool was presented at OCFP's Annual Scientific Assembly during a session on concussion management, allowing for a broader exploration of the tool for providers who most need to be aware of its availability.

Through TELUS PS Suite EMR and Ocean, the CEP adapted the [CORE Back Tool](#) and the [Osteoarthritis Tool](#) into custom forms. In addition to TELUS PS Suite and Oscar EMR availability, our [Management of Chronic Non-Cancer Pain Tool](#) was translated into a fully web-based tool, making it more accessible to providers. These digital versions enable providers to access information more easily on their preferred platforms.

**37%**

improvement among participating family physicians over matched controls in reducing opioid doses for patients (over 18 months).

**58%**

improvement among participating family physicians over matched controls in reducing the opioid dose for patients on high-risk opioid doses (over 18 months).

## Proven people

### Clinical leads:

**Arun Radhakrishnan**

MSC, MD, CM, CCFP  
Chronic non-cancer pain and opioids

**Janice Harvey**

MD, CCFP(SEM), FCFP  
DIP. SPORT MED.  
Manual therapy for MSK pain

**Shannon Kenrick-Rochon**

MN, NP-PHC  
Concussion

**Tara Baldisera**

MD, CCFP  
Concussion

### Clinical working group members:

#### Manual therapy for MSK pain

David Dos Santos, BSc, DC, FCCPOR(C), FCCO(C)

Erica Weinberg, BSc, MSc,MPhil, MD

Lindsey Rebeiro, BScH, DC

Lynn K. Cooper, BES (patient with lived experience)

#### Concussion

Dawn Tymianski, MN, MA, PhD, NP-Adult

David Greenberg, BA, MD Diana Velikonja, PhD, CPsych, MScCP

Lisa Fischer, BScPT, MD, CCFP (SEM), FCFP, DipSportMed

Shawn Marshall, MSc, MD, FRCPC

## Proven partners

Association of Ontario Health Centres

Branford Family Health Organization

Center de Santé Univi

Grand River Family Physicians

Local Health Integration Networks

National Opioid Use Guideline Group

Nurse Practitioners' Association of Ontario

Ontario Chiropractic Association

Ontario College of Family Physicians

Ontario Neurotrauma Foundation

Ontario Pharmacists Association

Petawawa Family Health Team

Project ECHO – Mental Health

Sauble Family Health Team

Society of Rural Physicians (Ontario)

Thamesview Family Health Team

Toronto Rehab

University Health Network

# Addressing the realities of mental health

✓ Includes digitized tools and resources (EMR, web-based, etc.)

✓ Contextualized for COVID-19

✓ Available across all OHTs

Understandably, addictive behaviour and mental health are becoming more acute in the context of the global pandemic. Early awareness and diagnosis is key to supporting addiction prevention and mental health support for Ontarians.

Building on our suite of [mental health and addictions tools](#), most recently, the CEP has developed tools for [alcohol use](#), [major depressive disorder for adults](#), and integrated a [depression and anxiety tool](#) for youth into Accuro as an EMR form. The CEP's [COVID-19 Resource Centre](#) also includes resources specific to mental health and addictions.

Coinciding with ADHD month in Ontario, the CEP [released a tool](#) that helps providers screen, diagnose and implement treatment for adult patients with ADHD.

Additionally, the increased use of alternate nicotine delivery products, such as e-cigarettes and vaping devices, is changing the landscape of nicotine use across Canada. In response to the uncertainty in this evolving field, the CEP and the Centre for Addiction and Mental Health (CAMH) partnered with a group of tobacco cessation experts from across Canada to develop Lower-Risk Nicotine Use Guidelines. These guidelines inform consumers and healthcare providers about the potential risks and harms associated with using e-cigarettes and other alternate nicotine delivery devices.

**3,412**  
**TREATMENT OF ADULT**  
**MAJOR DEPRESSIVE**  
**DISORDER (MDD) TOOL**

Nearly half of family physicians and primary care nurse practitioners in Ontario downloaded our most recent resources on mental health.

**4,322**  
**ALCOHOL USE**  
**DISORDER TOOL**

“As a physician, I value that the topics we’ve worked on are for providers, by providers. Gathered directly from their needs, providers shape the resources from the beginning though to their final form. These resources are intended to be usable in community office settings addressing practice realities and considering resource and time constraints involved in clinical practice. It has been a rewarding experience.”

**JOSE SILVEIRA, BSC, MD, FRCPC, DIP, ABAM**  
**TORONTO**

## Proven people

### Clinical or project leads:

#### Ainslie Gray

MD  
[ADHD in adults](#)

#### Jose Silveira

BSC, MD, FRCPC, DIP,  
ABAM  
[Alcohol use disorder](#)

#### Mark Silverman

CCFP  
[Major depressive disorder](#)

#### Peter Selby

MBBS, CCFP, FCFP, MHSc,  
dipABAM, DFASAM  
Lower-risk nicotine use

### Clinical working group members:

#### ADHD in adults

Christopher Bentley,  
MEd, MD, FRCPC  
Joan Flood, BSc, MD, CCFP, FCFP  
Leah Skory, MD, CCFP  
Mireille St-Jean, MD, CCFP(AM),  
FCFP

#### Alcohol use disorder

Claudette Chase, MD, FCFP  
Ken Lee, MD  
Natasha St-Onge, MD

#### Adult depression

Cindy Pritchard, RN(EC), BScN,  
NP-PHC  
Colin Wilson, MD  
Jose Silveira, BSC, MD, FRCPC,  
DIP, ABAM  
Mireille St-Jean, MD, CCFP(AM),  
FCFP

## Proven partners

Addictions and Mental Health  
Ontario

Canadian ADHD Resource  
Alliance

Canadian Mental Health  
Association: Ontario

Canadian Paediatric Society

Centre for Addiction and Mental  
Health

College of Family Physicians  
of Canada Patient Education  
Committee

Department of Family and  
Community Medicine at the  
University Health Network

Hawkesbury & District General  
Hospital

Mental Health and Addictions  
Leadership Advisory Panel

Ontario College of Family  
Physicians

National Native Addictions  
Partnership Foundation

Nurse Practitioners' Association  
of Ontario

Ontario Family Caregivers'  
Advisory Network

Ontario's Mental Health and  
Addictions Leadership Advisory  
Council

Project ECHO – Mental Health  
Springboard Clinic

# Improving cancer care through guideline reviews

Contributing to the fight against cancer, the CEP continues to work on the Canadian Partnership Against Cancer's Cancer Guidelines Database. [Reviewing and appraising](#) hundreds of guidelines on cancer care, trained assessors identify, appraise and summarize cancer guidelines using the AGREE II Instrument, doing the heavy lifting so that providers can ensure they use the highest-quality guidelines.

## Proven process

During each database updating cycle:



# Tailoring care for our aging population



Includes digitized tools and resources (EMR, web-based, etc.)



Contextualized for COVID-19



Available across all OHTs

Our commitment to Ontario's growing older adult population remains steadfast. Recently, the CEP developed a [Managing Proton Pump Inhibitor Use in Older Adults Tool](#), updated a caregiver guide on [antipsychotics and dementia](#), and collaborated to build an IOS and Android app on the topic. We also launched a tool and one-on-one education on [benzodiazepine use in older adults](#), and held a seminar at OCFP's Annual Scientific Assembly to further inform providers about the topic.

## Proven people

### Clinical leads:

#### Felicia Presenza

BSC, MD, CCFP (COE)

[Proton pump inhibitor use in older adults](#)

[Benzodiazepine use in older adults](#)

#### Andrea Moser

MD, PhD

[Use of antipsychotics in behavioural and psychological symptoms of dementia](#)

#### Sid Feldman

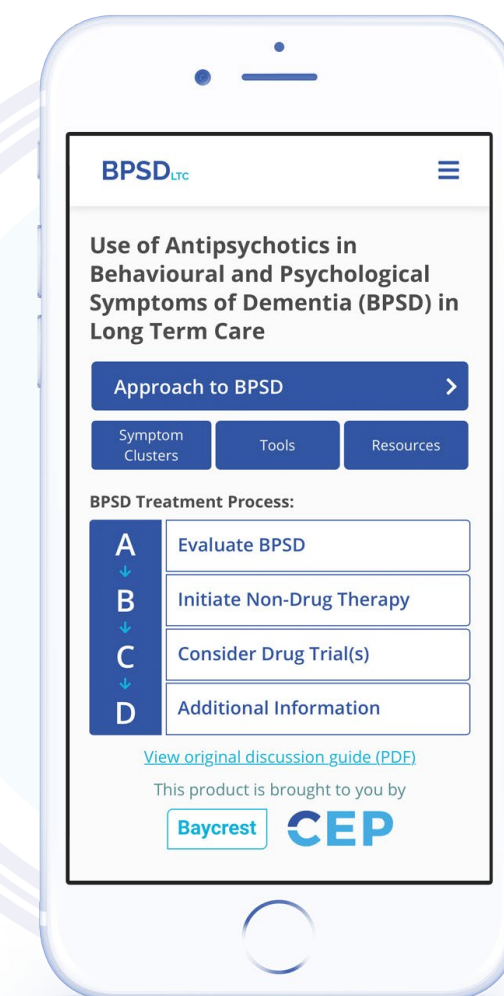
MD, CCFP, FCFP

[Use of antipsychotics in behavioural and psychological symptoms of dementia](#)

## Proven partners

Canadian Foundation for Healthcare Improvement

Baycrest Health Sciences Centre





## Promoting compassionate care in women's health



Available across  
all OHTs

The CEP continues to create tools and resources that help improve the provision of care for patients who identify as women. The [Urinary Incontinence Tool](#) helps providers introduce conversations to patients who may not otherwise proactively raise the issue. The [Women-Centred HIV Toolkits](#) supports women living with HIV and encourages clinicians to provide a participatory model of decision making for their care.

### Proven people

#### Clinical leads:

##### **Mona Loutfy**

MD, FRCPC, MPH

[Women-Centred HIV](#)

##### **Deanna Telner**

MD, MED, CCFP, FCFP

[Urinary Incontinence](#)

#### Clinical working group members:

##### **Women-Centred HIV**

Adriana Carvalho, MD, MSc, PhD

Alice Welbourn, PhD, FRCOG (Hon)

Amber Gooden, BSc

Angela Kaida, PhD

Brenda Gagnier, PRA

Carmen Logie, MSW, PhD

Denise Jaworsky, MD

Heather Wong

Jay MacGillivray, Reg. Mid.

Jesleen Rana, MD, MPH

Manjulaa Narasimhan, PhD

Mark Yudin, MD, MSc, FRCSC

Mary Kestler, MD

Mary Ndung'u, BA

Melanie Lee, PRA

Mina Kazemi, MSc

Mona Loutfy, MD, FRCPC, MPH

Muluba Habanyama, PRA

Nadia O'Brien, MPH, PhD

Neora Pick, MD, FRCPC

Rebecca Gormley, MPH

Rebecca Parry, PRA

Shaz Islam, RA

Stephanie Smith, PRA

Valerie Nicholson, PIRA

Wangari Tharao, MA

### Proven partners

Canadian HIV Women's Sexual & Reproductive Health Cohort Study

## Bridging gaps in early Lyme disease treatment



Available across  
all OHTs

The CEP bridges gaps and finds common ground. To launch an [early Lyme disease clinical tool and patient resource](#) that would be used across practitioners, collaboration and consensus building was required. As a controversial topic, varying perspectives exist on the identification and treatment of Lyme disease. To ensure a successful spring 2020 launch, the CEP developed a process where everyone felt heard and understood, and the resulting protocol was implemented in the toolkit.

### Proven people

#### Clinical lead:

##### **Cecilia Newton**

MSC, MD, CCFP

#### Clinical working group members:

John Jenkins, MD, CCFP

Kieran Moore, MD, CCFP(EM), FCFP, MPH, DTM&H, FRCPC

Liz Zubek, MD, CCFP, FCFP

Marg Sanborn, MD, CCFP, FCFP

Marnie LePage (patient representative)

Todd Hatchette, MD, FRCPC

Samir Patel, PhD, FCCM

Valerie Winberg, NP

### Proven partners

Association of Medical Microbiology and Infectious Disease Canada

Canadian Lyme Disease Research Network

College of Family Physicians of Canada

Health Quality Ontario

Public Health Agency of Canada

Nurse Practitioners' Association of Ontario

Public Health Ontario

Society of Obstetricians and Gynaecologists of Canada

57

patients in total were engaged to help develop the [women-centred HIV](#) and the [early Lyme disease](#) toolkits. Both toolkits include patient tools aiming to empower individuals to be involved in their care.

## Collaborating to connect care

### We help organizations that advance community care and provider networks

Working alongside healthcare providers, our resources are key to increasing the implementation of accessible and affordable care in neighbourhoods and provider networks across Canada.

The College of Family Physicians of Canada (CFPC) chose the CEP to develop tailored provincial and territorial resource kits, showcasing tangible actions family physicians can take to implement the Patient's Medical Neighborhood model, strengthening community healthcare relationships to provide better, more comprehensive patient care.

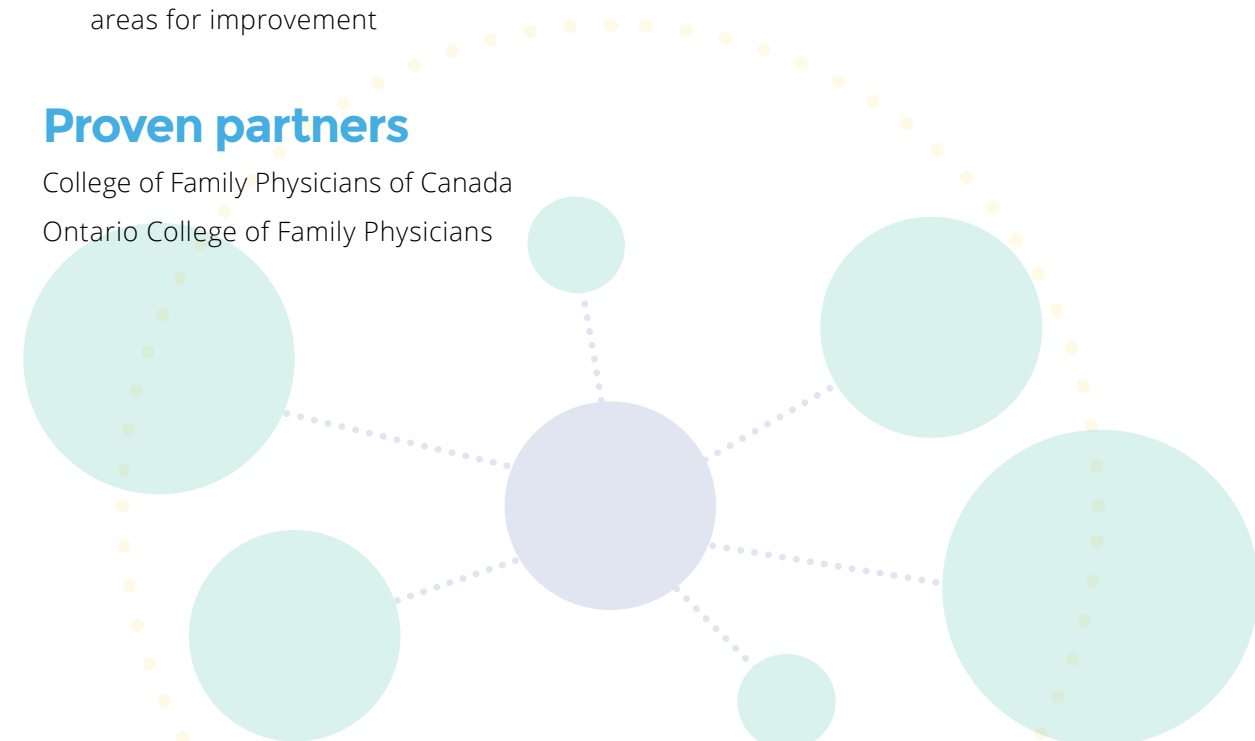
The Ontario College of Family Physicians (OCFP) also reached out to the CEP to evaluate their seven Collaborative Mentoring Networks (CMNs), which aim to provide support to primary care providers and build capacity within several clinical and practice contexts. The evaluation assessed the:

- Level of completion of proposed educational and mentoring activities
- Self-reported impact on CMN participants' capacities to improve the quality of care delivered to their patients
- Potential return on investment (ROI) for the CMNs as they currently operate, as well as areas for improvement

### Proven partners

College of Family Physicians of Canada

Ontario College of Family Physicians



## Proven partners, people and practice

### It takes confidence to proudly recognize that it's through our partners, people and practice that any part of what's been reported was possible

Advancing the health of over 10 million Ontarians, we have:

- ✓ Demonstrated a potential 80% return on investment
- ✓ Launched a comprehensive [COVID-19 Resource Centre](#) and timely one-on-one clinical education
- ✓ Achieved a 98% satisfaction rate among primary care providers.
- ✓ Developed 28+ clinical tools resources and programs
- ✓ Conducted 915+ one-on-one education visits (academic detailing) for family physicians
- ✓ Helped process 117,937+ e-referrals
- ✓ Completed 623+ cancer guideline reviews
- ✓ Developed more tools for patients, by patients
- ✓ Included fully digital online up-to-date resources

As Ontario's health care continues to evolve, be it in a pandemic or otherwise; proven, effective resources and education, delivered by experts working in partnership, is key to leading successful patient outcomes.

Thank you for your attention. We welcome your questions or comments to [info@cep.health](mailto:info@cep.health).

CEP

