



## Executive Director's Update

On behalf of the the Centre for Effective Practice (CEP), I'm delighted to share with you a brief update, as we have a number of exciting provincial and corporate initiatives underway. By sharing this information, I hope we can continue to collaborate and work together to improve outcomes for Canadians.

We are moving ahead with two priority projects – the Knowledge Translation in Primary Care (KT in PC Initiative) and CEP's Academic Detailing Service as part of the Appropriate Prescribing Demonstration Project – with our various partners.

Our KT in PC Initiative is a three-year endeavor to develop provider tools/resources and ultimately create an ongoing KT “infrastructure” for primary care; one that can be used for numerous clinical topics and can be integrated with other work being done to increase alignment of efforts. CEP is collaborating with the Ontario College of Family Physicians (OCFP) and Nurse Practitioners' Association of Ontario (NPAO) on this project as well as other key primary care stakeholder groups to enhance the quality and uptake of this work. As part of this initiative, we recently launched a poverty clinical tool profiled below.

As part of the Appropriate Prescribing Demonstration Project, CEP is implementing its Academic Detailing Service to Long Term Care (LTC) Homes. The CEP team has been fortunate to work with leaders from the United States, Australia, and Canada to develop an approach that can support Ontario's LTC sector. Our Academic Detailing Service entails service-oriented visits focused on delivering providers with objective, balanced, evidence-informed information on best practices. Our detailers began reaching out to LTC homes in October 2015.

From a governance perspective, we are pleased to welcome three new board members to our team - Bernita Drenth, Hugh McLeod, and Dr. David Price. We are very excited to have these highly esteemed health leaders join CEP and believe their experience and expertise will be of significant contribution. We are looking forward to working with them to chart the path forward and develop our three year strategic plan.

I hope you find this update helpful. Please feel free to share it with others who you think might be interested. I look forward to keeping you apprised of CEP's activities in the months ahead.

Sincerely,

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## Need To Know - Poverty Clinical Tool

*"The poverty tool has filled a major gap in my ability to address my patients' health needs. I*



*always saw, in my practice, and heard, from my patients, that poverty and other social issues pose a huge barrier to achieving health goals, but I never knew what to do about it. The poverty tool finally provided me with a toolkit to challenge this major risk to my patients' health."*

*- Dr. Gary Bloch, Poverty Tool*

*Clinical Lead*

We are proud to announce the launch of a new tool to help primary care providers manage

the health and wellbeing of Ontarians living in poverty. Poverty: A Clinical Tool for Primary Care Providers has been designed for use in a typical office visit and proposes a simple three-step approach:

1. Screen everyone;
2. Consider poverty as a risk factor in clinical assessment; and,
3. Intervene by educating patients about income supports and connecting them with key resources.

[Click here to download a copy of the tool and access more relevant information including supporting resources.](#)

**Meet Our Team: Clinical Colleagues & CEP Champions**

**Deanna Telner - Clinical Co-Lead, Preconception Healthcare Tool**

**Tell us a little bit about yourself? Practice/area of focus?**



I grew up in Ottawa, studied physiology at McGill, went to medical school at University of Ottawa, and completed my residency at University of Toronto, Mount Sinai Hospital. Currently, I work with the South East Toronto Family Health Team, a community-based, teaching site. As a teaching site, we consistently have medical students at every stage in their training and family medicine residents working with us, as well as with our interprofessional health care team. I oversee all family medicine academic projects and also facilitate a monthly journal club with residents where we review and critically appraise clinical trials from recent medical literature. I teach procedure workshops to our trainees (gynecological procedures/dermatology/breast) and am an education researcher with University of Toronto, Department of Community and Family Medicine, focusing on postgraduate medical education methods and other community-based research areas.



**Out and About**

It was a busy conference season for CEP as we exhibited and participated in various events. Whether it was the launch of our Poverty tool and facilitation of focus group sessions at Family Medicine Forum or the introduction of our Academic Detailers at the Ontario Long Term Care Physicians Conference, we engaged with hundreds of clinicians during this year's conferences.

Thank you to all those who visited our booth and picked up our materials at the following conferences: Nurse Practitioners' Association of Ontario, Ontario Long Term Care Physicians, Association of Family Health Teams of Ontario, Family Medicine Forum, Ontario Medical Group Management Association, and Health Quality Transformation.

**Now Available in TELUS PS Suite EMR - Preconception Healthcare Tool**

CEP is pleased to announce that we recently partnered with TELUS to create a PS Suite custom form for the Preconception Health Care Tool. This custom form contains all of the content from the original CEP Tool. [Click here](#) to download the custom

In addition, I review and accredit National Mainpro-M1 programs for the College of Family Physicians of Canada and Co-Chair the Clinical Research Committee at Toronto East General Hospital.

**What's been the most satisfying/rewarding experience in your career to date?**

This may sound dull, but in the last few years I've really seen the power of having a long-term relationship with a patient and their family. Many of us quoted this as a reason for going into family medicine as a specialty choice, however, it has taken me 15 years to really understand how important this is to patients, and to us. Seeing patients through different life stages and gaining a deeper glimpse into their lives by also following their family members is a privilege, and gives us a unique perspective into their medical and psychosocial health.

From an educator perspective, one of the most rewarding experiences was when my colleague Blaise Clarkson and I designed a dermatology pad to teach residents dermatologic procedures. We felt this was necessary because existing models were costly and single use. We had a growing number of residents to teach, and we wanted to have one model that they could use to learn and practice all the family medicine dermatological procedures they needed to learn. We designed the model using inexpensive skin pads, vitamin E, artificial nails, glue and a pen, and called it the "Comprehensive Dermatologic Procedure Pad". They were a hit the first year we used them and we now make and use them every year to teach our dermatology workshop ([and we published our innovation](#)).

**What do you do in your free time?**

Pretty much all my non-work time is spent with family – my husband Mark and children Andrea (12) and Daniel (10). Chauffeuring, organizing, hanging out with them (they are still at the age that they want to do that!). In my down time, I like to read fiction books and do yoga.



**Lindsay Bevan - Project Coordinator, CEP**

**What do you enjoy most about the work you do?**

Learning and implementing new methods to improve health care quality measurement in Ontario. Shortly after I started working at CEP in 2013, I was fortunate to work as the Project

Coordinator on a Delphi panel project aimed at developing quality indicators for chronic kidney disease management in primary care. This was CEP's and my first experience conducting a Delphi panel. Since then we have had the opportunity to conduct numerous other Delphi panels, including one aimed at identifying indicators for measuring the quality of small and rural hospitals in Ontario, and another to identify indicators for measuring the quality of diabetes management in hospital's ambulatory care clinics.

**What is your greatest accomplishment?**

form, and for instructions on how to import it into your Electronic Medical Records (EMRs).

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**Cognisant MD Partnership**

We are pleased to announce our partnership with CognisantMD to support the delivery of evidence based programs and tools in clinical practice. This partnership will allow us to deliver our many evidence based programs and tools through CognisantMD's Ocean Platform on patient tablets, secure email, and data collected directly in EMRs.

[To learn more about this exciting partnership, click here.](#)

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**Double Take**

In case you missed these interesting reports and studies the first time around:

Quality in Primary Care:

Setting a foundation for monitoring and reporting in Ontario.

Baker-Price Report: Patient Care Groups - A new model of population based primary health care for Ontario.

How Canada Compares:

Results from the Commonwealth Fund 2014 International Health Policy Survey of Older Adults.

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**Connect**

**We need your input!**

We need input from primary care providers - specifically family physicians and primary care

Working with a team to implement CEP's Academic Detailing Service in Ontario's LTC Sector. Our Academic Detailing Service offers LTC providers with one-one-one visits focused on delivering objective, balanced, evidence-informed information on best practices to optimize clinical care. This information is always tailored to each provider's expressed needs and is delivered at a time that is convenient for them.

### **What's the one thing that most people don't know about you?**

Outside of working at CEP, I volunteer as Project Manager of the Haliburton Lake Cottager's Association's Shoreline Naturalization Plan. This plan aims to improve the water quality of Haliburton Lake by protecting and rebuilding the natural vegetation along the shoreline of public and private properties.

nurse practitioners - to inform the tools we are developing for next year. Let us know what topics are of interest to you.

[Take the survey now.](#)

Join our conversation on Twitter by following:

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## **Program Profile - Academic Detailing Service, Appropriate Prescribing**

CEP's Academic Detailing Service launched in the first wave of LTC homes in fall of 2015 (21 homes). Management of behavioural and psychological symptoms of dementia, with a focus on antipsychotic medications, was chosen as the first topic. To date, we have engaged 56 LTC providers and staff, and conducted 59 visits! Approximately 20 additional LTC homes have been confirmed for the second wave and we will begin offering Detailing visits to these homes in spring of 2016.



To support the Academic Detailing visits, CEP has developed a discussion guide designed to help providers understand, assess, and manage residents in LTC homes with behavioural and psychological symptoms of dementia, with a focus on antipsychotic medications. This guide integrates best-practice evidence, and clinical experience, and makes reference to relevant existing tools and services wherever possible. [To read more about this program, project, and to access the guide, click here.](#)

We are hosting a training workshop on Academic Detailing for healthcare professionals interested in developing the basic skills of delivering one-on-one visits with providers on evidence informed clinical decision making. The workshop, taking place from January 10-13, 2016 in Toronto, Ontario, Canada, will be facilitated by Frank May, the Service Director of DATIS, the Drug and Therapeutics Information Service in South Australia with leadership from Loren Regier, Co-Director of CEP's Academic Detailing Service and Program Coordinator for Saskatchewan's RxFiles. [Click here for more information and to register!](#)