

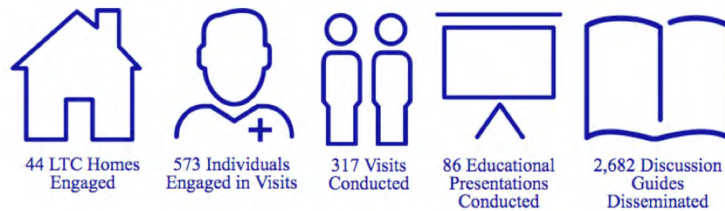


Executive Director's Update

Summer is finally here and there's a lot going on at CEP! Before we all take some well-deserved time off, here's a quick update on what we are doing to engage and support primary care providers.

The CEP and the College of Family Physicians of Canada (CFPC) have entered a multi-year partnership to collaborate on the development and implementation of practice support programs, tools and resources aimed at assisting family physicians and other primary care clinicians in their everyday practice. More details about this partnership can be found below.

CEP Academic Detailers have been busy providing high quality services to the 44 LTC homes engaged in the Appropriate Prescribing Project. Our academic detailing visits are focused on delivering objective, balanced, evidence-informed information on best practices in the homes to providers. Alongside the visits, we recently launched topic two, Falls Prevention - see the Falls Prevention Discussion Guide below. Thank you to everyone who helped with the development process of this guide and topic one's [Resident, Family and Caregiver guide on Use of Antipsychotic Medication](#).



Demand for the service continues to grow beyond control homes and we continue to receive positive feedback about the service from our evaluations. For example, of those LTC providers and staff who received an academic detailing visit and completed a post-visit evaluation form, 97% said they would be interested in receiving another visit in the future. This is what some of the LTC providers had to say:

"Good experience to meet with another member of the healthcare profession. The tools provided and the information discussed were relevant and useful for my daily practice in LTC." - LTC Provider

"Very informative session. Very vital information for all levels of staff." - LTC Provider

"This was excellent, short and to the point, and very important." - LTC Provider

We have also launched a number of clinical tools to help providers assess and manage pain. Our pain related tools include the new [CORE Neck Tool and Headache Navigator](#) and the [CORE Back Tool](#).

As part of the Knowledge Translation in Primary Care Initiative, in partnership with [Ontario College of Family Physicians](#) (OCFP) and [Nurse Practitioners' Association of Ontario](#) (NPAO), CEP is pleased to announce that the topics confirmed for 2016/2017 are:

- Pharmacotherapy & Non-Pharmacotherapy Options for Chronic Non-Cancer Pain
- Medical Assistance in Dying
- Insomnia
- Chronic Obstructive Pulmonary Disease (COPD)
- Youth Mental Health

The topics were chosen based on results of a Needs Assessment survey of primary care providers, input from the [Topic Selection Advisory Panel](#) (TSAP) and taking into account system priorities. Thank you to all representatives from the OCFP, the NPAO, [College of Physicians and Surgeons of Ontario](#) (CPSO), [Health Quality Ontario](#) (HQO), [Ontario Medical Association](#) (OMA), [Registered Nurses' Association of Ontario](#) (RNAO) and the [Ontario Ministry of Health and Long Term Care's](#) Primary Health Care Branch for participating in the TSAP. To date, approximately 1,600 providers have participated in the development of our clinical tools and resources for this project.

I am also pleased to announce the launch of [TheWell](#), a resource for providers to access clinical tools. I invite you to check out the site and share your thoughts. Over the next few months, we will be adding new content and features to the site and our hope is that as TheWell grows, it will become an environment for knowledge exchange and dialogue.

Finally, to learn more about CEP and our priorities, please take a look at our [strategic plan](#). The plan identified four priority areas and helps us achieve our mission - To close the gap between evidence and practice in health care. Thank you to our board members for helping set the direction for the next three years.

Have a relaxing and safe summer!

Sincerely,

Tupper

Partnership with College of Family Physicians of Canada

The Centre for Effective Practice (CEP) and the [College of Family Physicians of Canada](#) (CFPC) have entered into an exciting multi-year alliance partnership to collaborate on the development and implementation of practice support programs, tools and resources aimed at assisting family physicians and other primary care clinicians in their everyday practice.

This partnership is an innovative new opportunity for knowledge exchange that will facilitate the development and delivery of impactful, high quality and relevant practice support tools and programs for family physicians across Canada. Some examples of projects underway include the adaptation and customization of the [Ontario Poverty Tool](#) (created in partnership with the OCFP and the NPAO) for each province, an e-learning module on obesity prevention and management, and a clinical toolkit on osteoarthritis management. The partnership draws on the distinct strengths of each organization and opens up additional collaboration opportunities.

Need to Know

Chronic Pain: Tools for Primary Care

Various health care initiatives have been undertaken in Ontario to improve care for patients suffering from chronic pain to ensure they receive appropriate treatment, diagnostic testing and medication. According to the Ontario Government, [one in five](#)

Ontarians suffer from moderate to severe chronic pain daily or most days of the week.

Neck and Head Pain

Primary care providers know first-hand the challenges associated with treating headache and neck pain, especially when presented together. The CORE Neck Tool and Headache Navigator was developed to assist primary care providers in differentiating and assessing neck pain and headache.

Because neck pain and headache often have overlapping presentation of symptoms, this tool uses discrete approaches that help rule out other underlying conditions.

The Clinically Organized Relevant Exam (CORE) Neck Tool guides providers to recognize common mechanical neck pain and screen for other conditions. The CORE Neck Tool has been divided into four components:

1. History
2. Physical Examination
3. Management Matrix
4. Referrals

The Headache Navigator is based on the Primary Care Management of Headache in Adults clinical practice guideline and quick reference algorithm produced by [Towards Optimized Practice](#) (TOP). It assists primary care providers in managing primary headache disorders.

To access the tool, please visit:

<http://thewellhealth.ca/neckheadpain>



‘Primary Care focus on Low Back Pain’. What did providers ask for again and again? More information on linking assessment to patient education and more management options!

CEP has responded to this request and updated the CORE Back Tool and is in the process of updating the online education course. Thank you to all of the providers who gave feedback, to our Clinical Working Group, Focus Group, one-on-one user design participants, and to our Clinical Lead Dr. Julia Alleyne and Experts Drs. Hamilton Hall and Raj Rampersaud for their hard work and support.

To access the CORE Back Tool, 2016 visit:

<http://thewellhealth.ca/low-back-pain>

Double Take

In case you missed these reports the first time around:

Care Coordination Report: Commonwealth Fund Survey of Family Doctors

The report, based on the 2015 Commonwealth Fund International Health Policy Survey of Primary Care Doctors compares the responses of Ontario's family doctors with those in other parts of Canada and 10 other countries.

Mind the Safety Gap in Health System Transformation: Reclaiming the Role of the RN

For this groundbreaking report, RNAO analyzed recent trends in nursing skill mix utilization and models of care delivery. The report found the current state of nursing - the largest workforce in the Ontario health system - is at odds with the government's Patients First goals.

Recruiting Physicians to Provide Feedback to Improve the LTC Practice Reports

We are looking for long-term care (LTC) physicians to participate in usability interviews and identify opportunities to improve the content and layout of Health Quality Ontario's (HQO) LTC Practice Reports. These confidential reports are provided to physicians working in LTC that contain data and change ideas designed to help drive quality improvement.

To support this work, CEP is recruiting LTC physicians to participate in 45 minute, one-on-one usability interviews conducted over the telephone and using a webinar platform. A \$100.00 gift card to Indigo/Chapters will be offered to participating physicians as a token of appreciation.

These sessions can be conducted in the early morning (8-9 a.m.), over lunch or later in the evening (after 5 p.m.), in order to accommodate typical clinic hours.

If you are interested in participating in a usability interview, [please click here](#) in order to provide us with your availability and contact details.

Thank you in advance for your interest in participating. If you require any additional information, please feel free to contact [Hannah Loshak](#), Project Coordinator.

Falls Prevention Discussion Guide is Now Available

Falls Prevention (Topic 2) of the academic detailing Service launched this month with a new discussion guide!

The new Falls Prevention Discussion Guide is designed to help long-term care (LTC) providers assess risk and manage residents in LTC to prevent falls and the associated comorbidities.

The guide integrates best-practice evidence, clinical experience, and makes reference to relevant existing tools and services where possible.

It emphasizes:

- Being resident centered;•
- Being mindful of benefits, risks and safety concerns;
- Using an inter-professional team approach and validated tools;•
- Prescribing conservatively;
- Reassessing regularly for opportunities to deprescribe medications that are no longer needed;
- Individualizing any treatment decisions for the resident, with consideration for caregivers, family and LTC staff; and•
- The importance of enhancing resident mobility through restorative programs and activities that encourage healthy and safe mobility.

This guide is publically available online and will be provided to participating LTC homes via our academic detailers over the next few months. To view the guide please [click here!](#)



Who are CEP's Academic Detailers?

Academic detailers are licensed healthcare professionals, primarily pharmacists or nurse practitioners, who are responsible for delivering the educational visits to providers. Our academic detailers have undergone training to enhance their communication skills, develop the ability to assess and understand providers' personal needs and motivations for practice, and to understand ways to overcome barriers to change. Academic detailers have also undergone extensive topic-specific training to ensure a deep understanding of relevant clinical evidence and practice.

Mandip Khela, CEP Academic Detailer

Even before I became an Academic detailer, the whole concept of academic detailing continued to be mentioned throughout my years in school and out in practice. Evidenced-based, clinical, unbiased, and therapeutic, were just some of the key-phrases synonymous with an academic detailing service. There was even literature, dating back to the early eighties, demonstrating the merits of academic detailing and the positive influence the service had on patient outcomes. So when the opportunity presented itself, I jumped at the chance of becoming an academic detailer. And I can confidently say that this has been one of the most rewarding roles I've had the pleasure of taking on as a pharmacist.



In the early stages of my career as an academic detailer, it's been clear that two of the more salient themes arising from interactions as a Detailer are acceptance and value. Every healthcare professional I have detailed thus far, from BSO staff to administrators to nurses and physicians, have all commented to some degree on the importance of having such a service in helping them provide care to their residents. The high-level of evidence, summary guides, convenience and impartiality are just some of the key components of academic detailing that add value to one's practice. I, for one, have witnessed this value first hand as I have learned a great deal from my discussions with various healthcare professionals. With that in mind, I'd like to thank everyone I have detailed thus far for their time, experience, and expertise in strengthening my own clinical skillset and knowledge. Going forward, I'm excited to see what new heights academic detailing can achieve in helping to provide optimal resident-centered care.

Meet Our Team: Clinical Colleagues & CEP Champions



Julia Alltyn, MD, CAC (SEM), FCFP, CEP Clinical Lead

When I was thirteen years old, my father decided that skiing would be a great family activity until he shattered his right lower leg coming down an icy hill! As the eldest of five children, my job was to accompany my Dad to physiotherapy treatment. The rest is history, as the saying goes, and by age twenty-one, I was working as a physiotherapist and later graduated from McMaster University medical school and residency program. Although I practiced for many years in a community family medicine setting, my deeper interests were always rooted in sport, exercise and musculoskeletal medicine.

As an Olympic team physician, I gained an appreciation for the high yield history and relevant examination since clinical decisions had to be made quickly and accurately and often on the competition field. The motto "higher, stronger, faster" appropriately fits the pressures that medical practitioners often feel when trying to manage their patients' expectations and also keep up with evidence-based practice. After completing a Master's focused in education for health professionals, my journey led to work in development and design of interactive courses, clinical tools and online education. Finding the teacher inside the learner seemed to unlock a sense of creative simplicity that allowed me to take my years of training and share it collaboratively in every project.

What kind of projects have made me proud? The CORE Back tool has been a very satisfying journey - working with world renowned co-authors, witnessing the transformation of learners in a teaching session and then watching the spark of online learning quickly gain explosive momentum. I was at a gathering for the University of Toronto recently where on two occasions someone approached me and mentioned their use of the CORE Back Tool. Interestingly, one conversation was about the Core Tool spreading to Botswana and the other was about it spreading to Physician Assistants. I am excited for the launch of the CORE Neck Tool to see where the next destination will be.

Currently, I am working at Toronto Rehab where I have a focused practice in musculoskeletal medicine, rehabilitation and sport medicine. At the Department of Family and Community Medicine at the University of Toronto, I am the director of the Enhanced Skills program in focused family practice. My work is still interesting or maybe I am still interested in my work, either way, a satisfying career is a valuable possession in these changing times.

My personal goal: to keep skiing at least until I am seventy-five, and that is a long way away! Thanks Dad!



Arun Radhakrishnan, MSc, MD, CM CCFP, CEP Clinical Lead

I am a family physician with a focused practice in chronic non-cancer pain and the father of two busy young children who keep me on my toes and challenge me to find a happy and healthy balance between work and my family. I completed my undergraduate medical school training at McGill University and then moved to the University of Toronto to complete my post graduate training in family medicine. More recently, I completed a Master's degree in health services research with a focus on knowledge translation and eHealth at the Institute for Health Policy Management and

Evaluation at the University of Toronto.

Over my years in practice, I have had the opportunity to work in a variety of different primary care settings (urban to rural, academic to community) in different regions of Ontario and have seen many of the challenges that face our health care system such as sustainability, efficiency and effective patient-centered practice.

Inspired by my father, I have had a long standing interest in information and communication technologies (ICTs) and their application in the health care system particularly to support the translation of various forms of knowledge. This interest guided my focus during my master's degree. That, in combination with my observations about challenges to the health care system, led me to study how primary care roles could be optimized by the use of ICTs for knowledge translation.

Within the theme of knowledge translation, I have enjoyed opportunities as an adjunct Assistant Professor with the Department of Family and Community Medicine at the University of Toronto to teach and develop educational curricula for undergraduate & post graduate medicine, graduate studies and for continuing professional development.

I also have an interest in developing, implementing and evaluating innovative health care system solutions using knowledge translation tools and ICTs to address some of the challenges I think our system faces. In that capacity, I have had the opportunity to be the current co-chair for the Collaborative Mental Health Network and the Medical Mentoring for Addictions and Pain Network that seeks to use ICTs and knowledge translation tools to optimize the roles of nearly 800 primary care clinicians. The opportunity to work with the CEP as one of the clinical leads on the development of tools for the Knowledge Translation in Primary Care Initiative was a natural fit for my interests and I believe is one that helps to address important health system challenges.

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